



# Controlling low birth weight (BBLR) cases with an asset-based community development (ABCD) approach in Makassar city

Rosdianah Rahim<sup>1</sup>, Nadyah Haruna<sup>2</sup>, & Muhammad Nur Alamsyah Rajab<sup>3</sup>

<sup>1,2,3</sup>Medical and Health Science Faculty, Alauddin State Islamic University Makassar

Correspondence Email: [muhammadnuralamsyahrajab@gmail.com](mailto:muhammadnuralamsyahrajab@gmail.com)

## ABSTRACT

Weight less than 2500 grams is called low birth weight (BBLR). This indicates child growth and development until adulthood and shows the nutritional status of the fetus during the womb. The community-owned Asset Based Community Development (ABCD) approach, which aims to obtain common goals in BBLR control, begins with asset identification, problem analysis, and evaluation of possible planning, implementation, and utilization. The author's research focuses on finding human resource assets (HR) in controlling Low Birth Weight (BBLR) cases. This qualitative research uses the Asset-Based Community Development (ABCD) approach and uses interview methods or in-depth interviews. Snowball sampling in the Makassar Health Center area was used as an informant. The results of the study show that human assets, namely education and knowledge of pregnant women about nutritional fulfilment during pregnancy, the satisfaction of supplementary food (PMT), and kangaroo care methods by applying Islamic concepts, can be used to control cases of low birth weight (BBLR) in Makassar. This asset is beneficial in preventing low birth weight (BBLR) issues.

**Keywords:** Asset Based on Community Development (ABCD); pregnant; Low Birth Weight (BBLR)

## 1. INTRODUCTION

The infant mortality rate is closely related to the incidence of Low Birth Weight. Based on data from the Ministry of Health of the Republic of Indonesia 2020 in 2019, the cause of most infant deaths was the incidence of Low Birth Weight (BBLR), with cases as much as 35.5%. Other causes of death include asphyxia at as much as 27.0%,

congenital abnormalities at 12.5%, sepsis at 3.5%, tetanus neonatorum at 0.3%, and others at 21.4%.

Low Birth Weight (BBLR) is one of the health problems in the community. Low Birth Weight (BBLR) is defined as a baby born with a body weight of <2500 grams. Babies with low birth weight can cause an inappropriate cognitive and motor developmental disorder compared to babies with average birth weight. Babies with low birth weight also have a higher risk of experiencing it.

Birth weight is an essential indicator of a baby's health, a significant factor for survival and the baby's future growth and mental development. Judging from maternal factors, several factors affect low birth weight, including pregnancy and fetal factors. Maternal factors include nutrition during pregnancy, maternal age (35 years), pregnancy distance too close, and diseases from the mother herself. Pregnancy factors such as hydramnios and multiple pregnancies fetal factors that affect low birth weight include congenital disabilities and infections in birth. Other risk factors include parity, economic status, education and employment.

Based on data from the South Sulawesi Provincial Health Office, Makassar City is one of the areas with the second highest BBLR incidence rate after Bulukumba Regency among 24 regencies/cities in South Sulawesi (12.2%). Asset Based Community Development (ABCD) is a method of approach in community development. This approach emphasizes the inventory of assets contained in the community that are seen as supporting community empowerment activities.

Asset-Based Community Development (ABCD) is an alternative to community empowerment using assets. Assets in this context are given the meaning of potential owned by the community by using the potential or wealth owned by the community as the ultimate weapon to carry out empowerment programs. This potential can be in the form of wealth owned within oneself (intelligence, care, mutual assistance, togetherness, and others) or the availability of Natural Resources (SDA).

## **2. METHODS**

This type of research is qualitative with the Asset Based Community Development (ABCD) approach with the In-Depth Interview method or in-depth interview. The method of taking informants in this study used snowball sampling techniques. The informants in this study are people who are authorized and directly involved in terms of variables that have authority and knowledge regarding the identification of assets related to health services and BBLR cases in Makassar City, involving key figures consisting of midwives, cadre mothers, religious leaders, and pregnant women. Data

collection methods are obtained from observation, in-depth interviews and documentation.

### **3. RESULTS AND DISCUSSION**

#### **Result**

##### Individual Assets

Human assets can be used to build and develop the potential in Makassar in the form of various kinds of abilities and expertise that various potentials have.

##### Health Workers

The number of Puskesmas staff with sufficient staff service at the Puskesmas quiet and in the working area of the Puskesmas.

##### Education and knowledge

The education and knowledge of mothers are related to the incidence of low birth weight, knowledge of pregnant women is good enough about pregnancy care, nutritional fulfilment during pregnancy, and danger signs of pregnancy. Pregnant women also use technology to find information about their pregnancy, and the existence of groups of pregnant women created by the Puskesmas makes it easier for mothers to ask about the condition of their pregnancy, exchange information about pregnancy with midwives and other pregnant women and make it easier for health workers to monitor the condition of pregnant women.

##### Gastronomy

Some pregnant women can process all types of dishes, so this ability can make them able to apply their knowledge directly about what menus are suitable for consumption for pregnant women.

##### Weight gain

The knowledge of pregnant women in fulfilling nutrition during pregnancy is good enough so that the nutritional needs of mothers are met and weight gain occurs during pregnancy.

##### Age

Vulnerable age of pregnant women over 20 years and under 35 years is a good age in pregnancy. The World Health Organization (WHO) recommends the age

considered the safest to undergo pregnancy and childbirth is 20-35 years.

## **Discussion**

The most potent factors associated with BBLR health are employment, education, and maternal knowledge. So, efforts to prevent and control BBLR can be made with several efforts, namely providing adequate health education about BBLR to pregnant women. In addition, it can also carry out supervision and monitoring.

The lower the baby's weight, the more critical it is to monitor his development in the weeks after birth. Mothers who consistently maintain their health by consuming nutritious foods and applying a good lifestyle will give birth to healthy babies. In contrast, mothers who experience nutritional deficiencies have the risk of giving birth to low weight.

Research conducted by (Budiarti, 2022) explained that the efforts made by the government to reduce the incidence of low birth weight include increasing pregnancy checks at least four times during pregnancy, as well as conducting orientation for the Childbirth Planning and Prevention of Complications (P4K) Program, where P4K is included in midwives' efforts to increase knowledge of pregnant women, husbands and families about risky pregnancies, Dangers of pregnancy and invitation to mothers, husbands and families to plan a pregnancy.

The effort made is by providing additional food. According to the Regulation of the Minister of Health Number 51 of 2016, concerning Nutritional Supplementation Product Standards, the form of supplementary food given to pregnant women is biscuits containing protein, linoleic acid, carbohydrates, and enriched by 11 vitamins and seven minerals.

Human assets are significant assets for the people of Makassar, with their knowledge and skills that can be used to prevent cases of low birth weight, such as skills in processing food and choosing good food supplements during pregnancy. Carry out programs for pregnant women classes and cooking classes for mothers and PMT.

Social assets are social features such as relationships between people, norms and beliefs that can increase the productive potential of a society. Social assets are significant for society, and relationships between individuals in the community increase the sense of community and kinship.

In communities with religious activities such as taklim assemblies held weekly in several mosques in each RW and community service activities to clean the environment, a cooking program can be planned to fulfil nutrition for residents.

This sense of togetherness and kinship can be a foundation for the community to work together to help each other prevent cases of BBLR incidents. Activities for pregnant women can be carried out, such as the re-implementation of classes for pregnant women and plans to make cooking classes for pregnant women in the hope that these activities can help prevent cases of BBLR

Physical assets are significant assets for the community because these physical assets are the initial capital of the community. This is for health workers and pregnant women to prevent BBLR incidents. Puskesmas is a health service facility that organizes public health efforts and first-level individual health efforts, prioritizing promotive and preventive efforts to achieve the highest degree of public health in its work area. Puskesmas plays a role in health-minded development in its area, intending to realize a community that has healthy behaviour (awareness, willingness and ability to live healthy); able to reach quality health services, live in a healthy environment; and have an optimal degree of health, both individual, family, group and community. In addition, Puskesmas can also be used as a place for pregnant women to get information about care during pregnancy.

The community can also use Posyandu as a forum or place to gather and exchange ideas and discuss problems with pregnancy conditions, the baby's condition, and the region's health conditions.

The community uses the mosque as a place of worship. It can also be used for scientific assemblies, taklim assemblies or recitations held by residents. The community can use economic assets to build a healthy lifestyle. With this asset, the community can help each other provide good nutritional fulfilment food by building nutritious food cooking classes for pregnant women and toddlers. In addition to obtaining funding from puskesmas, this economic asset can accelerate the improvement of nutritional fulfilment for pregnant women, and toddlers can help each other by working together to provide food facilities and foodstuffs.

#### **4. CONCLUSION**

Based on the research results and discussion above, the following conclusions can be drawn: (1) Human Assets can be used to control the incidence of low birth weight. With the ability and skills of medical personnel, pregnant women and the community will be able to maintain health during pregnancy; (2) Physical assets in the form of puskesmas, posyandu, and mosques can be used as a means of increasing knowledge and control of BBLR cases. (3) Social assets include togetherness, mutual assistance, security, government and religious assistance (routine studies). (4) Economic assets in

the form of sources of income for the community in the working area of the Tamangapa Health Center vary, namely from the profession of each citizen.

## REFERENCES

1. Ministry of Health of the Republic of Indonesia. Lowbirthweight incidencedata .(2020)
2. Hartiningrum, I., & Fitriyah, N. Low Birth Weight Infants (BBLR). *Journal of Biometrics and Population*, 7 (2), 97. (2019)
3. Aprilliya Wibowo Putri, Ayu Pratitis, Lulu Luthiya, Sry Wahyuni, A. T. Maternal Factors on the Incidence of Low Birth Weight Babies. *Higea JournalofPublicHealthResearchandDevelopment* , 3 (1), 55–62. (2019)
4. South Sulawesi Provincial Health Office. Low Birth Weight (BBLR) data. 2020;
5. Makassar City Health Office. Data on the incidence of low birth weight. 2020;
6. Prof. John L. McKnight, C. R. *Asset-BasedCommunityDevelopment Process What Is Distin active about an Asset-Based.* (2018)
7. Maulana, M. *Asset-Based Community Development: Community Development Strategies.* *Empower:JournalofIslamicCommunity Development* , 4(2),259,(2019)