

LEVEL OF KNOWLEDGE, EDUCATION, INCOME AND PARENTING PATTERNS OF TODDLER CHILDREN ON STUNTING INCIDENTS

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ABSTRAK : TINGKAT PENGETAHUAN, PENDIDIKAN, PENDAPATAN DAN POLA PENGASUHAN ANAK BALITA TERHADAP KEJADIAN STUNTING

Latar Belakang : Stunting adalah kondisi gagal tumbuh pada anak dibawah lima tahun (balita) yang disebabkan oleh kekurangan gizi kronis, sehingga menyebabkan anak gagal tumbuh (pendek) tidak sesuai dengan usianya. Stunting adalah ukuran yang tepat untuk mengidentifikasi terjadinya kurang gizi jangka Panjang pada anak-anak. Anak balita dengan stunting bisa menjadi indikator kunci yang sensitive dari kesehatan ibu dan anak.

Tujuan : Penelitian ini bertujuan untuk mengetahui hubungan tingkat pengetahuan, pendidikan, penghasilan orang tua dan pola asuh anak balita terhadap kejadian stunting pada balita Usia 12-59 bulan.

Metode : Jenis penelitian observasional dengan rancangan *Cross sectional*. dilakukan di Wilayah Kerja UPTD Puskesmas Kuta Selatan. Sample adalah seluruh ibu yang memiliki balita 12-59 bulan pada bulan 2 September 2022 sampai 31 Oktober 2022. Jumlah sampel sebanyak 93 orang ibu yang dipilih dengan metode purposive sampling. Data dikumpulkan dengan menggunakan kuesioner.

Hasil : Berdasarkan analisis data dengan menggunakan uji *Chi square* menunjukkan bahwa tingkat pengetahuan (0,037), Pendidikan (0,019), penghasilan orang tua (0,034), dan pola asuh anak balita (0,025)

Kesimpulan : Ada hubungan yang signifikan dengan kejadian stunting karena nilai P value < 0,05.

Saran : Bagi Puskesmas dapat merencanakan program pencegahan pada balita stunting dengan lebih meningkatkan pengarahannya tentang masalah stunting, bagi responden untuk rutin memantau pertumbuhan balita diantaranya melalui penimbangan dan pengukuran tinggi badan pada balita agar mengurangi resiko terjadinya balita stunting dimasa mendatang.

Kata Kunci : Pengetahuan, Pendidikan, Penghasilan, Pola asuh

ABSTRACT

Background: Stunting is a condition of failure to grow in children under five years (toddlers) which is caused by chronic malnutrition, causing the child to fail to grow (short) inappropriate for his age. Stunting is an appropriate measure to identify long-term malnutrition in children. Children under five with stunting can be a sensitive key indicator of maternal and child health.

Objective: This study aims to determine the relationship between level of knowledge, education, parental income and parenting patterns of toddlers on the incidence of stunting in toddlers aged 12-59 months. Method: This type of observational research with a cross sectional design. carried out in the UPTD Work Area of the South Kuta Health Center. The sample was all mothers who had toddlers aged 12-59 months from 2 September 2022 to 31 October 2022. The total sample was 93 mothers who were selected using the purposive sampling method. Data was collected using a questionnaire.

Results: Based on data analysis using the Chi square test, it shows that the level of knowledge (0.037), education (0.019), parents' income (0.034), and parenting patterns for children under five (0.025)

Conclusion: There is a significant relationship with the incidence of stunting because the P value is <0.05.

Suggestions: Community health centers can plan prevention programs for stunting toddlers by further increasing guidance on the problem of stunting, for respondents to routinely monitor toddler growth, including by weighing and measuring the height of toddlers in order to reduce the risk of stunting toddlers in the future.

Keywords: Knowledge, Education, Income, Parenting style

INTRODUCTION

The world has experienced positive improvements regarding stunting management over the last 20 years. The United Nations International Children's Emergency Fund (UNICEF) estimates that the number of children suffering from stunting under the age of five will be 149.2 million in 2020, down 26.7% compared to 2000 which reached 203.6 million. However, progress in dealing with stunting is not evenly distributed throughout the region. The number of children under five suffering from stunting in West and Central Africa is still increasing by 28.5% from 22.8 million in 2000 to 29.3 million in 2020. East and South Africa are experiencing the same thing. The number of toddlers experiencing stunting rose 1.4% from 27.6 million in 2000 to 28 million in 2020. Meanwhile, the highest decline in the number of toddlers suffering from stunting came from East Asia and the Pacific. This region recorded 20.7 million children under five suffering from stunting last year, a decrease of 49.75% from 2000 which reached 41.2 million. The number of children under five suffering from stunting in Eastern Europe and Central Asia decreased by 46.8% from 4.7 million in 2000 to 2.5 million in 2020. In Latin America and the Caribbean, the number of toddlers suffering from stunting fell 43.13% from 10.2 million in 2000 to 5.8 million last year. Then, the number of toddlers suffering from stunting in South Asia decreased 38% from 86.8 million in 2000 to 53.8 million in 2020. Meanwhile, the number of children under five suffering from stunting in the Middle East and North Africa fell 14.4% from 9 million in 2000 to 7.7 million last year. United Nations Children's Fund (UNICEF, 2021).

The results of the 2018 Basic Health Research show that the prevalence of short toddlers has increased from 2016, namely 27.5%, in 2017, namely 29.6% and to 30.8% in 2018. This data shows an increase of approximately 1.6% per year. Meanwhile, stunting data in 2019 from the results of research on the nutritional status of toddlers in Indonesia showed a decrease in the prevalence of stunting by 3.1% to 27.7%, then in 2021 the prevalence of stunting was at 24.4 percent or 5.33 million toddlers. The prevalence of stunting has decreased from previous years. However, Indonesian President Joko Widodo targets the stunting rate to fall to 14 percent by 2024 (SSGI, 2021).

The negative impact that nutritional problems can have in this period, in the short term, is disruption of brain development, intelligence, physical growth disorders and metabolic disorders in the body. Meanwhile, in the long term, the bad

consequences that can arise are decreased cognitive abilities and learning achievement, decreased immunity so that people get sick easily, and a high risk of developing diabetes, obesity, heart and blood vessel disease, cancer, stroke, and disability in old age. as well as uncompetitive work quality which results in low economic productivity (Kemenkes RI, 2016).

In 2020, the Bali Provincial Health Service stated that cases of stunting or the condition of failure to grow in children in Bali Province in 2020 decreased compared to 2019. In Jembrana Regency the number of cases was 2.3%, Tabanan 8.4%, Badung 6.2 %, Gianyar 4.9%, Klungkung 7.3%, Karangasem 13.1%, Buleleng 8.2% and Denpasar City 2.1% (Dinas Kesehatan Provinsi Bali, 2021).

Many factors influence the incidence of stunting in toddlers, but this study focuses on knowledge, education and parenting factors. The incidence of stunting can be directly influenced by food intake, infectious diseases, low birth weight and genetics. Meanwhile, indirect factors are the mother's knowledge and parenting style, with education being the root of the problem. Mother's knowledge about stunting has an important role in preventing stunting. Knowledge is everything that humans or respondents know about health and illness or wellness, for example: about stunting including; causes, impacts, characteristics, ways to prevent stunting, nutrition, sanitation, and others. Knowledge is an important domain aspect for shaping one's actions. The more knowledge someone has, the more positive their behavior will be. The attitude of feeding toddlers is influenced by the mother's knowledge, mother's knowledge is one aspect that has a significant influence on the incidence of stunting. Therefore, efforts to improve stunting can be tried by increasing knowledge so that it can improve attitudes towards feeding children (Dewi Hanggraeni, 2012)

Several journals say that there is a significant relationship between maternal knowledge and the incidence of stunting. Study (Purnama AL et al., 2021) said that there was a significant relationship between maternal knowledge and the incidence of stunting in toddlers aged 12-59 months in the working area of the Lawawoi health center, Sidrap Regency. This is in line with research (Ramdhani et al., 2020) who said that from the results of a study of 10 journals, there was a relationship between maternal knowledge and the incidence of stunting. However, mother's knowledge is still lacking. The reason for mothers' lack of

knowledge about stunting is because not all mothers of toddlers visit the posyandu.

Another factor that can influence the incidence of stunting in toddlers is maternal education according to research (Husnaniyah et al., 2020) Another factor that can influence the incidence of stunting in toddlers is maternal education according to research (Prabawati & Andriani, 2021) who said that there was a relationship between the mother's level of education and knowledge and the incidence of stunting in the Batauga Community Health Center Work Area. That's what it says (Sutarto et al., 2020) In his research, it showed that there was a significant relationship between the level of maternal education and family income on the incidence of stunting among toddlers in the working area of the Labuhan Ratu Health Center, Bandar Lampung city.

BPS research in "Analysis of Early Childhood Development in Indonesia 2018" states that maternal education influences children's physical development, generally the percentage of children aged 36-59 months whose physical ability development is appropriate to their age development stage will increase as the mother's education increases. Education is calculated based on the last diploma from formal education. A mother's education influences whether or not she receives information easily. This means that mothers who have higher education will find it easier to absorb information obtained from various sources. Mothers who have little or no education will make it difficult for mothers to prevent stunting because they lack the ability to absorb information and understand things related to toddler nutrition. (Luis & Moncayo, 2018).

Another indirect factor which is a risk factor for stunting in toddlers is parenting style. Wrong parenting patterns such as giving the wrong food can result in low nutritional intake in children. A good mother's parenting style will prevent toddlers from experiencing nutritional problems. Several journals say that there is a significant relationship between the incidence of stunting and parenting patterns. Study (Hardianty, 2019) said that there was a significant relationship between parenting styles and the incidence of stunting in children aged 24-59 months in Jelbuk District, Jember Regency. This is in line with research conducted by (Fujica Wati et al., 2021) who said that there was a significant relationship between parental parenting patterns and the incidence of stunting in toddlers aged 24-59 months in Neglasari Village, Tanjung Agung Health Center Working Area, South Lampung Regency, Year.

Parenting style is the behavior of parents in caring for toddlers. Parental parenting is one of the problems that can influence the occurrence of stunting in toddlers. Parental parenting styles that are inadequate or poor have a greater chance of children being affected by stunting than parents with good parenting styles (Aramico et al., 2016)

The negative impact of stunting in the short term is a decrease in brain intelligence, disruption of children's physical growth and development, and disruption of their body's metabolic system. The impacts that arise in the long term are children's low cognitive abilities so they are unable to achieve, their immune system is low so they often get sick, they have a high risk of developing diabetes, obesity, heart failure and disability in old age, and low quality of work due to lack of unable to compete so that economic productivity is low (Kemenkes RI, 2018b)

The incidence of stunting can continue to increase if the factors of maternal knowledge, maternal education, parental income and parenting patterns are not taken into account, so researchers want to examine the relationship between knowledge, education, parental income and parenting patterns with the incidence of stunting in toddlers aged 12-59 months in the region. South Kuta Community Health Center UPT work

RESEARCH METHODS

This type of research is observational analytics with cross design sectional, which aims to assess the relationship between mother's knowledge about growing up flowering and development children aged 1-3 years were measured at one same time. The sample population in this study was 93 mothers who had children aged 12-59 months. The study met the inclusion criteria (mothers with children aged 12-59 years) and exclusion (mothers who were not willing to complete the questionnaire). The research sample was taken using consecutive non-random sampling technique. Material and the research instrument uses a questionnaire mother's knowledge about stunting. Data collection was carried out by filling out a knowledge questionnaire mothers to assess the understanding of mothers who have toddlers regarding stunting and its factors influence it. Mother's knowledge is considered good if you meet the score between 10-18, meanwhile knowledge is lacking if the score is 0-9.

RESEARCH RESULTS

Based on research conducted by the South Kuta Health Center UPTD Work Area involving 93

respondents regarding the relationship between level of knowledge, education, parental income and parenting patterns for children under five 12-59 months, the results will be presented in table form below.

Table 1
Characteristics of respondents based on mother's age, parents' occupation, toddler's gender and number of family members on the incidence of stunting

Variable	Frequency (person)	Proportion (%)
Mother's Age		
< 24 Years	26	28,0
25-34 Years	44	47,3
> 35 Years	23	24,7
Parent's Job		
IRT	39	41,9
Private	46	49,5
Businessman	6	6,5
Civil Servants	2	2,2
JK Toddler		
Woman	65	69,9
Man	28	30,1
Number of Family		
≤ 4 people	61	69,9
> 4 people	32	30,1

Source: Research Data

Table 1. above shows that data obtained on the frequency distribution of maternal age < 24 years were 26 respondents (28.0%), 25-34 years were 44 respondents (47.3%), > 35 years were 23 respondents (24, 7%). Then, the most parents' jobs were those who had private jobs, namely 46 respondents (49.5%) and the fewest who had civil servant jobs, namely 2 respondents (2.2%). Meanwhile, the gender of toddlers that was mostly found was female, namely 65 respondents (69.9%) while only 28 respondents were male (30.1). And for the number of family members, the largest number was those who had family members ≤ 4 people, namely 61 respondents (69.9%) while those who had family members > 4 people were 32 respondents (30.1%).

Table 2
Knowledge, education, parental income and parenting patterns on the incidence of stunting

Variable	Frequency (persen)	Proportion (%)
Knowledge		
Good	62	66,7
Not enough	31	33,3
Education		
TS	4	4,3
SD	2	2,2
SMP	36	38,7
SMA	29	31,2
College	22	23,7
Parents' Income		
< 1.500.000	35	37,6
> 1.500.000	58	62,4
Parenting Style		
Appropriate	47	50,5
Not exactly	46	49,5
Stunting events		
Stunting	22	23,7
Not stunting	71	76,3

Table 2. above shows the distribution of knowledge of respondents in this study who mostly had good knowledge, namely 62 respondents (66.7%), and those who had less knowledge were 31 respondents (33.3%). Then in the Education variable, the most had junior high school education, namely 36 respondents (38.7%) and the least had elementary school education, namely 2 people (2.2%). In terms of income, the parents who earned the most were > 1,500,000, namely 58 respondents, while those with income < 1,500,000 were 35 respondents (37.6%). Furthermore, the parents who had the most appropriate parenting patterns were 47 respondents (50.5%). And in the case of stunting, the result was that the majority did not experience stunting, as many as 71 respondents (76.3%) while those who experienced stunting were 22 respondents (23.7%).

Table 3 above shows the results of the research after carrying out the Chi-Square Test on the variables of knowledge, education, parental income and child rearing patterns, statistically it can be found that there is a significant relationship with the incidence of stunting in toddlers because it has a p value < 0.05. Based on statistical tests, it can be found that there is a significant relationship between the level of knowledge, education, parental income and child rearing patterns on the incidence of stunting in the South Kuta Health Center UPTD working area.

Table 3
Results of Bivariate Analysis of the Relationship between Level of Knowledge, Education, Parental Income and Parenting Patterns of Children Under Five to the incidence of Stunting

Variable	Stunting Events		Total	P Value
	Stunting n (%)	Not Stunted n (%)		
Knowledge				
Good	8 (8,6)	40 (43,0)	48 (51,6%)	0,037
Not enough	16 (17,2)	29 (31,2)	45 (48,4%)	
Education				
Tall	4 (4,3)	30 (32,3)	34 (36,6%)	0.019
Not enough	20 (21,5)	39 (41,9)	59 (63,4%)	
Parents' Income				
< 1.500.000	4 (4,3)	28 (30,1)	32 (34,4%)	0,034
> 1.500.000	20 (21,5)	41 (44,1)	61 (65,6%)	
Parenting Patterns				
Appropriate	4 (4,3)	29 (31,2)	33 (35,5%)	0,025
Not exactly	20 (21,5)	40 (43,0)	60 (64,5%)	

Source: Research Data

DISCUSSION

Based on the results of the Univariate research test using 93 respondents in the work area of the UPTD Puskesmas South Kuta, it was found that the respondents who had good knowledge were 62 respondents (66.7%), and those who had less knowledge were 31 respondents (33.3%). Then in the Education variable, the most had junior high school education, namely 36 respondents (38.7%) and the least had elementary school education, namely 2 people (2.2%). In terms of income, the parents who earned the most were > 1,500,000, namely 58 respondents, while those with income < 1,500,000 were 35 respondents (37.6%). Furthermore, the parents who had the most appropriate parenting patterns were 47 respondents (50.5%). And in the case of stunting, the result was that the majority did not experience stunting, as many as 71 respondents (76.3%) while those who experienced stunting were 22 respondents (23.7%).

Many factors influence the incidence of stunting in toddlers, but this study focuses on knowledge, education and parenting factors. The incidence of stunting can be directly influenced by food intake, infectious diseases, low birth weight and genetics. Meanwhile, indirect factors are the mother's knowledge and parenting style, with education being the root of the problem. Mother's knowledge about stunting has an important role in preventing stunting. Knowledge is everything that humans or respondents know about health and illness or wellness, for example: about stunting including; causes, impacts, characteristics, ways to prevent stunting, nutrition, sanitation, and others.

Knowledge is an important domain aspect for shaping one's actions. The more knowledge someone has, the more positive their behavior will be. The attitude of feeding toddlers is influenced by the mother's knowledge, mother's knowledge is one aspect that has a significant influence on the incidence of stunting. Therefore, efforts to improve stunting can be tried by increasing knowledge so that it can improve attitudes towards feeding children (Dewi Hanggraeni, 2012)

From the results of bivariate data analysis using the Chi-Square Test, it shows that there is a significant relationship between the variable level of knowledge and the incidence of stunting with a value of $p = 0.037$ ($p < 0.05$). This is in line with research (Ramdhani et al., 2020) who said that from the results of a study of 10 journals, there was a relationship between maternal knowledge and the incidence of stunting. However, mother's knowledge is still lacking. The reason for mothers' lack of knowledge about stunting is because not all mothers of toddlers visit the posyandu. This is also in line with research (Hasbiah et al., 2021) in the Pekauman Community Health Center Working Area, Banjarmasin City, which said that the majority of respondents' knowledge was good, this was because respondents were quite active in posyandu activities, so respondents often received information or education in the form of providing good food for toddlers at affordable prices.

One of the indirect factors of stunting is education level. The level of individual education is determined based on the level of development of students, the goals to be achieved, and the abilities

developed. School education levels consist of primary, secondary and tertiary. Elementary school is the first level of education. Secondary education includes middle school, high school and vocational school. Secondary education aims to anticipate students being able to develop further abilities in the world of work or higher education. Strata 1, 2, and 3 include higher education. Higher education aims to educate new students so they can create knowledge (Desfi Lestari, Reni Zuraida, 2017). Based on the results of this research, it shows that there is a relationship between the level of education and the incidence of stunting in toddlers with a p value = 0.019 or p value < 0.05. This is in line with the research results (Prabawati & Andriani, 2021), which states that there is a relationship between the level of education and the incidence of stunting among toddlers in the Batauga Community Health Center working area with P-value = 0.0002 or P-value < 0.05. These results indicate that respondents who have a low level of education experience more stunting compared to respondents who have a higher education. This research is also supported by the results of research conducted by Elfa et al (2020) which states that there is a relationship between the mother's level of education and knowledge and the incidence of stunting in the Batauga Community Health Center Work Area.

The results of bivariate research on the parental income variable show that there is a significant relationship between parental income and the incidence of stunting, with a p value of 0.034, which means p value < 0.05. This is in line with the research results (Lestari et al., 2022) who said that there was a relationship between parental income and stunting in children in the city of Lubuklinggau. Family income is related to the household's ability to meet primary, secondary and tertiary living needs. A high family income makes it easier to meet life's needs, whereas a low family income makes it more difficult to meet life's needs. Low income will affect the quality and quantity of food consumed by the family. The food that is obtained will usually be less varied and small in quantity, especially food that functions as a source of protein, vitamins and minerals for children's growth, thereby increasing the risk of malnutrition. These limitations will increase the risk of a toddler experiencing stunting. Low levels of income and weak purchasing power make it possible to overcome eating habits in certain ways that hinder effective nutritional improvement, especially for their children. (HAPSARI, 2018).

From the results of bivariate data analysis using the Chi-Square Test, the results show a value

of $p = 0.025$ or ($p < 0.05$). Which means there is a significant relationship between parenting patterns for toddlers and the incidence of stunting. This is in line with research conducted by (Fujica Wati et al., 2021) who said that there was a significant relationship between parenting patterns and the incidence of stunting in toddlers aged 24-59 months in Neglasari Village, Tanjung Agung Health Center Working Area, South Lampung Regency. Parenting style is the behavior of parents in caring for toddlers. Parental parenting is one of the problems that can influence the occurrence of stunting in toddlers. Parental parenting patterns that are inadequate or poor have a greater chance of children being affected by stunting than parents with good parenting patterns (Aramico et al., 2016).

CONCLUSION

Based on the analysis obtained, it can be concluded that the variables of level of knowledge, education, parental income and parenting patterns have a significant relationship with the incidence of stunting because the P value is < 0.05.

SUGGESTION

For the Health Center in the UPTD South Kuta Health Center Working Area to plan prevention activities for toddlers by further increasing education about the problem of stunting, monitoring the growth of toddlers including through weighing and measuring height/length, as well as distributing PMT (supplementary food) to toddlers in order to reduce the risk of under-fives stunting in the future. Increasing the knowledge of mothers of toddlers about stunting, maintaining appropriate parenting patterns for toddlers and being able to provide good nutritional intake so as to reduce the risk of stunting in toddlers.

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