Jurnal Kesehatan

Vol. 17, No. 2, September 2024, pp. 176~185

p-ISSN: 1979-7621, e-ISSN: 2620-7761, DOI: 10.23917/jk.v17i2.4506



Unique Experience of Mother's Parenting for Stunted Toddlers

Seventina Nurul Hidayah¹, Okta Zenita Siti Fatimah^{2*}

¹Prodi D3 Kebidanan Politeknik Harapan Bersama, Tegal, Indonesia ²*Prodi S1 Kebidanan STIKES Bhakti Pertiwi Indonesia Jakarta

How to Cite: Hidayah, S. N., & Fatimah, O. Z. S. Unique Experience of Mother's Parenting for Stunted Toddlers. Jurnal Kesehatan, 17(2), 176–185. https://doi.org/10.23917/jk.v17i2.4505

Article Information

Article History:

Submission: 07 March 2024 Revision: 20 August 2024 Reception: 29 August 2024

Keywords: Breastfeeding, lactation, parenting, pregnancy

ABSTRACT

Introduction: The high prevalence of stunting is caused by suboptimal parenting practices. According to the Health Profile of Central Java Province in 2022, there were 830 children aged 0-5 years in the city of Tegal experiencing stunting. This figure is distributed across 27 sub-districts, with Slerok being the most affected, with 133 cases reported. This research aims to describe maternal parenting practices towards stunted toddlers in Slerok Sub-district. Method: The qualitative research method with a phenomenological approach was employed. Data were collected through in-depth interviews, observations, and document analysis. The informants consisted of 6 mothers with stunted toddlers as the main informants, along with 2 supporting informants, namely the Posyandu Cadre in Slerok Sub-district and the nutrition officer at Slerok Community Health Center. Result: The findings revealed that not all mothers practiced early breastfeeding initiation, and some did not provide exclusive breastfeeding until the age of 2 due to perceived difficulty in weaning. Additionally, some informants often forgot to wash their hands before feeding their children due to household chores. Conclusion: It is hoped that health workers and Posyandu cadres can promote good parenting practices, especially for pregnant and lactating mothers in Slerok Sub-district.

Corresponding Authors: (*)

Prodi S1 Kebidanan STIKES Bhakti Pertiwi Indonesia Jakarta, Jl. Raya Jagakarsa No.37, RW.1, Jagakarsa, Kec. Jagakarsa, Kota Jakarta Selatan, Daerah Khusus Ibukota Jakarta Daerah Khusus Ibukota Jakarta 12620, Indonesia

Email: okta.zenita@gmail.com

INTRODUCTION

Stunting is one of the priorities of the Sustainable Development Goals (SDGs), including efforts to end hunger, with a target of 14% of stunted children under five in Indonesia by 2024 (Maryani, 2023). Globally, the reduction in stunting prevalence should reach 40% by 2025 (Permata Sari et al., 2022). The 2018 Riskesdas recorded that the province had the 21st highest number of stunting cases in Indonesia, with 29.4% of under-fives experiencing stunting. Tegal City was one of the focus locations for stunting reduction there (Fauziah et al., 2022). Central Java Province Health Profile data in 2019 recorded 700 cases of stunting in Tegal City. Based on the Electronic Recording and Reporting of Community-

Based Nutrition (e-PPGBM) at the Slerok Health Center in August 2020, there were 35 cases of stunting among children under five.

Various factors, including suboptimal parenting practices, cause the high incidence of stunting. Improper feeding patterns in children aged 6-12 months can lead to stunting. For optimal child growth, parents need to fulfill several basic needs, including food, health care, and environmental hygiene (Belawa Lemaking et al., 2022). This paper emphasizes that parenting includes various activities such as breastfeeding, food preparation, health care, and child hygiene.

The quality of maternal care plays a vital role in the growth and development of children because good nutritional care will reduce morbidity and improve the nutritional status of children (Hidayat et al., 2023). Research results by (Hidayat et al., 2023) also show that children who do not experience stunting get good parenting, including in feeding, care, hygiene, and health services, while children who experience stunting tend not to get optimal care.

Studies conducted by (Natalia et al., 2022) revealed that failure in exclusive breastfeeding practices often occurs in respondents who have reached the level of food security, as well as improving nutrition and trying to realize sustainable agriculture (Haninda et al., 2022). In the 2020-2024 National Medium-Term Development Plan (RPJMN), efforts to reduce the prevalence of stunting are one of the focuses in the health sector. However, there is still a tendency for mothers to lack confidence in their body's ability to produce enough breast milk to meet their children's needs. This phenomenon can encourage mothers to give formula milk to their babies, indicating that awareness of the importance of exclusive breastfeeding still needs to be improved.

According to the results of a preliminary study involving interviews with the nutrition coordinator of the Slerok Community Health Center, it was revealed that stunting cases in the Slerok Community Health Center working area in Tegal City were mostly caused by feeding patterns that did not pay attention to both the quantity and quality of food by mothers to their toddlers. Interviews were also conducted with the KIA coordinator of the Slerok Health Center, which indicated that there were still pregnant women who had not carried out regular antenatal care (ANC) checks during pregnancy. This study aims to describe maternal parenting patterns that include early breastfeeding initiation practices, exclusive breastfeeding, feeding patterns for toddlers, basic immunizations for toddlers, and environmental hygiene and sanitation habits in mothers who have stunted toddlers in the Slerok Puskesmas working area in Tegal City, using a phenomenological approach.

LITERATURE REVIEW

Maternal parenting not only affects the nutritional intake and physical health of the child but also impacts the emotional and social aspects of the child. A study by (Tresyana and Rini, 2023) found that children raised in a loving and supportive environment tend to have better emotional development and a lower risk of stunting. Responsive parenting, where the mother gives full attention to the child's needs, is proven to increase the child's sense of security and strengthen the emotional bond between mother and child. In addition, the study also showed that children who received positive parenting were better able to develop good social skills, which are essential for their future success.

Other research by (Haninda et al., 2022) highlighted the importance of maternal involvement in children's early education as part of parenting that supports optimal growth. The study showed that mothers who are actively involved in their children's education, such as reading stories or teaching basic skills, can improve children's cognitive abilities and reduce the risk of developmental problems, including stunting. The results of

this study reinforce the importance of mothers not only as physical caregivers but also as the first educators of their children. Thus, empowering mothers in terms of education and parenting skills is vital in supporting children's overall development and addressing the problem of stunting. In addition to psychological and educational factors, cultural aspects also play an essential role in mothers' parenting of children under five. According to research by (Hidayat et al., 2023), local culture and family habits can influence the way mothers care for their children, including food selection and parenting methods. The study found that in some communities, certain traditions, such as age-inappropriate complementary feeding or the use of herbs as a substitute for nutritious food, can contribute to malnutrition and stunting. However, the study also showed that with a culturally sensitive approach, appropriate nutrition and parenting education interventions can be well received by communities and effective in reducing the prevalence of stunting. This finding emphasizes the importance of understanding and considering cultural aspects in efforts to improve maternal parenting and prevent stunting in children under five.

METHOD

This study used a qualitative approach using the phenomenological method. The research was conducted in the working area of the Slerok Community Health Center of Tegal City, precisely in Slerok Village, Sukaraja Subdistrict, Tegal City, Central Java Province.

The process of selecting informants was done purposively by setting clear inclusion criteria. The main participants in this study were 6 mothers with stunted toddlers in Slerok Village. In addition, there were 2 supporting informants involved, namely the Slerok Village Health Cadre and the nutrition implementer (TPG) from the Slerok Community Health Center Tegal City. The selection of informants was based on their relevance and potential to provide in-depth insight into the phenomenon under study.

This study focuses on understanding mothers' experiences and perceptions of caring for stunted toddlers. Phenomenology was chosen as the conceptual framework to explore the subjective meaning of participants' experiences within their social and cultural context.

Data were collected through in-depth interviews with key participants and supporting informants. Interviews were conducted using semi-structured interview guidelines to facilitate in-depth exploration of mothers' parenting of stunted toddlers. In addition, observations were made of mothers' feeding behavior and hygiene and sanitation practices in the home environment for 1 month. Document review was also conducted by reviewing the MCH (Maternal and Child Health) books of mothers with stunted toddlers to obtain additional information.

The data collected was analyzed using a phenomenological analysis approach with structured steps. The analysis process began with data reduction to filter out relevant information. The data was then presented in the form of a narrative describing the patterns and key findings that emerged from the participants' experiences. Data verification was conducted through triangulation, both in terms of sources (interviews with primary and supporting informants) and techniques (interviews, observations, and document reviews). This approach ensures that the analysis is comprehensive and reliable.

RESULTS AND DISCUSSION Early Breastfeeding Initiation

Interview results showed that some stunted children did not receive early breastfeeding practices. However, some other informants stated that they provided early

breastfeeding to their children immediately after birth. One of the primary informants shared the following experience:

"At birth, the midwife immediately placed the baby on her chest, and she breastfed herself immediately." (Key informant T).

The informants' statements on early breastfeeding practices are in line with the information provided by health cadres, who stated that early breastfeeding practices have been widely implemented in Slerok Village. His words were:

"We as cadres always direct parents to improve their children's nutrition and diet. The practice of early breastfeeding has become a habit here." (Health cadre, S).

Some informants were found not to provide early breastfeeding for several reasons, such as the milk had not been released on the first day of birth or because the informant had to be hospitalized due to complications during childbirth. One informant explained:

"Breastmilk was not released within the first week after birth. We tried to give breastmilk powder until the yellow milk came out, but the milk was not given immediately on the first day." (Key informant K).

Based on the interviews, it was found that only a tiny proportion of stunted toddlers received breast milk at the age of 0-6 months. Some informants stated that they only provide breast milk and do not give other foods to children under 6 months of age.

However, some informants provide food other than breast milk to their children at the age of 0-6 months. They give formula milk as a substitute for breastmilk because breastmilk has not been released on the first day of birth. The words are:

"For children under 6 months old, we only give breast milk. At the beginning of the birth, breast milk is not yet released, so we give formula milk. After the breast milk came out, we no longer give formula milk." (Key informant, NM).

The statements of some informants who feed children under 6 months are supported by information from supporting informants, namely health cadres in Kelurahan Slerok. They stated that some mothers provide exclusive breastfeeding, but most children are given additional food.

The duration of breastfeeding for children also varies. Some informants only breastfeed until their children are 2 years old, while others only breastfeed until their children are 1 year and a half old. Some informants did this because they saw their friends who weaned their children at the age of 1 year and a half. One informant explained:

"At 6 months old, I started giving formula milk. I breastfed until my child was 1 year and a half old because it is usually difficult to wean children after more than 2 years. Even at the age of 1 year and a half, it is not easy to wean a child, especially if you see friends who have weaned their children at that age. So, I followed my friends in this regard." (Key informant, NM).

The findings indicate that most of the mothers in this study did not initiate early breastfeeding for their infants. Some of the factors that led to this included delayed milk release on the first day of the baby's birth and circumstances where the mother had to be hospitalized due to complications during delivery. This finding is in line with research

conducted by (Rohmah et al., 2020), who found that some mothers were unable to breastfeed immediately after birth because the milk only started to come out after one week postpartum. Hence, the baby had to be given formula milk instead.

From the interviews, it was revealed that 3 informants experienced delayed breastfeeding on the first day of their babies' birth. After conducting in-depth interviews, it was found that the informants did not perform breast care during pregnancy and also did not perform breast massage after childbirth due to a lack of knowledge and experience. Research conducted by (Erda et al., 2022) also showed that breastfeeding mothers often lack information about the care needed to increase breastmilk production, as well as foods that can increase breastmilk production and that they do not know about oxytocin massage that can help in increasing breastmilk production.

This finding is in line with the results of a study conducted by (Nurbaya et al. 2022), which revealed that respondents did not fully understand the meaning, benefits, and purpose of breast care, including the right time to perform care, problems that may arise if the breasts are not treated, and ways to perform care. This knowledge limitation may be due to the fact that respondents have never been given information about breast care, either through print media, health workers, or the surrounding environment.

In addition, the interviews also revealed that informants felt anxious and afraid when they first breastfed their children because this was their first experience in breastfeeding. This finding is also in line with research conducted by (Tresyana & Rini, 2023), which showed that first-time mothers often face difficulties in breastfeeding due to lack of experience and knowledge of effective methods. Some mothers may succeed easily, but most experience challenges. Research has also shown that a mother's stress level after childbirth can affect milk production.

Lack of awareness of the importance of Early Breastfeeding Initiation (IMD) practices on the part of both mothers and health workers can be a barrier to IMD implementation. Many factors can lead to IMD needing to be implemented, including lack of knowledge and care from mothers and families, as well as attitudes and actions from health workers. Therefore, the importance of skills in implementing IMD correctly has become a critical need for health workers involved in the delivery process.

The results also showed that there were still informants who needed help understanding the concept of IMD. This finding is consistent with research conducted by (Erda et al., 2022), which showed that the lack of maternal understanding of IMD was the cause of not implementing the practice. Lack of effort from mothers in seeking information about the importance of IMD can also be a contributing factor. Therefore, the critical role of health workers in providing understanding to mothers and families about the importance of IMD and exclusive breastfeeding is crucial for infant development and disease prevention.

Toddler Feeding

Interviews showed that some toddlers start feeding at 6 months and above. One informant explained:

"Around 4 months of age, I started giving food to my child." (Key informant, WM).

Some stunted toddlers have a pattern of eating 3 times a day, as revealed by one informant:

"My son usually eats 3 times a day, morning, noon and evening. Although it is not much, just a portion of rice and bread, but he is happy." (Key informant, SM).

However, other informants stated that their children only eat twice a day, mainly in the morning and evening, although not every day on a regular basis:

"My child usually only eats twice a day, sometimes not every day, in the morning and evening." (Main informant, NM).

However, other informants said that their child's meal portion was not fixed because the child had difficulty eating:

"The portion is erratic because my child has difficulty eating." (Key informant, NM).

"Sometimes it is uncertain, sometimes he just starts to want to eat. In the past, sometimes the child only ate once a day, but now he has started to eat a little more." (Main informant, NM).

Observations showed that some informants gave the children one spoonful of rice while others gave one or two spoonfuls of rice. However, it was also observed that the children only sometimes finished the food given by the informants. In fact, some children had difficulty eating and were only able to finish about six mouthfuls of tablespoons. In addition, the food menu changes daily, as one informant revealed:

"The food menu varies; there are vegetables, carrots, potatoes, tempeh, sometimes fish, sometimes chicken liver, and sometimes replaced with other menus." (Key informant, K).

However, another informant said that the food menu is inconsistent because her child has difficulty eating vegetables:

"My son does not like to eat vegetables, so his diet is not fixed. Usually he only wants to eat fish, chicken, eggs, and rarely eats vegetables." (Key informant, NM).

The statement regarding the variety of food menus every day is supported by observations. Observations show that the food menu given by informants to children varies every day.

This finding is also reinforced by the opinion of a supporting informant, a cadre in Kelurahan Slerok, who stated that the food menu is already diverse because most mothers in the village understand the importance of nutritious food:

"The food menu is already varied because most of the mothers here already understand about healthy food. So, there is already enough variety." (Supporting informant of Posyandu cadre, S).

Regarding food storage, some informants store food on the dining table and cover it with a serving hood, while others store it in a cupboard or special shelf for food storage. This finding is also evident from the observation, where some informants store food on the dining table with a serving hood, while others store it in a cupboard and cover it.

The findings in this study showed that most mothers did not provide exclusive breastfeeding to their babies. The study results revealed that informants used formula milk as a substitute for breast milk because breast milk had not been released on the first day of birth. This finding is in line with research conducted by (Renityas et al., 2022), which found that many respondents relied on formula milk to overcome the unavailability of breast milk at the beginning of breastfeeding, with the aim of preventing the baby from crying and starving. In addition, some informants also did not provide exclusive breastfeeding because they experienced bleeding during childbirth, which resulted in delays in providing Early

Breastfeeding Initiation (IMD), as well as the need for additional food for babies due to insufficient breast milk. Similar findings were found in research by(Nurva & Maharani 2023)(Nurva & Maharani, 2023), which showed that many mothers argued that breast milk was not sufficient for the baby's needs. The baby was fussy, so they were given additional food, such as formula milk.

Although informants' responses about the benefits and importance of exclusive breastfeeding were generally positive, some of them did not apply it to their children because they felt they produced little milk. This finding suggests that mothers' perceptions of insufficient milk production may hinder exclusive breastfeeding.

Basic Immunization in Toddlers

The results of the in-depth interviews showed that all informants considered visits to Posyandu very important and mandatory to monitor children's development, including growth and nutritional conditions. They feel they lose information about their children's condition if they do not visit the Posyandu. Several informants, such as critical informants K and IA, confirmed this. The interviews also showed that mothers in Kelurahan Slerok routinely and actively visit Posyandu, according to a predetermined schedule. However, some informants need to be more consistent in their visits to Posyandu, such as informant SM, who did not visit for several months due to illness.

In addition, all informants stated that they provided complete immunizations to their children according to the set schedule. This finding can be seen from their MCH books, which record complete immunizations. Informants also considered that immunization in the first two years of a child's life is very important and mandatory to maintain the child's health.

This is an important finding as it shows that awareness of the importance of Posyandu visits and complete immunization has spread in the Kelurahan Slerok community. However, there are still some challenges, such as consistency in visiting Posyandu.

Based on the results of in-depth interactions with key informants, it was found that most use water sources from wells, while others rely on government boreholes. This finding is in line with the explanation from the cadres and TPG of Puskesmas Slerok that the majority of the population already uses healthy water. However, there are still some who use PAM water. However, informants were also found who did not have access to their wells, so they had to ask for water from wells belonging to other families. This finding can be seen in the statement of one informant:

"To be honest, we do not have a well at home. We still depend on our mother's well next door. We have to bring water here for daily needs, including for cooking in our own house." (Key informant, SM).

When discussing their children's hygiene, informants shared the various ways they do this, ranging from bathing their children two to three times a day to bathing more often if the children are dirty after playing. There are habits such as cutting nails and cleaning ears, as well as maintaining general body hygiene.

"Time to bathe, clip nails, clean ears. Children bathe three times a day, especially if they are dirty after playing." (Key informant, IA).

Before feeding their children, some informants stated that they wash their hands, even without using soap. Here is the quote:

"Before feeding, we wash our hands, but not always with soap. Sometimes, because we are busy, we just wash our hands." (Key informant, WM).

"We do not have a well at home. We still ask for water from our mother's well next door. We bring water home for our daily needs, including cooking." (Key informant, SM).

When discussing children's hygiene, informants revealed various habits, ranging from bathing children two to three times a day, depending on how dirty they are after playing, to taking care of body hygiene, including keeping nails and ears clean. They also noted the importance of taking care of body hygiene.

"The children bathe three times a day, especially if they are dirty after playing. We also cut their nails and clean their ears regularly." (Key informant, IA).

Some informants stated that they wash their hands before feeding their children, although not always with soap. However, some informants did not always wash their hands before feeding their children. Observations showed that only one informant used running water and soap to wash her hands before feeding her children.

"Before eating, we wash our hands. Sometimes, without soap. Sometimes, in a hurry, we don't wash our hands." (Key informant, WM).

In terms of waste management, some informants revealed that they burn waste behind the house or throw it into a hole in the ground. However, some informants indicated that they collect waste in the well and then burn it. In addition, almost all informants use toilets for urination and defecation, except for one informant who still uses another family's toilet.

"In-depth interviews with the TPG of Slerok Health Center revealed that some residents still do not have their toilets. In addition, Slerok Village needs more sanitation and environmental awareness. (Supporting informant, TPG of Slerok Health Center).

The unique experience of mothers' parenting of stunted toddlers in relation to waste management became the focal point of the observations. In this observation, it was seen that some informants' bathrooms looked dirty, with much moss in the water reservoir and on the floor. Some informants were also seen storing water for cooking and washing, but there was moss attached to the reservoir.

In the context of the environment around the house, some informants have livestock pens such as cows and chickens. The chicken coop is often placed on the back porch of the house, while the cowshed is not far from the house. However, animal waste is only sometimes appropriately cleaned, often causing unpleasant odors and breeding grounds for flies.

The results showed that all informants rely on well water for their daily needs, such as cooking, bathing, washing clothes, and others. However, based on observations, almost all informants use wells that are more than 10 meters away from septic tanks, covered and separated from animal pens. However, one informant needed a better. Household sanitation standards are measured by the presence of sanitation facilities that meet health requirements, such as goosenecks, septic tanks, or wastewater treatment systems, either alone or shared.

In addition, informants' behavior in maintaining their children's hygiene includes bathing twice a day, paying attention to food, play, and clothing, and activities such as

clipping nails, washing hands, feet, and face, helping to open pants when relieving themselves, and cleaning dirt in children's ears. This finding is consistent with emphasizing the importance of bathing twice a day, cleaning ears, dental care, washing hands and feet, and changing children's clothes.

The availability of trash bins at home is also essential. Inadequate waste bins can become a breeding ground for disease as the odor produced can attract animals or bacteria, which in turn can cause illness. In this study, all informants collected their waste first before burning it. Some informants burned the waste directly behind the house, while others dumped and burned the waste in earthen pits or disused wells.

CONCLUSION

The results of the phenomenological approach revealed that only some mothers of toddlers practiced early breastfeeding initiation. Some informants did not perform breast care and massage during pregnancy and after childbirth and felt anxious and afraid when starting to breastfeed their children for the first time. Some informants also decided not to breastfeed their children until they were 2 years old, fearing that it would be difficult to wean them if they breastfed for too long. Some children also had decreased appetite due to difficulty in defecating, which was caused by a lack of vegetable and fruit consumption.

Nonetheless, all informants have given their children complete primary immunizations. However, some informants need to remember to wash their hands before feeding their children because they are busy taking care of the household.

Therefore, health workers and Posyandu cadres should conduct health promotion to mothers in Slerok Village regarding good parenting, especially to pregnant women and breastfeeding mothers, to prevent stunting. Involving the mother's family in health promotion is important because the family's influence on health behavior is greater than that of health workers.

In the context of waste management, the results also show that the availability of trash bins at home is essential. Inadequate waste bins can become a breeding ground for disease as the odor produced can attract animals or bacteria, which in turn can cause illness. In this study, it was found that all informants collected their waste first before burning it. Some informants burned the waste directly behind the house, while others dumped and burned the waste in earthen pits or disused wells. Therefore, the role of Posyandu cadres and health workers in providing education on proper waste management is also essential to improving environmental health in Kelurahan Slerok.

ACKNOWLEDGEMENT

The authors would like to thank LPPM STIKES Bhakti Pertiwi Indonesia for providing the opportunity to conduct this research. We also thank all respondents who have helped researchers during the data collection process.

REFERENCES

Belawa Lemaking, V., Manimalai, M., Monika, H., Djogo, A., Studi, P., Fakultas, K., Kesehatan, I., Citra, U., & Kupang, B. (2022). *Ilmu Gizi Indonesia*.

Chusna Almabruroh Yuni Alfi, Z., Nurafifah, S., Arinal Haq, I., & Brebes, Stik. (2022). Pendidikan Kesehatan Konsumsi Fe Dengan Tepat, Cegah Anemia Dan Stunting. In *Journal of Health Community Services* (Vol. 1, Issue 4).

Eka, E., Agustina, P., & Dwijayanti, R. (2023). Peran Orang Tua Dalam Pencegahan Stunting Melalui Program Sekolah Orang Tua Hebat Di Kelurahan Lakarsantri. *Jurnal Ilmu Farmasi Dan Kesehatan*, 1(4), 220–227. https://doi.org/10.59841/an-najat.v1i4.548

- Erda, R., Alisyah, N. K., Suntara, D. A., & Yunaspi, D. (2022). Hubungan Pola Asuh Ibu, Pendidikan Ibu, dan Asi Eksklusif Dengan Kejadian Stunting pada Balita. *JIK JURNAL ILMU KESEHATAN*, 6(2), 310. https://doi.org/10.33757/jik.v6i2.554
- Fauziah, S. N., Dewi Sartika, R. A., & Saputra, H. (2022). Pola Asuh Balita Stunting Usia 24-59 Bulan Pada Masa Pandemi COVID-19. *Jurnal Ilmu Kesehatan Masyarakat*, 11(05), 455-463. https://doi.org/10.33221/jikm.v11i05.1075
- Haninda, P., Rusdi, N., Kesehatan, F., Muhammadiyah, U., & Barat, S. (2022). Hubungan Personal Hygiene Dengan Kejadian Stunting Pada Balita. In *Human Care Journal* (Vol. 7, Issue 2).
- Hidayat, A. N., Nurhayati, A., Program, H., Sarjana, S., Pendidikan, D., Bidan, P., Kesehatan, I., & Faletehan, U. (2023). *Hubungan Pola Asuh Ibu Dengan Kejadian Stunting Pada Anak Usia 24-60 Bulan di Kelurahan Teritih Wilayah Kerja Puskesmas Kalodran Kota Serang Provinsi Banten Tahun 2022.* 1(2), 103–114. https://doi.org/10.55606/anestesi.v1i2.395
- Maryani, N. (2023). Hubungan Pola Pemberian Makan, Pola Asuh dan Sanitasi Lingkungan dengan Kejadian Stunting pada Balita Usia 12-59 Bulan di Desa Babakan Kecamatan Ciseeng Tahun 2022. *SIMFISIS Jurnal Kebidanan Indonesia*, 2(3), 397–404. https://doi.org/10.53801/sjki.v2i3.130
- Natalia, L., Yuwansyah, Y., YPIB Majalengka, U., & Barat, J. (2022). Bunda Edu-Midwifery Journal (Bemj) Gambaran Pola Pemberian Makan Dan Pola Asuh Pada Balita Stunting (Vol. 5).
- Nurbaya, N., Haji Saeni, R., & Irwan, Z. (2022). Peningkatan Pengetahuan Dan Keterampilan Kader Posyandu Melalui Kegiatan Edukasi Dan Simulasi. *JMM (Jurnal Masyarakat Mandiri)*, 6(1), 678. https://doi.org/10.31764/jmm.v6i1.6579
- Nurva, L., & Maharani, C. (2023). Analisis Pelaksanaan Kebijakan Penanggulangan Stunting: Studi Kasus di Kabupaten Brebes Analysis of Stunting Management Policy Implementation: A Case Study in Brebes Regency. In *Jurnal Kebijakan Kesehatan Indonesia*: *JKKI* (Vol. 12).
- Permata Sari, H., Natalia, I., & Rachma Sulistyaning, A. (2022). *Hubungan Keragaman Asupan Protein Hewani, Pola Asuh Makan, Dan Higiene Sanitasi Rumah Dengan Kejadian Stunting*. 11(1), 18–25. http://ejournal3.undip.ac.id/index.php/jnc/
- Rastipiati, R., & Wulandari, W. (2023). Pengalaman orang tua dalam pencegahan kejadian Stunting di wilayah Kabupaten Kuningan Jawa Barat: Studi Fenomenologi. *Journal of Nursing Practice and Education*, 3(2), 160–166. https://doi.org/10.34305/jnpe.v3i2.713
- Renityas, N. N., Sari, L. T., & Noviasari, I. (2022). Pemberdayaan Kader Posyandu Dalam Stimulasi Deteksi Dan Intervensi Dini Tumbuh Kembang Pada Anak Usia 0-5 Tahun. *Indonesian Journal of Professional Nursing*, 3(2), 134. https://doi.org/10.30587/ijpn.v3i2.4920
- Rohmah, F. N., Putriana, D., & Safitri, T. A. (2020). Berdayakan Masyarakat Cegah Stunting dengan Mengolah Bahan Pangan Potensi Lokal. *Masyarakat Berdaya Dan Inovasi*, 3(2), 114–117. https://doi.org/10.33292/mayadani.v3i2.97
- Rosmeilani, R., Gandana, G., & Hendri Mulyana, E. (2023). Hubungan Pola Asuh Orang Tua dengan Kejadian Stunting pada Anak Usia Dini. *JECIE (Journal of Early Childhood and Inclusive Education)*, 7(1), 143–149. https://doi.org/10.31537/jecie.v7i1.1269
- Tresyana, S. D., & Rini, A. S. (2023). Hubungan Pola Asuh, Pola Asih, Dan Pola Asah Ibu Dengan Kejadian Stunting Pada Anak Usia 12-59 Bulan Di Desa Sukajaya Kecamatan Sumedang Selatan Tahun 2022. *SIMFISIS: Jurnal Kebidanan Indonesia*, 3(2), 595–600. https://doi.org/10.53801/sjki.v3i2.180