



## ANALYSIS OF FACTORS RELATED TO NUTRITIONAL STATUS OF TODDLERS AGED 12-59 MONTHS

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### ABSTRACT

The nutritional status of toddlers is influenced by factors such as immunization history, exclusive breastfeeding history, maternal knowledge, socioeconomic status, and parenting patterns. This study aims to identify risk factors associated with the nutritional status of toddlers aged 12-59 months in the working area of the Padang Pasir Community Health Center. This is an observational analytical study with a cross-sectional design. This study aims to determine the relationship between the history of exclusive breastfeeding, maternal knowledge, socioeconomic status, and parenting patterns with nutritional status in toddlers in the Padang Pasir Community Health Center work area. The sample consisted of 351 mothers with toddlers aged 12-59 months, selected using proportional sampling. Data collection used a questionnaire. Data were analyzed using chi-square analysis, logistic regression multinomial. The results of the quantitative research using chi-square test showed a relationship between exclusive breastfeeding ( $p=0.032$ ), maternal knowledge ( $p=0.010$ ), parental income ( $p=0.003$ ), feeding parenting patterns ( $p=0.008$ ) with the nutritional status of toddlers aged 12-59 months. The most dominant factor was feeding parenting patterns ( $OR=1.302$ ). The study concluded that parenting and feeding patterns were the most closely related factor to the nutritional status of toddlers aged 12-59 months. Community health centers are expected to improve parenting through routine counseling, information media, and direct information on the importance and negative impacts of inadequate parenting and feeding patterns on children's nutritional status.

Keywords: maternal knowledge; nutritional status; parenting pattern; toddler

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## INTRODUCTION

Toddler nutritional status is a key indicator of the health and growth of children under five, reflecting the balance between nutritional needs and intake. Poor health, inadequate food consumption, and nutrient deficiencies are all factors that determine a toddler's nutritional status. According to the Joint Child Malnutrition Estimates (JME) 2023 report released by UNICEF, WHO, and the World Bank, the global nutritional status of children under five shows that approximately 148.1 million children under five are stunted (22.3%), 45 million children are wasted (6.8%), and 37 million children are overweight (5.6%). In 2024, the stunting rate increased slightly to 150.2 million children (23.2%), while the prevalence of wasting decreased to 6.6%, and the prevalence of overweight remained stable at 5.6%. Despite the decline in wasting rates, significant challenges remain, particularly in Asia and Africa, which account for 51% and 43% of the total global stunting cases, respectively. UNICEF emphasizes the importance of comprehensive nutrition interventions, including exclusive breastfeeding, micronutrient supplementation, and nutrition education, to address various forms of malnutrition and achieve the global target of reducing malnutrition by 2030.

The 2023 Indonesian Health Survey (SKI) shows that the nutritional status of toddlers in Indonesia remains a serious concern, despite improvements compared to previous years. Nationally, the prevalence of stunting was recorded at 19.6%, wasting at 6.8%, underweight at 14.1%, and overweight at 3.5%. This figure marks a decrease from the 24.4% stunting prevalence in the previous survey, but remains above the WHO-recommended threshold. West Sumatra Province shows that the nutritional status of toddlers still requires attention, with stunting prevalence at 21.3%, wasting at 7.1%, underweight at 13.6%, and overweight at 3.2%. At the city level, Padang City recorded a lower stunting prevalence than the provincial average, at 15.4%, indicating progress in nutrition programs and child health interventions.

Based on data from the Padang City Health Office in 2023, the nutritional status of toddlers showed encouraging results. The stunting rate was recorded at 15.4%, wasting at 5.2%, and underweight at 12.1%, while overweight was at 3.0%. This achievement marks a significant improvement compared to the previous year, with stunting prevalence lower than the national average of 21.6% in 2022. This success is the result of a specific and sensitive nutrition intervention program involving Supplementary Feeding (PMT), vitamin A distribution, and monitoring toddler growth and development through Integrated Health Posts (Posyandu) and Community Health Centers (Puskesmas). However, challenges remain, particularly in reducing underweight and overweight rates, which requires attention to a balanced diet and a healthy lifestyle.

Factors influencing nutritional status are divided into direct and indirect factors. Direct factors are caused by infectious diseases and nutritional intake, while indirect factors are caused by immunization history, exclusive breastfeeding, economic status, parenting patterns, and maternal knowledge. Parenting patterns and maternal knowledge in childcare play a crucial role in feeding children, as well as knowledge about the types of food to be given according to their age and needs, health practices, and the provision of affection (Sir, Aritonang, & Jumirah, 2021). Based on the survey results from the Padang City Health Office, Padang Pasir Community Health Center recorded a total of 22 cases of malnutrition in toddlers, which made the community health center with the highest incidence of malnutrition out of 23 community health centers in Padang City in 2023. The latest data found the number of toddlers based on BB/TB from January to March 2025 was 4 toddlers with malnutrition, 70 toddlers with undernutrition, 1,313 toddlers with good nutrition, 80 toddlers at risk of overnutrition, 25 toddlers with overnutrition, and 25 toddlers with obesity at Padang Pasir Community Health Center, Padang City. Based on the various problems and limitations mentioned above, the researcher is interested in conducting a study on "Analysis of Factors Related to Nutritional Status in Toddlers Aged 12-59 Months at Padang Pasir Community Health Center, Padang City." To gain a comprehensive understanding, this study needs to be conducted with a quantitative approach. A quantitative approach allows for objective measurements of maternal knowledge, exclusive breastfeeding, socioeconomic status, and parenting patterns, as well as toddler nutritional status.

## **METHOD**

This is an observational analytical study with a cross-sectional design. This study aims to determine the relationship between the history of exclusive breastfeeding, maternal knowledge, socioeconomic status, and parenting patterns with nutritional status in toddlers in the Padang Pasir Community Health Center work area. This study was conducted from May to August 2025. The population in this study were all toddlers in the Seberang Padang Community Health Center work area, Padang. The total population was 1,498 toddlers. The sample size was taken using the Slovin proportion estimation formula (1990) in Hardisman (2021). Based on the calculations Slovin's formula, the minimum sample size for this study was 316 individuals. The researchers anticipated that selected subjects would be unwilling to participate, so adjustments to the calculated sample size were necessary to maintain the study's accuracy. The estimated non-response rate was 10%. The total sample size was 351 toddlers.

The sample inclusion criteria are mothers of toddlers who have a KIA book, mothers who can communicate well, mothers who are willing to be respondents and the criteria are children who have comorbidities such as congenital abnormalities, mental disabilities and physical disabilities, mothers who experience mental and psychological disorders and respondents who are not present at the time of the research after 3 consecutive visits. The sample selection technique used in this study is the proportional random sampling method. Padang Pasir Health Center has 10 villages. After obtaining each sample size in each village, then the next step is to use a simple random sampling technique by creating a table of population sequence numbers in each village and then using a computerized lottery technique via MS Excel using the formula =RANDBETWEEN. Research data analysis was carried out using univariate analysis, bivariate analysis with the Chi-Square statistical test with a 95% confidence level ( $\alpha = 0.05$ ), multivariate analysis was carried out using multinomial regression analysis with an association measure of Adjusted Prevalence Ratio (PR) and then its significance was assessed using 95% CI.

## RESULT

Table 1.  
the Nutritional Status of Children Aged 12-59 Months

Nutritional Status	f	%
Underweight	49	14,2
Normal Nutritional Status	268	77,7
Overweight	28	8,1

Based on table 1 regarding the nutritional status of toddlers, it shows that of the 345 toddlers aged 12-59 months, almost all toddlers had normal nutrition (77.7%), a small number of toddlers had malnutrition (14.2%) and overnutrition (8.1%).

Table 2.

The relationship between exclusive breastfeeding history, maternal knowledge, socioeconomic status, and feeding patterns with the nutritional status of children aged 12-59 months

Variable	Nutritional Status						Total	<i>p-value</i>	
	Underweight		Normal Nutritional Status		Overweight				
	f	%	f	%	f	%			
History Exclusif breastfeeding									
Not exclusive	28	17,3	116	71,6	18	11,1	162	100	0,032
Exclusive Breastfeeding	21	11,5	152	83,1	10	5,5	183	100	
Maternal Knowledge									
Low	23	24,5	64	68,1	7	7,4	94	100	0,010
Moderate	21	12,6	132	79	14	8,4	167	100	
Good	5	6	72	85,7	7	8,3	84	100	
Sosio Ekonomik Status									
< UMR	27	23,3	81	69,8	8	6,9	171	100	0,003
≥ UMR	22	9,6	187	81,7	20	8,7	174	100	
Feeding Parenting Pattern									
Less	18	25,7	47	67,1	5	7,1	70	100	0,008
Good	31	11,3	221	80,4	23	8,4	275	100	

Regarding the exclusive breastfeeding history variable, research results showed that almost all (83.1%) toddlers with normal nutritional status had a complete history of exclusive breastfeeding. The chi-square test results obtained a p-value of 0.032 (<0.05), thus it can be concluded that there is a relationship between exclusive breastfeeding and the nutritional status of toddlers aged 12-59 months. In the parental knowledge variable, the research results showed that almost all (85.7%) toddlers with normal nutritional status had mothers with sufficient knowledge and a small portion (24.5%) of toddlers with poor nutritional status had mothers with low knowledge. The chi-square test showed a p-value = 0.010 (<0.05), which means there is a significant relationship between parental income and the nutritional status of toddlers aged 12-59 months.

The research results show that almost all toddlers (81.7%) have income  $\geq$  UMR with normal nutritional status, and a small proportion (23.3%) have income  $<$  UMR with malnutrition. The chi-square test results show a p-value of 0.003 ( $<$ 0.05), which means there is a relationship between maternal knowledge and the nutritional status of toddlers aged 12-59 months. The research results show that in the variable of feeding parenting patterns, the analysis results show that a small portion of toddlers with inadequate feeding parenting patterns have poor nutritional status, namely 34.3%, while those with good feeding parenting patterns almost all toddlers have normal nutritional status, namely 80.7%. The chi-square test shows a p-value = 0.008 ( $<$ 0.05), which means there is a significant relationship between feeding parenting patterns and the nutritional status of toddlers aged 12-59 months.

Table 3.  
Multivariate Modelling

No	Variable	p-value	Exp (B)	95% CI For Exp(B)	
				Lower	Upper
Malnutrition					
1	Exclusif breastfeeding	0.347	0.612	0.212	1.700
2	Sosio economic status	0.053	2.794	0.987	7.907
3	Maternal Knowledge	0.360	1.896	0.482	7.455
4	Parenting patterns	0.060	3.212	0.952	10.836
Normal Nutrition					
1	Exclusif breastfeeding	0.053	0.437	0.189	1.010
2	Sosio economic status	0.742	1.161	0.477	2.823
3	Maternal Knowledge	0.943	0.965	0.364	2.559
4	Parenting patterns	0.631	1.302	0.443	3.827

The most related factor to the nutritional status of underweight toddlers is the feeding pattern with the largest  $\beta$  coefficient value of 3.212, meaning that toddlers have a 3.212 times higher chance of experiencing undernutrition in the Padang Pasir Community Health Center Work Area. The most related factor to the nutritional status of normal toddlers is the feeding pattern with the largest  $\beta$  coefficient value of 1.302, meaning that toddlers have a 1.302 times higher chance of experiencing normal nutrition in the Padang Pasir Community Health Center Work Area.

## DISCUSSION

### The Relationship Between Exclusive Breastfeeding History and Nutritional Status of Toddlers Aged 12-59 Months

Breast milk (ASI) is the foundation of good nutrition for optimal child survival, growth, and development. Breast milk is given to babies from birth to 6 months of age without any additional food or drink, except for medication. Exclusive breastfeeding plays a crucial role in maintaining a baby's nutritional status. Babies who are exclusively breastfed receive the nutrients they need, especially protein, fat, vitamins, minerals, and natural antibodies not found in formula (Mariah et al., 2025). This research aligns with research conducted by Jum, Fauziah, and Gama (2022), which explains that babies who are exclusively breastfed have a more stable growth pattern and a lower risk of obesity as they grow older. This is because breast milk contains leptin and growth hormone, which play a role in regulating metabolism and energy balance. Nutritional status established early in life continues throughout childhood and even influences health in adulthood.

According to research conducted by Hanifa et al. (2024), challenges to exclusive breastfeeding are still common, such as low maternal knowledge, cultural influences, and limited support from the workplace and community. Mothers need ongoing education, motivation, and support to consistently provide exclusive breastfeeding (Hanifa et al., 2024a). Without this support, exclusive breastfeeding practices are difficult to implement, which can impact the nutritional status of toddlers. Therefore, exclusive breastfeeding must be seen not only as an individual responsibility of the mother, but also as a collective effort involving the family, health workers, and government policy (Laili & Machfudloh Rahmawati, 2022).

Exclusive breastfeeding is the provision of only breast milk without additional food or drink, not even water, for the first six months of a baby's life (Hanifah & Sab'ngatun, 2020a). This practice is the best form of nutritional intake that can ensure optimal growth, development, and health of infants (Hanifa et al., 2024b). Breast milk has a balanced nutritional composition, is easily digested, and contains bioactive substances that cannot be replaced by formula or other foods. Exclusive breastfeeding is considered a key factor in determining the nutritional status of toddlers. According to Almtsier (2015), exclusive breastfeeding also helps babies develop healthy eating patterns later in life. Babies who are exclusively breastfed have more stable growth patterns and a lower risk of obesity as they grow older. This is because breast milk contains leptin and growth hormone, which play a role in regulating metabolism and energy balance. Nutritional status established early in life continues throughout childhood and even influences health in adulthood.

This research supports exclusive breastfeeding, especially during the first six months of life. Exclusive breastfeeding promotion programs conducted through integrated health posts, nutrition counseling, and lactation counseling at community health centers are important factors in maintaining children's health. Children who are exclusively breastfed are better protected from health problems that can lead to nutritional issues. Likewise, children who are not exclusively breastfed are at greater risk of malnutrition. This situation demonstrates the importance of promoting and supporting exclusive breastfeeding in the Padang Pasir Community Health Center as a strategy to improve the nutritional status of toddlers. Programs to prevent nutritional problems and developmental delays need to encourage comprehensive education for mothers about the importance of breastfeeding, as well as provide social support and breastfeeding facilities, both at home and in the workplace.

### **The Relationship Between Socioeconomic Status and Nutritional Status of Toddlers Aged 12-59 Months**

Income and revenue levels provide a clearer picture of a family's economic position in society, representing the sum of all earnings. Previous research has found that a person's nutritional status is significantly influenced by the availability of adequate food, both in quality and quantity, and this is closely related to family income. The higher the income, the greater the family's ability to purchase diverse, nutritionally balanced, and safe foods for toddlers (Rahmawati et al., 2019). Research conducted by Nurahadiyatika (2022) states that a household's food security is determined by the availability, accessibility, and utilization of food. If income is low, a family's access to quality food is limited, putting children at greater risk of chronic energy deficiency and micronutrient deficiencies. This condition can hinder a child's long-term physical and mental development.

In addition to food, family income also determines their ability to access health services. A person's health is determined not only by biological and environmental factors but also by socioeconomic factors, including income. Families with sufficient income can take their children for routine checkups, immunizations, and treatment when sick, all of which contribute to a child's nutritional status. Economic limitations often cause families to delay or even ignore their children's health needs (Wahyuningsih et al., 2020). Family income is not merely an economic factor; it is also a nutritional determinant, influencing almost every aspect of a child's life, from food and health to the environment and even parenting (Wahyuningsih et al., 2020). Consistent with Soetjningsih's opinion, child growth and development are influenced by both internal (genetic and biological) and external (environmental, economic, and social) factors (Rahmawati et al., 2019). Family income is a crucial external factor due to its fundamental nature. Therefore, increasing family income is a crucial strategy for improving the nutritional status of toddlers (Zakiyyah, 2021).

Research shows that parental income plays a significant role in determining a toddler's nutritional status. Parents with incomes below the minimum wage (UMR) tend to experience limitations in meeting nutritional needs, putting their children at greater risk of developing malnutrition.

Conversely, parents with incomes equal to or above the minimum wage (UMR) have better access to a variety of nutritious foods, thus helping them maintain their child's nutritional status within the normal range. Researchers believe that high-income families are better able to provide a healthy environment for their children, reducing the risk of infection and ensuring optimal nutrient absorption. Therefore, a toddler's nutritional status is not solely related to their diet but also closely linked to the quality of their growing environment.

### **The Relationship Between Mothers' Knowledge and the Nutritional Status of Toddlers Aged 12-59 Months**

Maternal knowledge plays a key role in determining the nutritional status of toddlers, as mothers are typically the primary caregivers responsible for meeting their children's needs. Other research shows that mothers with adequate knowledge are able to determine nutritious foods, adjust nutritional intake according to their child's age, and maintain appropriate dietary patterns. According to Notoatmodjo, knowledge is the result of the process of knowing after someone senses an object, which is largely acquired through education and experience (Khayati, 2021). Other researchers have found that a lack of maternal nutritional knowledge can lead to errors in feeding practices. Nutritional problems are not only due to food availability but also to incorrect consumption patterns influenced by nutritional knowledge. Some mothers still believe that providing toddlers with staple foods is sufficient without considering nutritious side dishes. This puts children at risk of micronutrient deficiencies, such as iron and vitamin A, which are crucial for brain growth and development (Sefty et al., 2024). Research conducted by Mustar (2022) states that maternal expertise is the most important factor in meeting children's nutritional needs. Knowledge based on comprehensive knowledge can also encourage the development of positive behaviors and maternal habits in providing nutritious food to children, complemented by a mother's understanding of nutritional needs.

Maternal knowledge is closely related to attitudes and feeding practices. According to Lawrence Green's PRECEDE-PROCEED model, knowledge is a predisposing factor that plays a role in shaping a person's health behaviors. Mothers with good knowledge are more likely to engage in healthy behaviors, including nutritional parenting patterns. Mothers are able to identify toddlers' nutritional needs, such as the importance of animal protein, vitamins, minerals, and fluids, and adapt these to the child's health condition (Budianto & Akbar, 2023). Maternal knowledge is also related to the utilization of health services. Good health knowledge encourages someone to seek health services when problems arise. Mothers who understand the importance of immunizations, vitamin A, and visits to integrated health posts are more likely to take their children for basic health services (Atik & Susanti, 2020). This step indirectly contributes to maintaining the nutritional status of toddlers because disease can be prevented and early detection of growth and developmental disorders can be carried out (Liani et al., 2023). Research shows that knowledge can be a crucial factor influencing behavior, particularly regarding feeding and child care. The nutrition program at the Padang Pasir Community Health Center has focused on integrated health service posts, nutrition counseling, toddler growth monitoring, and supplementary feeding for malnourished children. Challenges remain, particularly regarding the low knowledge of some mothers, particularly regarding the importance of providing nutritious food.

Based on the researcher's assumptions, most respondents have good knowledge because they have received counseling on preventing malnutrition in toddlers from health workers. However, respondents still have low levels of knowledge, partly due to mothers' absence from counseling activities organized by the community health center. Efforts to improve mothers' knowledge about preventing malnutrition in toddlers include providing ongoing IEC (Information and Communication) and disseminating information through various mass media, such as brochures and leaflets, as easily accessible reading materials for mothers.

## **The Relationship between Parenting Patterns and Nutritional Status of Toddlers Aged 12-59 Months**

Feeding practices play a crucial role in the nutritional status of toddlers. Toddlers raised with inappropriate feeding practices, such as providing limited food without considering variety and nutritional content, are at greater risk of developing malnutrition. Padang Pasir Community Health Center, through its regular integrated health post activities, has been monitoring toddler growth and providing nutrition education to parents. However, some toddlers still experience malnutrition due to inappropriate feeding practices. This suggests that despite access to health services and counseling, not all parents are able to implement proper feeding practices at home. This research aligns with research by Nerawati et al. (2023), which demonstrated that feeding practices are a crucial factor in determining the nutritional status of toddlers. This is further supported by research by Gaol et al., which states that feeding practices encompass parental feeding habits, including frequency, type, portion size, and presentation. A balanced and appropriate diet will provide sufficient energy, protein, vitamins, and minerals to support a child's growth and development. Inappropriate eating patterns will cause nutritional problems, ranging from malnutrition to obesity.

Research conducted by Noviyani et al. (2018) explains that in everyday practice, parents play a dominant role in shaping children's eating habits. Early childhood tends to imitate their parents' eating behavior, so family eating patterns directly influence children. This is supported by research conducted by Riasti et al. (2025), which states that families who habitually consume fast food and rarely serve vegetables will instill the same habits in their children, which can ultimately reduce the quality of nutritional intake. Parenting patterns are not only related to food provision but also involve early nutritional education.

Parenting patterns are a determinant of a toddler's future health, development, and growth. Good parenting patterns include mothers providing nutritious food for toddlers according to their needs. The quality and quantity of food provided must be considered. Mothers must be aware of their child's appetite, and efforts must be made to stimulate the toddler's appetite and create a comfortable atmosphere during mealtimes (Alifariki, 2020). Providing a balanced diet must consider a variety of ingredients to meet macro and micronutrient needs. Menu variety is an important component of a healthy eating pattern. Toddlers who are accustomed to consuming a varied diet, including sources of carbohydrates, animal and plant proteins, vegetables, and fruits, will have better growth and immune system. Without variety, children are at risk of certain nutrient deficiencies even if their calorie intake is adequate (Almatsier, 2015).

Feeding practices are also closely related to a child's nutritional status. Proper feeding practices involve more than just providing food, but encompass a range of parental behaviors involving habits, schedules, menu variations, and responsive feeding practices. Positive interactions between mother and child during mealtimes, such as encouraging, creating a pleasant atmosphere, and gradually introducing food according to the child's ability, will improve a toddler's appetite and nutritional intake (Pusparina & Suciati, 2022).

Researchers assume that poor feeding practices are caused by the large number of mothers who do not exclusively breastfeed their children, the introduction of complementary foods too early, and inappropriate feeding practices, where mothers fail to pay attention to their children's nutritional needs. Mothers provide food following the family's feeding practices and utilizing ingredients available in the household. Feeding children only follows their wishes, without forcing them to eat or seeking out other food variations.

Good eating parenting patterns can be carried out by mothers by providing food according to the age of the toddler, where when the age is over 24 months the toddler can eat like an adult but with smaller portions, mothers must also pay attention to what type of food is given, namely healthy food

that can support the growth and development of toddlers, mothers must also pay attention to the frequency of eating in one day, namely 3-4 times plus 1-2 snacks, besides that mothers must also understand the right time to give food to toddlers in order to grow the toddler's appetite. Parenting styles also encompass the mother's efforts to create a pleasant and comfortable atmosphere and environment during mealtimes, as well as efforts to encourage toddlers to eat when they refuse. Mothers are expected to make efforts to encourage toddlers to finish their meals, such as by creating creative dishes and inviting them to eat with peers.

## **CONCLUSION**

There is a relationship between exclusive breastfeeding history, socioeconomic status, maternal knowledge, and feeding patterns with the nutritional status of children aged 12-59 months in the working area of Padang Pasir Health Centre, Padang City. Mothers with good nutritional knowledge tend to implement appropriate feeding practices, such as providing balanced and nutritious meals according to the child's age and needs. Conversely, low knowledge can lead to inappropriate feeding, increasing the risk of malnutrition.

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