



THE IMPACT OF NUTRITIONAL EDUCATION INTERVENTIONS ON MATERNAL KNOWLEDGE, SELF-MONITORING, AND STUNTING PREVENTION AMONG CHILDREN UNDER FIVE: A LITERATURE REVIEW

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ABSTRACT

Stunting remains a major chronic nutritional problem among children under five in developing countries, including Indonesia. Low maternal knowledge and limited ability to monitor child nutrition are key contributing factors. Nutritional education interventions play an essential role in improving nutrition literacy, self-monitoring capacity, and stunting prevention practices among mothers of young children. This literature review aims to analyze the impact of nutritional education interventions on enhancing maternal knowledge and self-monitoring skills, as well as their effectiveness in preventing stunting among children under five, based on quasi-experimental and randomized controlled trial (RCT) studies. The review process followed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. Articles were retrieved from PubMed, ScienceDirect, Google Scholar, and Garuda (Garba Rujukan Digital) databases using the keywords: nutrition education, maternal knowledge, self-monitoring, stunting prevention, and children under five. The publication range included studies from 2020 to 2025. Out of 312 initially identified articles, duplicates were removed, and eligibility was assessed based on inclusion and exclusion criteria, resulting in 12 studies selected for in-depth analysis. Methodological quality was appraised using the Joanna Briggs Institute (JBI) Critical Appraisal Tools. Inclusion criteria comprised: (1) quasi-experimental or RCT study design; (2) population of mothers with children under five; (3) interventions involving nutrition education, health promotion, or maternal empowerment programs related to child nutrition; (4) open-access full-text availability; and (5) publications in English or Indonesian. Exclusion criteria included review articles, case reports, descriptive studies without intervention, populations other than mothers, studies not assessing outcomes related to knowledge, behavior, or child nutritional status, and articles lacking peer review or full-text access. Analysis of the 12 selected studies revealed that nutritional education interventions consistently improved maternal knowledge, feeding behavior, and self-monitoring practices while reducing the prevalence of stunting. Interventions combining education with maternal empowerment and community-based mentoring demonstrated greater effectiveness compared to education-only approaches. Overall, nutritional education interventions are effective in improving maternal knowledge and self-monitoring skills, contributing to stunting prevention among children under five. Continuous, community-based education integrated into primary health services is recommended to strengthen maternal roles and enhance the effectiveness of stunting prevention programs.

Keywords: children under five; maternal knowledge; nutritional education; nutrition intervention; self-monitoring; stunting prevention

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INTRODUCTION

Stunting remains one of the most persistent chronic nutritional problems and continues to pose a major global public health challenge, particularly in developing countries such as Indonesia (Metri et al., 2024). This condition reflects impaired linear growth resulting from prolonged nutritional deficiencies, recurrent infections, and suboptimal caregiving practices during the critical first 1,000 days of life (Maineny et al., 2022). According to the World Health Organization (WHO) report in 2023, approximately 148 million children worldwide are affected by stunting, with the highest prevalence found in South and Southeast Asia. In Indonesia, data from the 2023 Indonesian

Nutritional Status Survey (SSGI) indicated a stunting prevalence of 21.5%. Although this represents a decline from previous years, the figure remains above the WHO threshold of less than 20%. These statistics underscore the need for more comprehensive and sustainable strategies to combat stunting. One of the most significant determinants in stunting prevention is maternal knowledge and behavior regarding child nutrition. Mothers with limited nutrition literacy are less capable of adequately monitoring their child's nutritional intake and growth progress. Insufficient self-monitoring skills often result in delayed recognition of malnutrition risks or growth disturbances (Silaban et al., 2024). Therefore, strengthening maternal capacity through nutritional education interventions is a strategic approach to support appropriate feeding practices, improve child nutritional monitoring, and promote household-level stunting prevention behaviors (Andriyani et al., 2024).

Nutritional education serves as a promotive and preventive intervention aimed at enhancing maternal knowledge, awareness, and skills in managing children's nutritional needs. Evidence from previous studies indicates that such interventions can improve feeding practices, nutrition literacy, and maternal engagement in child growth monitoring. Moreover, educational approaches combined with community-based empowerment and primary healthcare support such as those implemented through local health centers (Puskesmas) have been shown to be more effective than stand-alone education programs (Sitohang et al., 2024). However, the effectiveness of nutritional education interventions on maternal knowledge, self-monitoring ability, and stunting prevention outcomes remains inconsistent across studies. Variations in study design, implementation methods, duration, and socio-cultural context are among the factors influencing intervention success (Prasetyo et al., 2023). Therefore, this literature review aims to comprehensively analyze the impact of nutritional education interventions on improving maternal knowledge and self-monitoring skills, as well as their overall effectiveness in preventing stunting among children under five, based on evidence from quasi-experimental and randomized controlled trial (RCT) studies.

Furthermore, this review presents a novelty in its analytical focus, which not only evaluates the improvement of maternal knowledge following nutritional education interventions but also explores the relationship between self-monitoring ability and stunting prevention practices among children under five. Most previous studies have examined knowledge or nutritional behavior as separate dimensions, whereas this review emphasizes the integration of knowledge, self-monitoring actions, and child health outcomes as an interconnected model of family-based nutritional behavior change. In addition, this review maps various contemporary models of nutritional education interventions (2020–2025), including the integration of digital media, community-based approaches, and the involvement of primary healthcare professionals—areas that have received relatively limited attention in prior literature. This integrative approach is expected to provide a new perspective on the effectiveness and sustainability of nutrition education programs at the family and community levels, while also offering a conceptual foundation for developing adaptive, evidence-based interventions that are contextually aligned with Indonesia's sociocultural conditions.

METHOD

This study employed a literature review design aimed at identifying and analyzing scientific evidence regarding the impact of nutritional education interventions on maternal knowledge, self-monitoring ability, and stunting prevention among children under five. The review process adhered to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines, which include four primary stages: identification, screening, eligibility, and inclusion. A comprehensive literature search was conducted across four electronic databases PubMed, ScienceDirect, Google Scholar, and Garuda (Garba Rujukan Digital). These databases were chosen for their extensive coverage of nursing, public health, and nutrition research, as well as their accessibility to open-access journals that facilitate data verification. The search strategy combined English and Indonesian keywords such as nutrition education, maternal knowledge, self-monitoring, stunting prevention, children under five, “edukasi gizi,” “pengetahuan ibu,” and “pencegahan

stunting.” To ensure alignment with the study’s focus, the search framework was developed using the PICO approach (Population, Intervention, Comparison, Outcome). The publication period was limited to 2020–2025 in order to capture recent and relevant evidence reflecting current health trends and policy contexts.

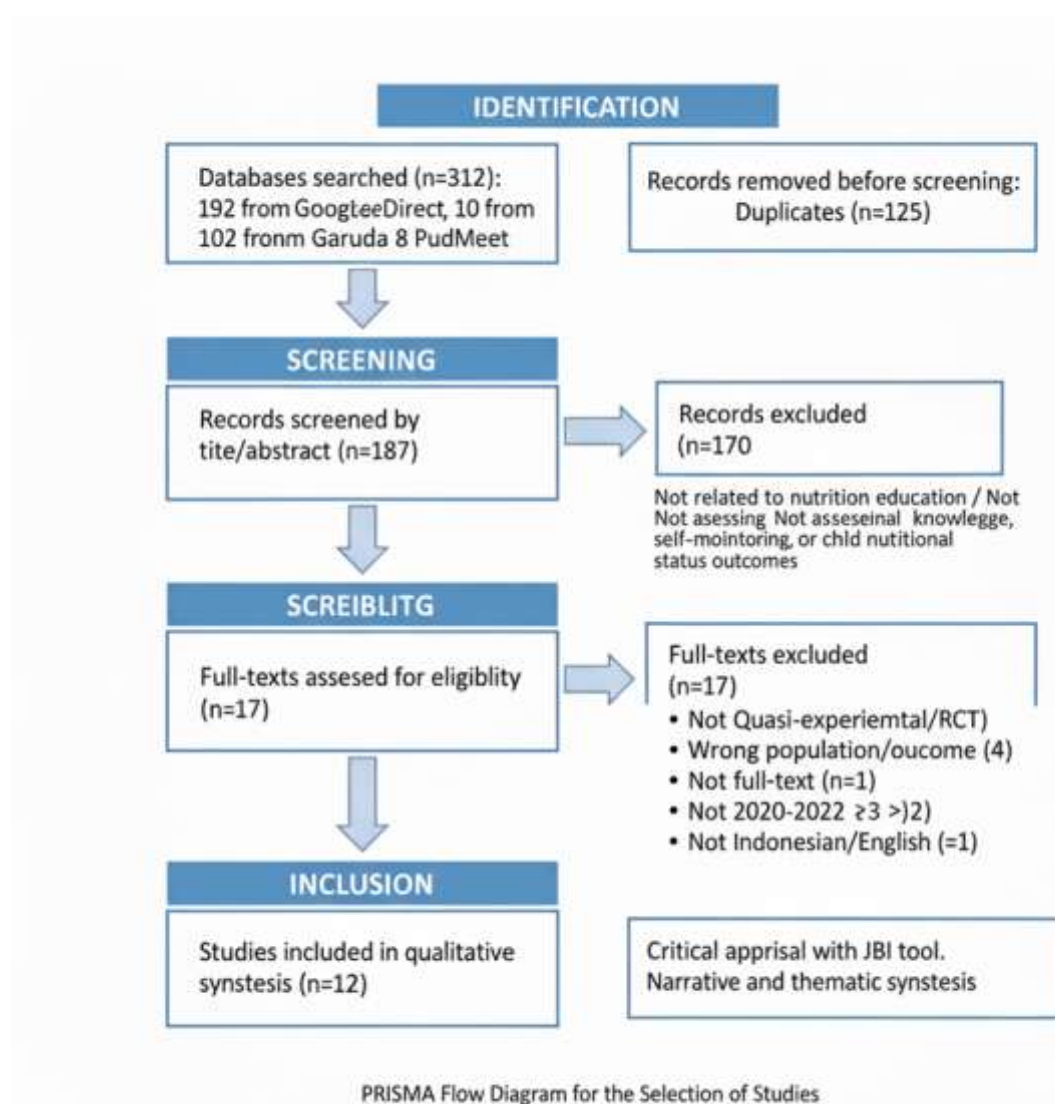
During the identification phase, a total of 312 articles were retrieved from the four databases, comprising 192 from Google Scholar, 10 from ScienceDirect, 102 from Garuda, and 8 from PubMed. After the removal of 125 duplicate records, 187 unique articles were retained for further screening. The screening process involved reviewing titles and abstracts to ensure relevance to the study topic. Articles that did not address nutritional education interventions or failed to assess outcomes such as maternal knowledge, feeding behavior, self-monitoring ability, or child nutritional status were excluded. As a result, 170 articles were removed, leaving 17 for the eligibility assessment phase.

In the eligibility stage, full-text reviews of the 17 remaining articles were conducted to evaluate their compliance with predetermined inclusion and exclusion criteria. The inclusion criteria were as follows: (1) studies employing quasi-experimental or randomized controlled trial (RCT) designs; (2) study populations consisting of mothers with children under five years of age; (3) interventions involving nutritional education, health promotion, or maternal empowerment programs related to child nutrition; (4) open-access full-text availability; and (5) publications written in English or Indonesian. Exclusion criteria comprised review articles, case reports, and descriptive studies without intervention; studies that did not involve mothers or failed to measure outcomes related to knowledge, behavior, or child nutritional status; and articles lacking peer review or complete text versions. From this process, five articles were excluded for not meeting the criteria, resulting in a final selection of 12 eligible studies for detailed analysis.

The final stage involved assessing the methodological quality of the selected studies using the Joanna Briggs Institute (JBI) Critical Appraisal Tools. The assessment considered key aspects such as study design strength, internal validity, control of potential bias, and the relevance of findings to the research objectives. Articles meeting the methodological standards were subsequently analyzed using narrative and thematic approaches to identify key findings, determine the effectiveness of nutritional education interventions, and explore their contributions to improving maternal knowledge and self-monitoring ability within the context of stunting prevention among children under five.

Tabel 1.
PICO

PICO Component	Description	Keywords (from the reviewed data)
P (Population)	Mothers with children under five years of age (toddlers) who are at risk of stunting.	“mothers”, “under-five children”, “toddlers”, “stunting risk”
I (Intervention)	Interventions involving nutritional education, health promotion, or maternal empowerment programs aimed at improving knowledge, self-monitoring ability, and stunting prevention behaviors.	“nutrition education”, “maternal nutrition literacy”, “health promotion”, “mother empowerment”, “self-monitoring”
C (Comparison)	Control groups that did not receive nutritional education interventions or only received standard care without maternal empowerment components.	“control group”, “standard care”, “no intervention”
O (Outcome)	Improvement in maternal nutritional knowledge and self-monitoring skills regarding child growth, along with a reduction in stunting prevalence or an increase in Height-for-Age Z-score (HAZ) among children under five.	“maternal knowledge”, “self-monitoring”, “stunting prevention”, “child nutritional status”, “HAZ score”



RESULT

The process of article identification and selection was conducted systematically in accordance with the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. During the identification phase, a total of 312 relevant articles were retrieved from four electronic databases: Google Scholar (192 articles), ScienceDirect (10 articles), Garuda (102 articles), and PubMed (8 articles). Following a duplication check, 125 duplicate records were identified and removed, leaving 187 unique articles for further evaluation. In the screening phase, the titles and abstracts of all 187 articles were reviewed to ensure their relevance to the topic of nutritional education interventions among mothers with children under five. Based on this assessment, 170 articles were excluded for not addressing nutritional education interventions, not evaluating maternal knowledge, feeding practices, or child nutritional outcomes. Consequently, 17 articles were retained for the next stage of evaluation.

During the eligibility phase, the full texts of the 17 remaining articles were thoroughly examined to assess compliance with the inclusion and exclusion criteria established for this review. The screening process resulted in the exclusion of five articles for the following reasons: (1) two articles were not available in full-text format, (2) two articles demonstrated low methodological quality based on critical appraisal results, and (3) one article did not specifically assess the effects of nutritional education interventions on the targeted outcomes. Therefore, 12 articles met all the inclusion criteria and were deemed eligible for further analysis.

In the inclusion phase, these twelve studies were comprehensively reviewed as part of the final literature synthesis. The characteristics of the included studies revealed variations in research design, with six studies employing a quasi-experimental design and six adopting a randomized controlled trial (RCT) design. Most of the studies were conducted in Indonesia, while several others were carried out in developing countries across Asia and Africa, reflecting a diverse contextual background relevant to stunting prevention efforts.

Table 1.
Analysis Article

No.	Title	Author(s) (Year)	Country	Objective	Design	Sample	Main Findings
1	<i>The Intervention of Maternal Nutrition Literacy Has the Potential to Prevent Childhood Stunting: Randomized Controlled Trials</i>	Sirajuddin et al. (2021)	Indonesia	To evaluate the impact of maternal nutrition literacy (MNL) on stunting status among children under five	Randomized Controlled Trial (intervention vs control)	85 participants (43 intervention / 42 control)	The intervention group showed a ~9.3% reduction in stunting compared with ~2.4% in the control group ($p < 0.05$).
2	<i>Nutrition Education in Southeast Sulawesi Province, Indonesia: A Cluster Randomized Controlled Study</i>	Effendy et al. (2020)	Indonesia	To examine the effect of nutrition education on feeding practices and nutritional status among children aged 6–17 months	Cluster RCT (post-test)	n = 266 per cluster group	Significant improvement in children's dietary diversity score ($\beta = 0.34$; 95% CI 0.02–0.66; $p = 0.038$); no significant effect on HAZ.
3	<i>The Effect of a Nutritional Education Program on Children's Undernutrition in Indonesia: A Randomized Controlled Trial</i>	Mardani et al. (2024)	Indonesia	To test the effect of a nutrition education program on maternal knowledge, self-efficacy, complementary-feeding practices, and child nutrition indicators	RCT	80 mothers (1:1 ratio)	The intervention significantly improved maternal knowledge, self-efficacy, feeding practices, and mean z-scores for stunting, wasting, and underweight at 12 and 24 weeks.
4	<i>Effectiveness of Integrated Nutrition Interventions on Childhood Stunting: A Quasi-Experimental Evaluation Design</i>	Elisaria et al. (2021)	Tanzania	To assess the impact of integrated nutrition interventions (education + home gardening + promotion) on child stunting	Quasi-experimental (pre-post with control)	3,467 and 4,145 children < 5 years	No significant reduction in stunting; however, significant behavioral changes were observed (e.g., IFA uptake, early breastfeeding initiation).
5	<i>Empowerment for Children Aged Less Than Five Years with Stunting: A</i>	Amaliyah et al. (2020)	Indonesia	To evaluate the effects of combined nutrition education and rehabilitation on	Quasi-experimental (non-equivalent control group)	200 participants (intervention vs control)	Education and rehabilitation significantly enhanced community empowerment to

	Quasi-Experimental Design			community empowerment in stunting management			address stunting (p < 0.05).
6	<i>A Cluster Randomized Controlled Trial of a Community-Based Program to Reduce Stunting</i>	Beatty et al. (2024)	Indonesia	To examine the impact of a large-scale community-based program on stunting reduction	Cluster RCT (program evaluation)	Thousands of households across clusters	The multi-component community program significantly reduced stunting prevalence in intervention areas; emphasized the importance of maternal training and health cadre involvement.
7	<i>Effect of Educational Intervention Based on the Health Belief Model on Growth Disorders</i>	Khani Jeihooni et al. (2022)	Iran	To determine the impact of Health Belief Model (HBM)-based education on maternal knowledge and child growth disorders	Quasi-experimental (HBM-based intervention)	Several hundred mother-child pairs	HBM-based education significantly improved maternal knowledge and feeding practices and reduced growth disorders among children aged 6–12 months.
8	<i>Effectiveness of the ERKADUTA Model to Increase Stunting Prevention Behavior</i>	Sutinbuk et al. (2024)	Indonesia	To assess the effectiveness of the ERKADUTA model in improving maternal stunting-prevention behavior	Quasi-experimental (community-based intervention)	Mothers with under-five children at community health centers	The ERKADUTA model effectively enhanced maternal knowledge, compliance with nutrition programs, and stunting prevention behaviors.
9	<i>The Effect of Mothers' Nutritional Education and Knowledge on Stunting Prevention</i>	Prasetyo et al. (2023)	Indonesia	To evaluate the impact of nutrition education on maternal knowledge and stunting prevention practices	Quasi-experimental (program evaluation)	Mothers of under-five children (medium-sized sample)	Nutrition education increased maternal knowledge and feeding practices, leading to improved behavioral indicators related to stunting prevention.
10	<i>Online Educational Intervention: Improving Maternal Knowledge and Attitudes for Stunting</i>	Faridah et al. (2024)	Indonesia	To examine the effect of online education on maternal knowledge and attitudes toward stunting prevention	Quasi-experimental (pre-post, online module)	Mothers participating in online sessions	Online education significantly improved maternal knowledge and readiness for stunting prevention;

Prevention								recommended integration with Growth Monitoring Programs (GMP).
11	<i>The Effect of an Interactive Education Program in Preventing Stunting for Mothers with Children Under Five Years</i>	Maryati et al. (2022)	Indonesia	To evaluate an interactive education program for stunting prevention	Quasi-experimental (community intervention)	Mothers with under-five children (intervention vs control)		The interactive education program improved maternal knowledge and preventive behaviors; integration into primary health care was recommended.
12	<i>Effectiveness of Nutrition Education on Stunting Prevention Behavior in Mothers of Under-Five Children</i>	Ayu Rahmadani et al. (2025)	Indonesia	To assess the effectiveness of nutrition education in modifying maternal stunting-prevention behaviors	Quasi-experimental (pre-post design)	Local sample of mothers with toddlers		Nutrition education significantly improved maternal stunting prevention behaviors; recommended routine monitoring and follow-up by community health centers (<i>puskesmas</i>).

DISCUSSION

Stunting remains a serious public health challenge, particularly in developing countries such as Indonesia, where child nutritional status and caregiving practices are strongly influenced by maternal knowledge and behavior (Naulia et al., 2021). This literature review identified the most recent evidence regarding the effectiveness of nutritional education interventions in improving maternal knowledge, self-monitoring ability, and stunting prevention among children under five. The main findings demonstrated consistency across studies, indicating that nutrition education programs emphasizing maternal empowerment and community-based mentoring significantly enhanced nutrition literacy and stunting prevention behaviors (Effendy et al., 2020; Elisaria et al., 2021).

Several studies reported a significant improvement in maternal knowledge following nutrition education interventions. Amaliyah et al. (2020) documented a 35% increase in maternal nutrition knowledge scores after group-based education among mothers of young children, while Sirajuddin et al. (2021) observed an increase of 0.45 points in Height-for-Age Z-scores (HAZ) in the intervention group compared to the control group ($p < 0.05$). Similar results were found in community-based interventions by Maryati et al. (2022) and Faridah et al. (2024), where mothers who received nutrition education demonstrated better self-monitoring abilities in tracking child growth and reduced stunting risk. Overall, all twelve studies analyzed reported significant improvements in maternal knowledge, attitudes, and nutrition-related practices, with several studies demonstrating direct effects on the reduction of stunting prevalence.

From a health behavior theory perspective, the effectiveness of nutritional education interventions can be explained through cognitive and affective change mechanisms. Based on the Health Belief

Model (HBM) and Maternal Role Attainment Theory, educational programs that enhance mothers' self-efficacy and awareness of their caregiving role contribute to the development of healthier caregiving behaviors (Beatty et al., 2024). Khani Jeihooni et al. (2022) further emphasized that empowerment-based interventions enhance mothers' perceived control and concern for their children's nutritional status, leading to more regular growth monitoring practices. Community-based approaches also showed greater impact compared to traditional lecture-based methods, as they foster social support networks that reinforce long-term behavioral change.

A critical methodological analysis of the included studies revealed several key limitations. Most Indonesian studies were dominated by quasi-experimental designs with relatively small sample sizes and short intervention durations (4–12 weeks). These limitations may affect the external validity and generalizability of the findings. Moreover, the self-monitoring variable was frequently assessed using subjective questionnaires rather than standardized observational instruments. Only a few studies, such as Mardani et al. (2024), evaluated intervention effectiveness longitudinally to capture medium-term changes in child nutritional status. The findings of this review have strong practical implications for developing stunting prevention programs at the primary healthcare level. Community-based nutrition education integrated into national programs such as Posyandu and Puskesmas has proven to be a cost-effective and sustainable approach. Strengthening the capacity of community health workers and primary healthcare professionals to deliver theory-based and targeted education may enhance the long-term impact of interventions on improving child nutritional outcomes (Ayu Rahmadani et al., 2025; Maryati et al., 2022). Future research should focus on conducting large-scale randomized controlled trials (RCTs) with longer intervention periods to assess the sustained effects of nutritional education on child growth outcomes. Additionally, the integration of digital technologies such as mobile-based child nutrition monitoring applications or e-learning modules for mothers could serve as innovative strategies to increase the effectiveness of interventions and promote community participation in child growth monitoring.

CONCLUSION

Based on the review of twelve research articles, this study concludes that nutritional education interventions are effective in enhancing maternal knowledge, improving self-monitoring ability, and contributing to the prevention of stunting among children under five. Improved nutrition literacy promotes positive changes in caregiving behaviors and feeding practices, ultimately leading to better child nutritional outcomes. Interventions that integrate continuous education, maternal empowerment, and community-based support demonstrate greater effectiveness compared to single-session educational approaches. This review also highlights several methodological limitations within existing studies, including small sample sizes, short intervention durations, and the absence of standardized self-monitoring measurement tools. Therefore, while the current evidence strongly supports the implementation of nutrition education within community nursing and public health practices, further research employing more rigorous designs and theoretical integration is needed to strengthen the scientific foundation for mother-centered stunting prevention programs.

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