



PARENTING PATTERNS RELATED TO THE INCIDENCE OF STUNTING IN EARLY CHILDHOOD

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ABSTRACT

Stunting is a serious problem faced by many developing countries, including Indonesia. This condition occurs when a child experiences stunted growth due to chronic malnutrition, characterized by a child's height being shorter than children of the same age. Stunting is influenced by various factors, namely lack of access to nutritious food, lack of knowledge about nutrition and health, poor sanitation, and poverty. The purpose of the study was to determine the relationship between Parenting Patterns with the Incidence of Stunting in Early Childhood. The type of research used is a study. observational analytic with cross sectional approach . Subjects in this study included toddlers aged 06-59 months in Teluk Rumbia Village. The sampling technique in this study used purposive sampling using the Slovin formula. The research instrument used a questionnaire. All questionnaires tested showed a calculated r value (see the corrected item-total correlation column) of 0.444, indicating that all questionnaires were valid. The reliability value for the 10 questions on parenting patterns was 0.850 0.60. EPPGBM Application and Checklist Sheet. Data Analysis using Chi Square. Characteristics with Poor Parenting Patterns were 19 people (33.9%) and Good Parenting Patterns were 37 people (66.1%). Respondents had characteristics of Not Stunting as many as 29 people (51.8%) and those who were not stunted as many as 27 people (48.2%). The parenting factor obtained a p-value of $0.006 < 0.05$, which means there is a meaningful relationship. The strength of the relationship shown from the OR result is Parenting Patterns (OR: 0.384), Mother's parenting patterns are related to the incidence of stunting in Teluk Rumbia Village. This study is expected to provide practical guidance for parents in Teluk Rumbia Village in improving childcare patterns to prevent stunting.

Keywords: early childhood; parenting; stunting

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INTRODUCTION

Stunting is a serious problem facing many developing countries, including Indonesia. This condition occurs when a child experiences stunted growth due to chronic malnutrition, characterized by a shorter height than other children their age. Malnutrition occurs from infancy and early life after birth, but is not apparent until the child is two years old (Alifariki, 2020). Stunting affects not only physical growth but also cognitive development, which can ultimately reduce productivity and quality of life in adulthood.

Stunting is the impaired growth and development experienced by children due to chronic malnutrition, recurrent infections, and inadequate psychosocial stimulation. A child is considered stunted if the z-score of the length/height-for-age index (H/A or H/A) is less than two standard deviations ($z\text{-score} < -2\text{ SD}$). Based on 2020 data from the World Health Organization (WHO) and UNICEF, an estimated 22.2%, or 149.2 million children under five, experience stunting. Approximately 60% of stunted children live in low-income countries. Asia has the highest stunting rate, at 79 million children (52.9%), particularly in Southeast Asia (54.3 million), followed by Africa (61.4 million children (41.1%)), and Latin America (5.8 million children (3.8%)) (Ministry of Health of the Republic of Indonesia, 2022).

Stunting is also a problem in Indonesia. 2020 UN statistics recorded that 6.3 million young children or toddlers suffered from stunting in Indonesia. Based on the results of the 2022 Indonesian Nutritional Status Survey (SSGI), the stunting rate in Indonesia remains quite high at 21.6%, although it decreased from the previous year's 24.4% in 2021. This figure is still far from Indonesia's national target of reducing stunting prevalence to 14% by 2024 (BKKBN, 2023).

In 2022, the stunting prevalence in Aceh Province reached 31.2%, making it the fifth-highest province in Indonesia for stunting among toddlers. Subulussalam City recorded the highest stunting rate in Aceh in 2022, with a prevalence of 47.9%. North Aceh Regency and Pidie Jaya Regency followed, with prevalence rates of 38.3% and 37.8%, respectively. Conversely, Aceh Jaya Regency recorded the lowest prevalence at 19.9%. Although the stunting prevalence in Aceh Singkil Regency is not among the highest in Aceh Province, at 34%, this figure is alarming, as it exceeds the World Health Organization (WHO) threshold of 20% and Indonesia's national target for stunting prevalence. This high stunting rate underscores the need for greater attention and action on this public health issue (Ministry of Health, 2022).

Stunting is influenced by various factors, including lack of access to nutritious food, lack of knowledge about nutrition and health, poor sanitation, and poverty. Stunted growth is the most common form of malnutrition in children under 5 years of age. Stunted growth is largely caused by fetal growth restriction due to maternal malnutrition and health problems during pregnancy, socioeconomic constraints, infectious diseases, and inappropriate feeding, resulting in the child's inability to reach their cognitive and physical potential (Namangboling, 2023).

The impact of stunting on children results in developmental delays, preventing children from reaching their full physical and cognitive potential (Wardita, 2023). Both long-term and short-term impacts include increased morbidity and mortality, poor child development and learning capacity, an increased risk of infections and non-communicable diseases in adulthood, and decreased productivity and economic capacity (Wahyuni et al., 2023).

According to UNICEF's Stunting Bulletin, stunting is caused by the influence of parenting patterns, the quality of health services, the environment, and food security. Parenting patterns are the attitudes or habits parents apply in caring for and raising children at home. The conceptual framework proposed that parenting patterns encompass several aspects, namely maternal attention/support for the child in feeding practices (including early initiation of breastfeeding), colostrum provision, exclusive breastfeeding and complementary feeding, psychosocial stimulation for the child, and health care (Lestari et al., 2024).

Research shows that various factors such as socioeconomic status, access to healthcare, and parenting styles play a significant role in the incidence of stunting in early childhood. Several studies have shown that parenting styles significantly influence the risk of stunting. Nurhalizah et al. (2023) found that poor parenting significantly determines the incidence of stunting in children, and that factors influencing poor parenting include education, knowledge, income, family size, and parenting styles.

Based on a preliminary study conducted by researchers at the Singkil Community Health Center (UPTD) in Aceh Singkil Regency, Aceh Province, this area recorded a relatively high stunting rate in 2022, reaching 15.1%, which declined to 9.7% in 2023. One of the villages with stunting hotspots in Singkil District is Teluk Rumbia Village, where, as of January 2024, 43 toddlers were stunted out of a total of 107 in the district. This situation is concerning given the long-term impacts of stunting on individuals and society as a whole (Aceh Singkil District Health Office, 2022-2024).

Maternal and child health challenges in Teluk Rumbia Village involve limited access to health services, limited medical resources and facilities, low health awareness, and the impact of socioeconomic conditions that influence parenting patterns. Parenting patterns in this village are affected by these challenges, including a lack of knowledge about good health practices and difficulties in accessing affordable health services (Wibowo, 2021). Therefore, efforts to improve health education, access to health services, and support for health behavior change among parents are crucial steps in improving maternal and child health in Teluk Rumbia Village. The purpose of the study was to determine the relationship between Parenting Patterns with the Incidence of Stunting in Early Childhood.

METHOD

The research method used was an observational analytical study with a cross-sectional approach. The population of this quantitative study included all 126 children aged 6-59 months and their parents living in Teluk Rumbia Village. The sampling technique used was purposive sampling. The inclusion criteria were: toddlers aged 6-59 months residing in Teluk Rumbia Village and registered with the EPPGBM application, possessing a KIA (Child Health and Child Health) book, and mothers of toddlers willing to participate as respondents. All questionnaires tested showed a calculated r value (see the corrected item-total correlation column) of 0.444, indicating that all questionnaires were valid. The reliability value for the 10 questions on parenting patterns was 0.850 0.60. Based on the instrument testing results, all questions in this instrument were deemed reliable and suitable for further research. Data Analysis using Chi Square.

RESULT

Tabel 1.
Frequency Distribution of Respondents by Age, Education, Occupation and weight

Characteristic	f	%
Age		
<20 Years >35 Years	22	39.3
≥20 Years ≤35 Years	34	60.7
Education		
Low Education	39	70
High Education	17	30
Occupation		
Work	53	94.6
Not work	3	5.4
Weight		
<2500 Gram	7	12.5
≥2.500 Gram	49	87.5

Table 1, it shows that respondents aged <20 years <35 years numbered 22 people (39.3%) and those aged ≥20 years ≤35 years numbered 34 people (60.7%). Most of the respondents were aged ≥20 years ≤35 years. there are 39 respondents (70%) who have a low level of education and 17 respondents (30%) who have a high level of education. There are 53 respondents (94.6%) were unemployed, while 3 respondents (5.4%) were employed. Most respondents were unemployed. there were 7 (12.5%) respondents with a birth weight of less than 2,500 grams and 49 (87.5%) respondents with a birth weight above 2,500 grams.

Tabel 2.

Frequency Distribution of Respondents Based on Parenting Patterns in Early Childhood

Characteristic	f	%
Not Good	19	33.9
Good	37	66.1

Based on Table 2, it shows that 19 respondents (33.9%) had characteristics of Poor Parenting Patterns and 37 respondents (66.1%) had Good Parenting Patterns.

Tabel 3.

Frequency Distribution of Respondents Based on the Incidence of Stunting in Early Childhood

Characteristic	f	%
Not Stunting	29	51.8
Stunting	27	48.2

Table 6, it shows that 29 respondents (51.8%) had the characteristics of not stunting and 27 people (48.2%) had not stunted.

Tabel 4.

Relationship of Parenting Patterns with the Incidence of Stunting in Early Childhood

Stunting	Parenting Patterns				OR	value P	CI 95%
	Poor		Good				
	f	%	f	%			
Not Stunting	5	8.9	24	42.8	1.719	0.006	1.123-2.630
Stunting	13	23.3	14	25			

The analysis showed that of the 56 respondents who did not experience stunting, 29 were categorized as having poor parenting patterns (5 of them), and 24 were categorized as having good parenting patterns. Meanwhile, 27 respondents experienced stunting, 13 of whom were categorized as having poor parenting patterns and 14 of whom were categorized as having good parenting patterns. Based on the results of the Chi-Square test, the p-value was 0.006 (p-value <0.05), indicating a significant relationship between parenting patterns and the incidence of stunting in early childhood in Teluk Rumbia Village. The results in Table 4.12 show that the proportion of non-stunted toddlers with good parenting patterns was 42%, higher than the proportion of stunted toddlers with poor parenting patterns (32.2%). This indicates that toddlers with poor parenting patterns have a 1,719 times greater risk than toddlers with good parenting patterns (OR: 0.193; 95% CI 1.123 – 2.630).

DISCUSSION

The way parents raise toddlers is known as parenting style. To ensure ideal growth and development, good parenting is necessary. Not every family has the same level of education as their parents. Family level, occupation, and education are among the contributing variables. Various parenting styles will impact a child's nutritional health. Three main components of childcare are: providing food for the child, preparing it, storing it, maintaining a clean environment, and using health facilities for the child (Salma Zulfa et al., 2024). In this situation, parenting techniques related to how to feed toddlers may be the main cause of stunting. Balanced nutritional intake is ensured by food, such as nutrients (Suprayitno,2023). Therefore, a toddler's growth will be disrupted if their nutritional needs are not met, possibly leading to short stature, thinness, or even malnutrition. Feeding is regulated by balanced nutritional requirements, which can be managed by parents or caregivers with good parenting styles, thereby reducing the risk of stunting in early childhood (Wardita,2021)

The results showed that some respondents who did not experience stunting received good parenting, with a p-value of $0.045 < 0.05$, indicating a significant relationship between parenting styles and stunting. Parenting styles are the care provided by parents, both in terms of feeding practices for toddlers and in providing freedom for children to choose their own food, as well as paying attention to their lifestyle and rest patterns. Poor parenting styles can impact toddler growth and development, including the risk of stunting. This is often related to mothers' and fathers' lack of understanding of proper parenting practices, particularly regarding providing appropriate food for children. Parents often provide food to children without considering the nutritional content of the food (Yanti, 2023). This study aligns with research by Zulfa et al. in 2024 conducted at the Palasari Community Health Center in Subang Regency. The results showed that the majority (25%) provided democratic parenting styles, while the majority (36%) did not experience stunting. The Chi-Square correlation test results obtained a p-value of 0.000 ($p < 0.05$), indicating that parental feeding patterns are related to stunting in toddlers. It can be concluded that good parenting can reduce stunting in toddlers, and appropriate measures are recommended to improve toddler health.

Researchers argue that good parenting results in toddlers who are less susceptible to stunting because good parenting is considered more effective in preventing stunting in toddlers for several key reasons (Norhasanah,2021). Parents with good parenting styles tend to be more responsive to their children's needs,

including nutritional needs. They listen to and respect their children's opinions, which can create a more supportive and harmonious environment. This good parenting style encourages independence and provides sound guidance, which can help children develop healthy eating habits, making them more likely to provide nutritious food and ensure access to necessary health services (Salma Zulfa et al., 2024). Parenting patterns for toddlers are crucial for their growth and development (Wahyuni et al., 2023).

CONCLUSION

Mother's parenting patterns are related to the incidence of stunting in Teluk Rumbia Village. This study is expected to provide practical guidance for parents in Teluk Rumbia Village in improving childcare patterns to prevent stunting.

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