

Analysis of parenting patterns for mothers who have stunting toddlers

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ABSTRACT

Stunting is a condition in which children have a height below the standard according to age. This is caused by chronic malnutrition during the first 1,000 days of life, from pregnancy to 23 months of age. This research uses a type of qualitative research with a phenomenological approach, which is an approach that examines an object of research naturally or as it is. The results showed that early initiation of breastfeeding and exclusive breastfeeding was not applied to all toddlers. Some stunted toddlers are also not given exclusive breastfeeding, and the experience of informants in feeding children shows that children's appetite is reduced so that portions and frequency of eating are not as recommended. All informants provide complete basic immunization to their children, but only a few routinely weigh toddlers to the Posyandu every month. Regarding parenting, hygiene, and environmental hygiene, only one informant washed his hands using soap and running water before feeding the child.

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INTRODUCTION

Nutritional problems in infants under five years old (toddlers) are still a relatively high health problem in Indonesia. One of them is the problem of stunting. Stunting is a condition in which a child is below the standard height according to the child's age. This stunting is one of the indicators of failure to thrive in toddlers due to chronic malnutrition in the first 1,000 days of life, namely from children still in the fetal form to 23 months old (Kusnandar, 2022).

Stunting is a linear growth disorder caused by malnutrition, nutritional intake, and chronic infectious diseases. This event occurs repeatedly indicated by the Z-Score value of height according to age (TB / U) less than -2 standard deviation (SD) based on WHO standards (WHO, 2017). Stunting is a health problem because it is associated with the risk of illness and death, and brain development that is not optimal. Stunting threatens the development of the nation's next generation which further reduces the productive capacity of a nation in the future (BAPPENAS & UNICEF, 2017).

The high prevalence of stunting is caused by various factors. One of them is poor parenting practices (TNP2K, 2017). In Indonesia, there are several problems related to the parenting style of

toddlers which are still the target of the RPJMN and the target of performance indicators for community nutrition development activities in 2020-2024, namely, Early Breastfeeding Initiation (IMD), exclusive breastfeeding, and basic immunization (Ministry of Health RI, 2020).

The parenting of children includes feeding, health care, and guidance carried out by parents to encourage cognitive stimulation in children (Hartono et al., 2017). For optimal child growth, parents need to pay attention to some of the basic needs of children to grow, namely, physical/foster needs which include: food needs, basic health care (immunization), breastfeeding of children, and the board needs such as hygiene in each and environmental sanitation (Mardalena & Suyani, 2016). According to Engle et al., (1999), parenting can be realized in several activities including breastfeeding and feeding children, food preparation and food storage practices, child health care, and hygiene practices in children.

RESEARCH METHOD

This research is a type of qualitative research that uses purposive sampling techniques in taking informants. Qualitative research is a research method that aims to produce a picture or meaning of the observed phenomenon without manipulation and hypothesis testing. Purposive sampling techniques are used to select informants for data sources with certain considerations on the part of the researcher. The subjects in this study consisted of the main informant and the supporting informant. The main informants consisted of 28 mothers who had stunting toddlers in the working area of the Sidodadi and Pulo Bandring Puskesmas Kota Range, Asahan Regency, while the supporting informants consisted of 4 people, namely cadres of Posyandu, TPG Puskesmas, Head of Puskesmas, and Coordinating Midwives in the working area of Puskesmas Sidodadi Asahan Regency.

This research has inclusion and exclusion criteria in the selection of informants. The inclusion criteria for the main informant are mothers or caregivers who have stunting toddlers aged 2-5 years in the working area of the Sidodadi Health Center, Asahan Regency, while the inclusion criteria for supporting informants are those who have a role and knowledge about stunting toddlers in the Sidodadi Health Center, Asahan Regency. The exclusion criteria are informants who resign during the study.

The data sources used in this study consisted of primary and secondary data. Primary data were obtained through in-depth interviews and direct observation with primary informants and supporting informants. Meanwhile, secondary data was obtained through a review of the Maternal and Child Health (MCH) book. By using these two types of data, it is hoped that the results of the study can provide a comprehensive and in-depth picture of the problem of stunting toddlers in the working area of the Sidodadi Health Center, Asahan Regency.

RESULTS AND DISCUSSIONS

Early Initiation of Breastfeeding (EIB)

Based on the results of research on the parenting pattern of mothers who have stunting toddlers based on early breastfeeding initiation (IMD) after realization with the invivo program, the following visualization was obtained:

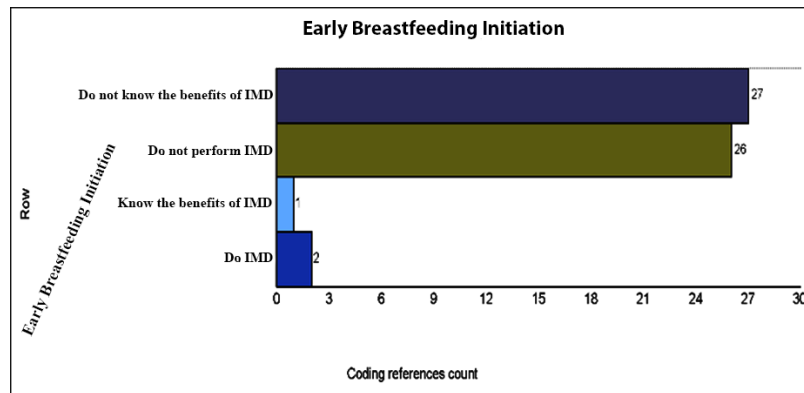


Chart 1. Overview of Early Initiation of Breastfeeding

The results of graph 1 above show that most stunted toddlers do not get IMD, which is as many 26 people. Most informants are known not to give IMD because of the factor of breast milk that has not come out on the first day of birth

Exclusive breastfeeding

Based on the results of the interview, it was found that 4 respondents were breastfed only when they were aged 0-6 months, 14 respondents who were given formula milk when they were 0-6 months old, and 10 respondents who were given formula milk + bananas, tea, water, rice porridge, and others. As a visualization of the results of the interview through the invivo program, the following graph can be seen:

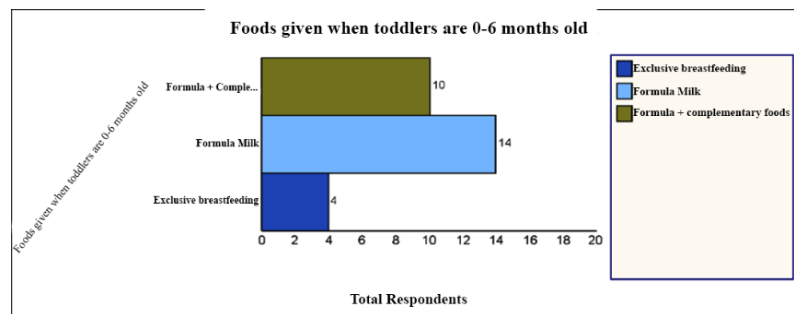


Chart 2. Food is given when toddlers are 0-6 months old

Based on the results of the interview, it is known that most stunted toddlers are given formula milk, which is as many as 14 respondents. This is based on the results of interviews with informants who said that giving formula milk was caused because breast milk did not come out.

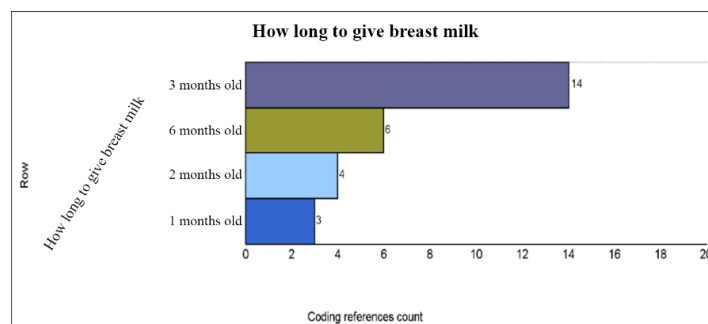


Chart 3. How long to give breast milk

The length of time the informant breastfed his child varies. Based on the results of interviews, it is known that only some informants provide breast milk until the child is 3 months old.

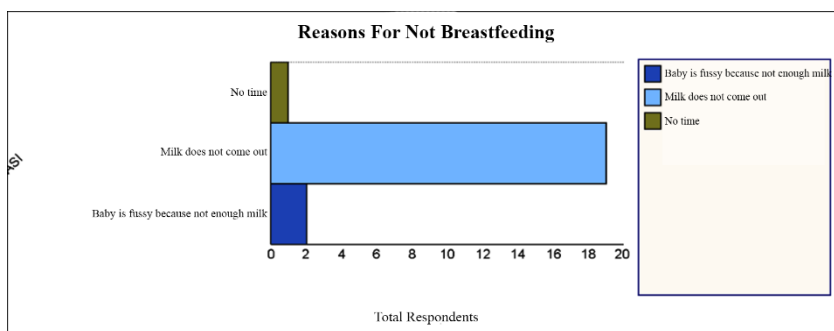


Chart 4. Reasons Not to Breastfeed

Feeding to toddlers

Feeding behavior in this study includes the age of starting to be fed, frequency of feeding, portion of food, variations in the food menu, and how to process and store food. From the observations, it was found that most informants gave food to toddlers since the age of 6 months as many as 14 respondents, who gave food since the age of 2 months as many as 13 respondents and who gave food since the age of 1 month as many as 1 respondents. Visually can be seen in the graph below:

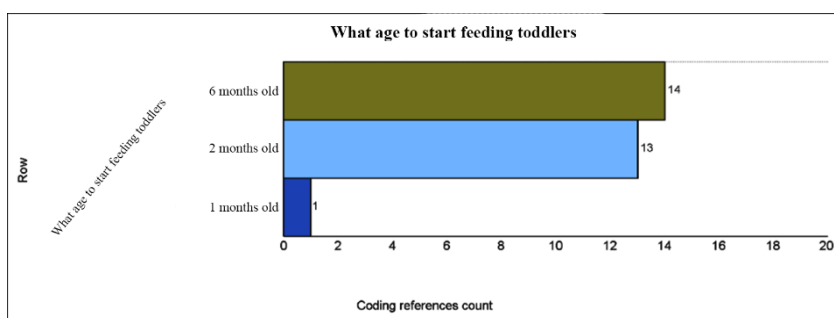


Chart 5. From what age to feed toddlers

From the results of interviews, it is known that some toddlers begin to be given food at the age of 6 months. Basic Immunization in Toddlers

Based on the results of interviews about how to provide basic immunization to toddlers, three informant answers were obtained, namely, as many as 15 respondents did not immunize their toddlers, 10 respondents gave complete immunization to their toddlers and 3 respondents gave immunizations, but not completely. Visually can be seen in the graph below:

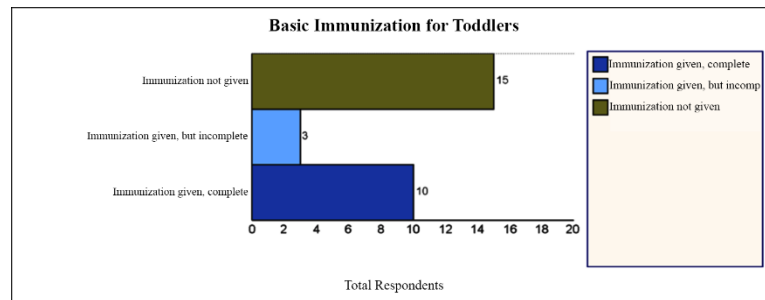


Chart 6. Provision of Basic Immunization to Toddlers

From the results of in-depth interviews, information was obtained that as many as 16 informants said that visiting the Posyandu was not important and not mandatory, 10 informants said it was important and regularly came to the Integrated Health Center, and 2 informants stated that it was important but did not come to the Integrated Health Center regularly. Visualization can be seen in the graph below:

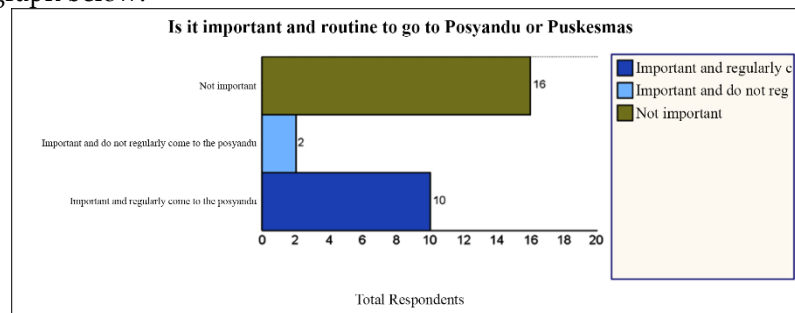


Chart 7. Is it Important and Regularly Visits to Puskesmas or Posyandu

From the results of in-depth interviews with 10 informants who said visiting the Posyandu was important and mandatory to know the child's development, the informant said that if you did not visit the Posyandu once, the informant felt that you missed information about the child's condition. Environmental hygiene and hygiene practices

Environmental hygiene and hygiene practices in this study include water sources used by informants, informant behavior in maintaining child hygiene, actions before feeding children, actions taken by informants when children finish defecating, garbage disposal, and defecation places or latrines. Based on the results of in-depth interviews with the main informant, it was found that some informants used water sources from wells, while other informants used PAM water.

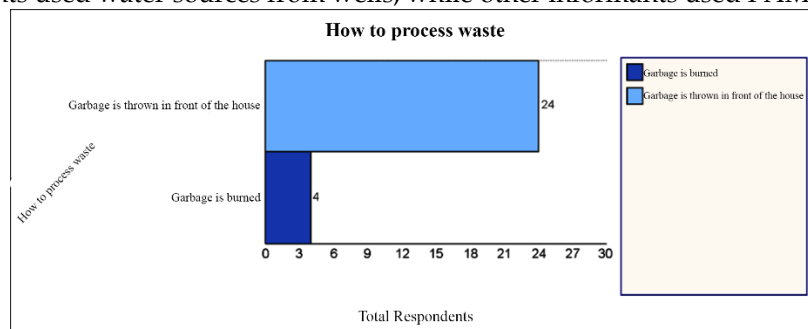


Chart 8. Water Source Used

Based on the results of information obtained from interviews with informants, it was said that 50% used well water and 50% of residents used PAM water.

Waste management is also included in maintaining the cleanliness of the environment. From the results of in-depth interviews with health cadres in Sei Renggas Village, it is known that waste management is carried out by burning, and garbage is disposed of in front of the house (garbage cans).

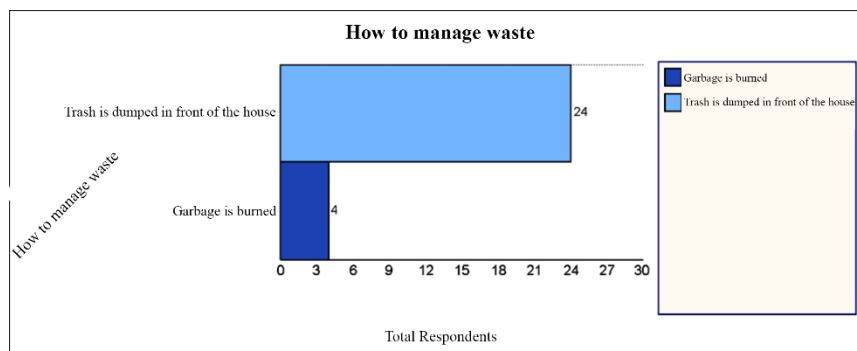


Chart 9. How to Manage Trash

The observations also show a picture of how mothers manage waste. Garbage is usually immediately disposed of and burned, it is also corroborated based on the results of interviews conducted with key informants. Some informants said garbage was dumped in front of the house (garbage cans) and some were burned directly.

DISCUSSIONS

Early Initiation of Breastfeeding

The results of this study showed that most informants in the study did not give IMD to their children. The reason mothers do not give IMD is due to several factors such as breast milk that has not come out on the first day of birth of the child, and informants who are rushed to the hospital because of complications during childbirth. This is in line with the results of research conducted by Lisnawaty et al., (2020) the results of the study found that there are mothers of toddlers who do not provide breast milk at the beginning of the baby's birth because breast milk only comes out after one week of delivery, so the baby must be given formula milk.

The interview results showed that there were 19 informants whose milk did not come out on the first day of birth, apparently after asking more deeply it was known that informants did not take care of their breasts during pregnancy and did not do breast massage after childbirth because they did not know and have no experience.

Exclusive breastfeeding

Apart from the results of BB / TB and BB / U measurements, the incidence of stunting in children can also be seen from the history of past nutritional status, such as exclusive breastfeeding of children. Breast milk contains more calcium for toddler growth to be more optimal, if toddlers do not get it then toddlers will experience stunting, if it continues it will affect the development and growth of toddlers. This is because breast milk contains nutrients that are very good for toddler immunity, if the milk given is lacking, the child will be easily exposed to infections, if toddlers are often infected, it will cause children to experience stunting (Saputri & Viridula, 2018).

Feeding to toddlers

The problem in feeding infants is the cessation of breastfeeding and early breastfeeding of children (Mulyani et al., 2020). The results of this study showed that some toddlers had been given food and formula milk before the child was 6 months old. Breastfeeding and formula milk before the age of 6 months can cause stunting in children. This is done by informants not following the

recommendations recommended by WHO which recommends giving MP-ASI at the age of even 6 months while continuing breastfeeding until the age of 24 months (Sjarif et al., 2015).

Basic Immunization in Toddlers

The results of this study showed that 15 children were not immunized at all and 13 children had been immunized but were still stunted. In this case, complete immunization may not necessarily guarantee that children avoid a disease. Several things can affect the benefits and effectiveness of immunization such as the quality of the vaccine given does not meet the standards or know less well. This shows that toddlers whose immunization is complete or incomplete have the same opportunity to experience stunting (Aridiyah et al., 2013).

Environmental Hygiene and Hygiene Practices

Environmental hygiene and hygiene practices in this study include water sources used by informants, informant behavior in maintaining child hygiene, actions before feeding children, actions taken by informants when children finish defecating, garbage disposal, and defecation places or latrines. Water is a basic necessity for every living thing. Apart from being a source of drinks, water is also a support for other activities. In daily activities, water is used for bathing, washing, and for other needs (Darma Susila I et al., 2020).

CONCLUSION

The implementation of early breastfeeding initiation is not universally practiced due to various factors such as delayed milk production, lack of knowledge and experience, and anxiety among informants. Exclusive breastfeeding is rarely provided to toddlers, leading to stunted growth, primarily due to insufficient milk production and lack of time for breastfeeding. Informants generally feed their children three times a day with limited variety in the menu, often consisting of vegetables or fish. Basic immunization is not consistently provided, with many informants failing to complete the immunization schedule. Hygiene practices among informants are also suboptimal, with only a few washing their hands with soap and water before feeding their children, and overall cleanliness of the home environment is often neglected. To develop future research for better results, there are some suggestions that can be applied in an easy-to-understand manner. First, conduct the study over a longer period of time to better understand the factors that contribute to stunting in children under five. Secondly, pay attention to environmental factors such as sanitation and house hygiene to determine their influence on toddler growth. Third, identify more specific risk factors related to diet and feeding patterns in children under five. Fourth, understand the role of culture and society in parenting and nutrition. Finally, build and evaluate intervention programs that are effective in preventing and overcoming stunting. By implementing these suggestions, future research is expected to provide better information and easy-to-understand solutions to address under-five nutrition in Indonesia.

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