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THE RELATIONSHIP BETWEEN PARENTING PATTERNS AND THE INCIDENCE OF STUNTING IN CHILDREN AGED 25-59 MONTHS

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ABSTRACT
This study examines the relationship between parenting patterns and stunting in children aged 25-59 months in Biak Numfor Regency, where stunting rates surpass the national average. Stunting, a reflection of chronic malnutrition, is particularly high in Papua, highlighting the need for targeted interventions. The research uses a mixed-methods approach, combining quantitative and qualitative data to capture a fuller picture. Designed as a Case Control Study, the research compares mothers of stunted toddlers (46 participants) with mothers of non-stunted toddlers (46 participants), collecting data from January to July 2024 through total sampling. The quantitative phase utilizes secondary data from the Bosnik Public Health Center, while the qualitative phase includes interviews with key health officials. Data analysis involves univariate, bivariate (Chi-Square), and multivariate (Multiple Logistic Regression) methods processed with SPSS 29. Findings show that poor parenting significantly increases the likelihood of stunting by 12.59 times (p=0.001). Additional factors influencing stunting include inadequate prenatal nutrition (AOR 15.43), infrequent prenatal check-ups (AOR 6.026), and a history of premature birth (AOR 5.56). The model predicts an 82.6% incidence rate of stunting based on these risk factors, underscoring the importance of improved maternal and child health practices in the region.

Keywords: infants; parenting patterns; stunting; toddlers

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INTRODUCTION

Stunting is a manifestation of malnutrition and represents a serious health problem, as it has long-term impacts. This is a critical issue and a global priority that must be addressed. Stunting reflects chronic undernutrition during the growth and development period, starting from early human life.(Sarman, 2021). The factors causing stunting in toddlers are divided into two categories: direct and indirect. Direct factors include insufficient nutritional intake for the child, while indirect factors involve poor caregiving practices for toddlers, which can affect food consumption and nutritional status of the child (Neherta & Deswita, 2023;Faizaturrahmi et al., 2023; Terok et al., 2022)

The Indonesian Nutrition Status Survey (SSGI) reported that the prevalence of stunting in children under five years old in Indonesia reached 21.6% in 2022. This figure decreased from 24.4% in 2021. Despite the decline, it still has not reached the stunting tolerance limit set by the WHO, which is 20%. Meanwhile, the prevalence of stunting in toddlers in Papua in 2022 reached 34.6%, the highest at the national level, an increase of 5.1 points from 29.5% in 2021. The Biak Numfor Regency contributed 27.3% of the stunting cases out of the 29 regencies in Papua Province.(Kemenkes, 2023;Meikawati et al., 2021; Olsa et al., 2017)

There are several strategies initiated by the Ministry of Health in efforts to reduce stunting, including the provision of iron supplements for adolescent girls, conducting pregnancy check-

ups and providing additional food for pregnant women, as well as giving supplementary food in the form of animal protein to children aged 6-24 months, such as eggs, fish, chicken, meat, and milk.. (Kementerian Kesehatan, 2022). The Biak Numfor Regency Government has also made efforts to reduce stunting by promoting the provision of nutritious supplementary food, vitamins, and establishing healthy kitchens to combat stunting (Muhsidin Antara Papua, 2023; Dinkes Papua, 2022)The program implemented by the Biak Numfor Regency Government has not been effective in reducing the incidence of stunting, as this program focuses only on families with stunted toddlers, thus it does not improve the community's knowledge of the indirect causes of stunting. The aim of this study is to analyze the relationship between parenting patterns and the incidence of stunting in children aged 25-59 months in Biak Numfor Regency.

METHOD

This study is a mixed-methods research, combining both qualitative and quantitative approaches to obtain more comprehensive, valid, reliable, and objective data. The research design used is a Case Control Study to examine the relationship between disease and causal factors by observing the case group and the control group, then tracing past exposures/causes of the disease. The participants in this study are mothers of toddlers with stunted children, totaling 46 individuals, and the control group consists of mothers of toddlers without stunted children, also totaling 46. The sample data was collected from January to July 2024, using a total sampling technique. The inclusion criteria for this study are mothers with stunted children aged 25-59 months, and the control group includes mothers with non-stunted children aged 25-59 months. Quantitative data collection used secondary data from Bosnik Public Health Center (Puskesmas), while the qualitative phase involved focused interviews with the Head of the Health Department of Biak Numfor Regency, the Nutrition Coordinator of Bosnik Puskesmas, the Head of Bosnik Puskesmas, and the Head of Yenusi Village, Biak Timur District. The data processing methods include coding, tabulating, and entering. Data analysis involves univariate analysis using frequency distribution, bivariate analysis using the Chi-Square test, and multivariate analysis using Multiple Logistic Regression Test, computerized with SPSS version 29. Qualitative data is analyzed using triangulation. This study was approved by the Research Ethics Committee of Yatsi Madani University on June 26, 2024 (No. 220/LPPM-UYM/VI/2024).

RESULT

Qualitative Data Results

From the focused interviews with the Head of Bosnik Public Health Center (Puskesmas) in Biak Timur District, the Head of Yenusi Village in Biak Timur District, the Nutrition Coordinator of Biak Numfor, and the Health Cadre Leader in Yenusi Village, Biak Timur District, the following results were obtained:

Head of Bosnik Public Health Center:

"There is a very close relationship between parental care and the incidence of stunting. Parental care is crucial in preventing stunting. The preventive measures already taken include stimulating health cadres; cadres are brought to the health center to learn correct measurement techniques. We conduct outreach programs, and pregnant women are monitored from conception until the child reaches the age of two to prevent stunting. Nutritional recovery through supplementary feeding (PMT) is provided when there is allocated budget, and nutrition education PMT is delivered at every integrated health post (Posyandu). Parenting factors, such as negligence since conception, insufficient nutritional intake during pregnancy, and some congenital diseases that cause malnutrition in mothers and children, lead to stunting, including low birth weight (LBW)."

Head of Yenusi Village, Biak Timur District:
"There is a strong connection between parenting and the incidence of stunting. We collaborate with nutrition cadres to monitor children as part of our stunting prevention efforts."

Nutrition Coordinator, Bosnik Public Health Center, Biak Timur District:
"Parental care has an impact on stunting, as it is very important for changing a child's nutritional status, particularly in terms of feeding habits, child hygiene, and types of food consumed."

Health Cadre Leader:
"Parental care affects the incidence of stunting. The prevention efforts provided by cadres to mothers in Yenusi Village include advising that 'children must be bathed regularly, fed a varied diet every day, and maintain regular sleeping and play habits.' Parenting is closely related to the incidence of stunting."

Finalization of Qualitative Data

It can be concluded that there is a strong relationship between parental care and the incidence of stunting in Biak Timur District, Biak Numfor Regency.

Results Of Quantitative Data

Table 1.
Frequency Distribution of Respondent Characteristics

Characteristic	f	%
Stunting		
Not Stunted	46	50
Stunted	46	50
Total (n)	92	100
Parenting Style		
Good	36	39,1
Not Good	56	60,9
Total (n)	96	100
Nutritional Intake During Pregnancy		
Good	51	55,4
Poor	41	44,6
Total (n)	92	100
Antenatal Care (check-ups)		
Routine	43	46,7
Not Routine	49	53,3
Total (n)	92	100
Hustory of Prematurity		
Not Premature	58	63
Premature	34	37
Total (n)	92	100

Table 1 shows that out of 92 respondents, 50% (46 respondents) belong to the stunting group, while 50% (46 respondents) are in the non-stunting group. Among the respondents, those with a good parenting style comprise 39.1% (36 respondents), and those with inappropriate parenting style account for 60.9% (56 respondents). Additionally, respondents who had good nutritional intake during pregnancy make up 55.4% (51 respondents), while pregnant women with poor nutritional intake account for 44.6% (41 respondents). Furthermore, 46.7% (43 respondents) of the mothers routinely checked their pregnancy, while 53.3% did not. Finally, respondents with a history of not being premature represent 63% (58 respondents), and those who were premature comprise 37% (34 respondents).

Table 2.
Test Of Data Suitability Hosmer and Lemeshow Test

Step	Chi-Square	df	Sig
1	2.901	8	0,940

Table 2 indicates that the data is suitable for the model used.

Table 3.
Bivariate Analysis of Stunting Incidence in Children Aged 24-49 Months

Variabel	COR	P-*Value*	95% CI	
			Lower	Upper
Parenting Style	7,389	0,001	2,814	19,401
Nutritional Intake During Pregnancy	5,966	0,001	2,403	14,813
History of ANC Check-ups	7,273	0,001	2,887	18,319
History of Prematurity	4,894	0,001	1,929	12,420

Table 3 shows that poor parenting practices influence the occurrence of stunting by 7.4 times compared to good parenting practices. The statistical test yielded a p-value of 0.001, indicating that inappropriate parenting significantly contributes to stunting.

Table 4.
Multivariate Analysis of Stunting Incidence in Children Aged 24-59 Months

Variabel	AOR	P-*Value*	95% CI	
			Lower	Upper
Parenting Style	12,588	0,001	3,147	50,352
Nutritional Intake During Pregnancy	15,431	0,001	3,669	64,903
History of ANC Check-ups	6,026	0,005	1,734	20,964
History of Prematurity	5,597	0,013	1,431	21,887

Table 4 shows that poor parenting practices influence the occurrence of stunting by 12.6 times compared to good parenting practices. The statistical test yielded a p-value of 0.001, indicating that inappropriate parenting significantly contributes to stunting. Additionally, all four independent variables—nutritional intake during pregnancy, routine ANC check-ups, and history of prematurity—also have an impact on the occurrence of stunting.

DISCUSSION

The research results indicate a significant relationship between parenting styles and the incidence of stunting. This is further supported by findings from centralized interviews with the Head of the Bosnik Health Center in the Biak Timur District, the Head of the Yenusi Village, the Nutrition Coordinator of the Bosnik Health Center, and Health Cadres, who stated that there is a close relationship between parenting practices and the increase in stunting incidence. Based on statistical data, it was found that poor or inappropriate parenting practices have the potential to cause stunting 12.56 times more compared to appropriate parenting practices, with a p-value of 0.001 after controlling for other variables. Stunting is a condition caused by chronic malnutrition, characterized by a child's height that does not align with their age. Research conducted in Biak Numfor Regency found a significant relationship between parenting patterns and the incidence of stunting in children aged 25-59 months. This finding aligns with previous studies showing that adequate parenting plays an essential role in preventing stunting, primarily through the provision of balanced nutrition and proper health care from pregnancy through the early childhood period (Unicef, 2023).

Good parenting involves meeting the basic needs of the child, such as exclusive breastfeeding, nutritious complementary foods, and maintaining a clean environment(Muliawati & Widodo, 2021). Research shows that suboptimal parenting correlates with an increased risk of stunting. In Biak Numfor, gaps remain in parental knowledge about nutrition, which affects children's

diets, particularly in low-income families (Kemenkes RI, 2021). This study's findings are consistent with research indicating that children from low-income families are at higher risk of stunting due to limited access to nutritious food and adequate health services (Rahayu et al., 2022). Parenting style refers to the behaviors practiced by caregivers (such as mothers, fathers, grandparents, or others) in providing food, health care, emotional support, and stimulation necessary for a child's growth and development. This includes aspects of love, affection, and parental responsibility (Sambriong, 2022). Poor parenting practices not only involve the mistakes made in the parenting styles adopted by parents but also include a lack of knowledge among mothers regarding health and nutrition before and during pregnancy, as well as after childbirth. (Imani, 2020)

Parental education also significantly impacts parenting quality. Parents with lower educational backgrounds tend to have limited understanding of nutrition's importance for child development, leading to insufficient nutritional intake for optimal growth. This study further reveals that habits like introducing solid foods before six months and lack of health monitoring during pregnancy also increase the risk of stunting(Putri et al., 2021). These results highlight the need for nutritional education for parents in Biak Numfor as part of stunting prevention efforts. Intervention programs, such as nutrition education through local health services or training for pregnant and breastfeeding mothers, should be strengthened. Additionally, government support in providing access to nutritious food and essential health services will help reduce stunting rates (Bappenas, 2022). A study conducted in Cipadung from January to March 2022 with a sample size of 82 found that parenting styles and feeding practices are associated with the incidence of stunting, with a p-value of 0.045 and a POR of 2.9. Good maternal parenting can prevent children from experiencing stunting, and appropriate feeding practices can also help avoid incidents of stunting.(Wibowo et al., 2023).

Research that was also conducted by (Riani & Margiana, 2022) With a sample size of 30 in Banyumas, the results indicated that there is a relationship between parenting styles and the incidence of stunting, with a p-value of 0.013. The research conducted in Kertosari by (Riani & Margiana, 2022) It was also found that there is a significant relationship between parenting styles and the incidence of stunting in toddlers, with a p-value of 0.030. This study is not in line with research conducted on toddlers aged 24-59 months at the Klakah Health Center, which concluded that there is no relationship between feeding practices and the incidence of stunting, with a p-value of 0.127. (Suryawan et al., 2022;Hermayani & Maran, 2023). Parenting styles refer to the interaction between parents and children, which includes caregiving practices and feeding practices. The better the parenting style provided, the better the nutritional status of the toddler; conversely, if parents provide poor parenting in terms of feeding practices for toddlers, the nutritional status of the child will also be compromised. (Setiawati et al., 2022)Arisjulyanto & Puspita, 2024). Parental styles encompass various aspects such as food provision, attention to health, and developmental stimulation. Therefore, it is essential for parents to provide appropriate attention and support in terms of nutrition, health, and stimulation to children to support optimal growth and development. (Sadariah et al., 2023). Preventing stunting starts from the early stages of pregnancy by paying attention to the nutritional intake of pregnant women and the history of prenatal check-ups. (Nurfatimah et al., 2021).

This study also found a significant relationship between the history of premature birth and the occurrence of stunting. Delayed growth in premature infants is influenced by linear retardation that occurs during pregnancy. In addition to the short duration of pregnancy, infants who experience growth faltering from an early age show an increased risk of growth

disturbances in subsequent age periods. Stunting caused by inadequate growth faltering reflects an inability to achieve optimal growth in the future (Fitraniar et al., 2022;Putri et al., 2022)The relationship between parenting patterns and the occurrence of stunting in children aged 24-59 months is significant, as evidenced by various studies. Parenting styles, particularly maternal involvement and knowledge of nutrition, play a crucial role in child development and nutritional outcomes. Maternal parenting significantly influences child development, with one study showing a strong correlation (p-value = 0.000) between maternal involvement and stunting outcomes(Anggraini & Rosyada, 2024). Poor parenting practices are associated with higher rates of stunting, with 57.5% of mothers exhibiting inadequate parenting styles in one study (Gusman & Farlikhatun, 2024).Exclusive breastfeeding and proper dietary patterns are essential; one study found a significant relationship (p-value = 0.000) between these factors and stunting (Ismayanti & Idealistiana, 2024). Maternal knowledge of nutrition is also correlated with stunting, highlighting the importance of education in effective parenting (Gusman & Farlikhatun, 2024).

Parenting patterns related to hygiene and sanitation have been found to significantly impact stunting rates, with one study reporting a p-value 0.000 for these factors (Permana et al., 2023). Although evidence strongly supports the relationship between parenting patterns and stunting, it is important to consider that stunting can also arise from broader socioeconomic factors, including access to healthcare and nutrition, which may not be directly related to parenting styles(Ismayanti & Idealistiana, 2024;Sari et al., 2023)

CONCLUSION

Based on the results of this study, it can be concluded that in the qualitative research through centralized interviews, parental care patterns play a very important role in the occurrence of stunting. This is reinforced by statistical results showing a significant relationship between parental care patterns and the occurrence of stunting in infants aged 24-59 months in the Biak Timur District of Biak Numfor Regency, with a p-value of 0.001 ($p < 0.005$). It is hoped that pregnant women will pay more attention to their nutritional intake during pregnancy and routinely have their pregnancies checked. Meanwhile, mothers with toddlers are encouraged to focus more on the nutritional content provided to their children, the proper processing of food, providing stimulation for development, and offering emotional support. These actions can serve as solutions to prevent the occurrence of stunting.

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