



## Maternal Knowledge Regarding Stunting in Toddlers: An Overview

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### ABSTRACT

**Introduction:** Stunting is a significant public health issue that affects the growth and development of children, particularly in their early years. One of the key factors contributing to stunting is the level of knowledge that mothers of toddlers have regarding proper nutrition and child care. Understanding the awareness and knowledge of mothers about stunting is crucial in developing effective interventions and educational programs to prevent its occurrence. This study aims to examine the level of maternal knowledge about stunting and its potential impact on the health and development of toddlers.

**Objective:** The objective of this study is to assess the level of knowledge among mothers of toddlers regarding stunting and its contributing factors.

**Methods:** This study employed a cross-sectional design to assess the level of knowledge among mothers of toddlers regarding stunting. The population of the study consisted of mothers with toddlers in Mulyajaya, Sumedang Regency. A total of 18 mothers were selected as the sample using a total sampling technique. Data collection took place between February 14 and May 14, 2024. The collected data were analyzed using frequency and percentage calculations, with statistical analysis performed using SPSS version 22. This approach allowed for a comprehensive understanding of the knowledge level regarding stunting among the participants.

**Results:** The results of this study show that in the group of mothers with toddlers, the number of respondents with an improved level of knowledge was observed.

**Conclusions:** The majority of mothers with toddlers in Mulyajaya have sufficient knowledge about stunting, with some demonstrating good knowledge. However, a small group still lacks adequate understanding. This highlights the need for targeted educational interventions to improve maternal knowledge and promote better child care practices.

**Keywords:** knowledge, stunting, toddlers

## Introduction

Stunting is a condition that can chronically hinder growth, occurring in children under five years of age, often referred to as toddlers, and is caused by insufficient nutritional intake, which impedes growth. The factors contributing to stunting are not solely influenced by biological factors but are also affected by social, economic, and environmental factors. Personal hygiene and the quality of water, which are not only basic needs but also crucial for health, play a significant role, especially for pregnant women and toddlers (Komalasari et al., 2020).

Stunted growth, also known as stunting, is a condition in which a child experiences growth failure due to long-term malnutrition, resulting in the child being shorter than their peers and experiencing delays in cognitive development. Stunted children are more vulnerable to infectious diseases, obesity, the risk of degenerative diseases, declines in motor and mental development, reduced cognitive function and productivity, and increased morbidity and mortality. Interrelated factors contribute to stunting (Rahmawati et al., 2020). Poor parenting practices can lead to nutritional problems in the community, which is one of the factors influencing stunting. Since children require attention and support from their parents during their rapid growth and development, the role of parents, particularly mothers, is crucial in ensuring the nutritional needs of the child (Masitah, 2022).

Based on the prevalence data of stunted toddlers collected by the WHO, in 2020, 22% or approximately 149.2 million toddlers worldwide experienced stunting (Ibrahim et al., 2021). In 2022, the Indonesian Toddler Nutritional Status Survey (SSGBI) indicated that the prevalence of stunting in Indonesia remained at 21.6% (Hakim, 2024). In West Java, based on SSGI data, the prevalence reached 20.2% (Sumarna et al., 2023). According to the 2023 Indonesian Health Survey (SKI) by the Health Policy Development Agency (BKPK) of the Ministry of Health of the Republic of Indonesia, the prevalence of stunting in Sumedang Regency was 14.4%, showing a decrease of 13.2 percentage points compared to 2022 (27.6%) (Wempi et al., 2023).

Stunting is a condition that must be addressed promptly, as it is a chronic issue that hinders growth and disrupts nutrient absorption. One of the causes of stunting is worm infections, which are prevalent in developing and low-income countries. This condition occurs in toddlers, who are particularly vulnerable to growth disturbances and nutritional problems, making them more susceptible to infectious diseases. For example, worm infestations continuously infect the body with parasites that cause damage, and one of the impacts of this is stunting (Nirmalasari, 2020).

Compared to mothers with little or no education, mothers with higher levels of education are more likely to absorb information more effectively. Factors contributing to stunting include family and household conditions, inadequate supplementary feeding, infections, politics and economics, health and healthcare services, education, maternal knowledge, culture and society, food and agricultural systems, parenting practices, and water, sanitation, and the environment. Malnutrition and stunting can occur when mothers do not understand how to care for their children or lack knowledge about fulfilling the nutritional needs for themselves and their children (Fitri, 2022).

Previous studies have shown that mothers with lower education levels and limited knowledge are at a higher risk of stunting compared to mothers with higher education levels. This is due to the fact that some respondents with lower education still lack an understanding of effective parenting practices to ensure their children receive adequate nutrition and utilize local food sources in their area to prevent stunting (Kusumawati et al., 2021).

Parents with higher education are more knowledgeable about child care and how to maintain a clean environment. Parents, especially mothers with higher education, are also able to care for their children better than parents with lower education. Therefore, the government is expected to improve access to education for those from families with low socio-economic status. Furthermore, a higher level of education also impacts how mothers manage their children's nutrition (Trinanda, 2023).

Low parental income and education have a greater impact on stunting in toddlers. Families with higher income are more likely to access education and healthcare, leading to healthier children. Every mother is expected to understand the importance of health due to their role in shaping a healthy and happy family. Family factors such as family income, parental education, maternal knowledge about nutrition, and the number of family members can be indirectly linked to the occurrence of stunting (Sari & Zelharsandy, 2022).

Interrelated factors contribute to stunting (Rahmawati et al., 2020). Poor parenting practices can lead to nutritional problems in the community, which is one of the factors influencing stunting. Since children require attention and support from their parents during their rapid growth and development, the role of parents, particularly mothers, is crucial in ensuring the nutritional needs of the child are met (Masitah, 2022).

Efforts included in this study, such as the level of maternal knowledge about stunting in toddlers, which increases each year, are crucial to prevent stunting. This is due to the fact that children who experience stunting are generally more likely to encounter issues in cognitive and motor development, which will affect their productivity levels as adults. Additionally, stunted children have been reported to have a higher risk of developing non-communicable diseases such as diabetes, obesity, and heart disease in adulthood (Punjastuti et al., 2023).

## **Objective**

The objective of this study is to assess the level of knowledge among mothers of toddlers regarding stunting and its contributing factors.

## **Methods**

### ***Research design***

The design of this study is descriptive with a cross-sectional approach.

### ***Population and sample***

The population in this study consists of 18 mothers with toddlers classified as stunted in Mulyajaya Village. The data obtained from the questionnaires were processed manually and presented in table format for narration. This study was conducted in May 2024.

### **Research instrument**

The questions in the questionnaire were in the form of a checklist. Once completed, the questionnaire was returned to the researcher. Each response was matched with the completed questionnaire.

### **Data collection**

The tool used is a questionnaire designed to measure the level of maternal knowledge about the occurrence of stunting in toddlers.

### **Data analysis**

This study employs descriptive statistical analysis to determine the frequency distribution and proportions. It uses the Guttman scale to measure variables in order to describe the level of maternal knowledge about stunting. This scale utilizes more definitive answer types, namely "True" and "False." The study examines how health education impacts the level of maternal knowledge about stunting in toddlers to evaluate the differences in knowledge and attitudes before and after the education, with the analysis conducted using a paired test.

### **Result**

Tabel 1. Respondents characteristic

<b>Characteristics</b>	<b>Frequency (f)</b>	<b>Percentage (%)</b>
<b>Age</b>		
<i>18-25 year</i>	5	27,8 %
<i>26-35 year</i>	11	61,1 %
<i>36-45 year</i>	2	11,1%
<b>Level of Education</b>		
<i>Elementary School</i>	-	
<i>Junior High School</i>	3	16,7 %
<i>Senior High School</i>	10	55,6 %
<i>Other education levels</i>	5	27,8 %
<b>Occupation</b>		
<i>Civil Servant</i>	-	-
<i>Self-employed</i>	6	33,3 %
<i>Housewife</i>	12	66,7 %
<b>Economic Status (IDR)</b>		
<i>High (<math>\geq 1.400.000</math>)</i>	5	27,8 %
<i>Low (<math>&lt; 1.400.000</math>)</i>	13	72,2 %
<b>Level of Knowledge</b>		
<i>Good</i>	6	33,3 %
<i>Sufficient</i>	10	55,6 %
<i>Insufficient</i>	2	11,1 %

This table shows the distribution of respondents based on age in the group of mothers with toddlers: 5 people (27.8%) are aged 18-25 years, 11 people (61.1%) are aged 26-35 years, and 2 people (11.1%) are aged 36-45 years. The distribution of respondents based on education level in the group of mothers with toddlers shows no respondents with elementary education, 3 people (16.7%) with junior high school education, 10 people (55.6%) with senior high school education, and 5 people (27.8%) with other education levels. The distribution of respondents based on occupation in the group of mothers with toddlers shows no respondents working as civil servants/employees, 6 people (33.3%) are self-employed, and 12 people (66.7%) are housewives. The distribution of respondents based on economic level shows 5 people (27.8%) in the high economic category and 13 people (72.2%) in the low economic category. The level of knowledge among respondents shows that in the group of mothers with toddlers, 6 people (33.3%) have good knowledge, 10 people (55.6%) have sufficient knowledge, and 2 people (11.1%) have poor knowledge, as shown in Table 1.

## Discussion

The results of the study on respondent characteristics based on age in the group of mothers with toddlers show that 5 respondents (27.8%) are aged 18-25 years, 11 respondents (61.1%) are aged 26-35 years, and 2 respondents (11.1%) are aged 36-45 years. The age of mothers with toddlers greatly influences their ability to prevent stunting. While adult women tend to have more experience and understanding, younger women often require more guidance and support. Across all age groups, it is crucial to receive family support, access information, and raise public awareness about stunting (Utami et al., 2024).

Early marriage and pregnancy may also occur, where mothers may not be fully physically prepared, putting them at risk of nutritional deficiencies during pregnancy that can affect the baby. Some mothers may still be continuing their education or transitioning into their roles as parents. The level of knowledge about stunting varies depending on how much information individuals have and how well they are educated. Mothers in this age group tend to be more vulnerable to emotional stress, including pressure from their new responsibilities as parents (Utami et al., 2024).

The distribution of respondents based on education level in the group of mothers with toddlers shows no respondents with elementary education, 3 respondents (16.7%) with junior high school education, 10 respondents (55.6%) with senior high school education, and 5 respondents (27.8%) with other education levels. Women with higher education typically have a better understanding of stunting and how to prevent it. They tend to be more proactive in seeking information about healthy diets, immunization, and health consultations. Mothers in this group are more likely to exclusively breastfeed their children, choose healthy foods for them, and consistently follow health guidelines. They are also more likely to avoid traditional practices that may be harmful to health. In some cases, work demands and modern lifestyles can make it difficult for mothers to dedicate enough time to directly care for their toddlers. As a result, they may need support from family members or caregivers (Salamung, 2021).

Mothers with lower education levels tend to know less about stunting, including its causes, impacts, and prevention methods. During the first 1,000 days of a child's life, mothers may rely more on traditions or inaccurate information regarding child-rearing and feeding practices. A lack of access to relevant information can lead to low awareness of the importance of nutrition. This can increase the likelihood of stunting and malnutrition in children. Low

literacy levels can prevent individuals from understanding the significance of a healthy diet, exclusive breastfeeding, and proper healthcare for toddlers (Firrahmawati, 2021).

Mothers with lower education levels tend to have less understanding compared to mothers with secondary education. At this level, mothers are more likely to understand the importance of adequate nutrition for toddlers, as they are more accessible to information about nutrition and child health through government programs, media, or healthcare services. However, economic issues or other priorities may hinder the implementation of a balanced diet for toddlers. Although they have a better understanding, mothers may still require additional support to apply the information they receive, especially if they do not have sufficient access to healthcare services or nutritious food (Fitriana et al., 2022).

The distribution of respondents based on occupation in the group of mothers with toddlers shows no respondents working as civil servants/employees, 6 respondents (33.3%) as entrepreneurs, and 12 respondents (66.7%) as housewives. A mother's employment status significantly affects the amount of time spent, the attention given, and the resources available to prevent stunting. Non-working mothers generally have better resources but often face economic challenges. Working mothers, on the other hand, have more time to focus on child-rearing but require support in terms of time and attention to meet their toddler's nutritional needs. To provide appropriate interventions, stunting prevention programs must consider the mother's employment conditions (Ravi et al., 2023).

The distribution of respondents based on economic status in the group of mothers with toddlers shows 5 respondents (27.8%) with a high economic status and 13 respondents (72.2%) with a low economic status. A mother's ability to prevent stunting is highly influenced by their economic status. At the lower economic level, the main issue is the lack of access to nutritious food and healthcare services. At the middle and high economic levels, however, although there are more resources, the mother's role in child-rearing can be influenced by other factors such as work commitments and time management. Therefore, for stunting prevention interventions to provide appropriate and sustainable solutions, they must take economic elements into account (Musnadi, 2022).

Providing nutritious food for toddlers, such as protein, vegetables, and fruits, is often a challenge for mothers from families with limited financial resources. Nutrient-poor staple foods often form the basis of a child's diet. Due to a lack of education or limited healthcare facilities in their environment, mothers often do not have sufficient access to information about stunting. During the first thousand days of a child's life, a lack of education can hinder their understanding of the importance of proper nutrition and care. Access to healthcare services such as immunization, growth monitoring, and toddler care is often influenced by poverty. In addition, mothers may need to work hard to support the family's economy, reducing the time spent caring for their toddlers (Lolowang et al., 2022).

Mothers who do not work have more time to focus on caring for their children, such as ensuring they receive proper nutrition, providing exclusive formula feeding, and adhering to their child's immunization schedule. Their level of knowledge about stunting varies depending on the health information they have access to. If healthcare providers or government programs do not provide sufficient education, they may rely solely on customs or information from their environment (Jelfita et al., 2021).

The mother's employment status greatly influences the amount of time spent, the attention given, and the resources available to prevent stunting. Mothers who do not work generally have better resources but often face economic constraints. On the other hand,

working mothers may have more time to focus on caregiving but require support in terms of time and attention to meet their toddler's nutritional needs. To provide effective interventions, stunting prevention programs must take the mother's employment conditions into account (Ravi et al., 2023).

The distribution of respondents based on knowledge level is as follows: in the group of mothers with toddlers, 6 respondents (33.3%) had good knowledge, 10 respondents (55.6%) had sufficient knowledge, and 2 respondents (11.1%) had poor knowledge. To ensure that stunting prevention efforts are effective, the level of knowledge among mothers of toddlers is crucial for caregiving, nutritional fulfillment, and stunting prevention. Mothers with low knowledge require basic, easy-to-understand instructions, while those with moderate and high knowledge can be supported through intensive counseling and easily accessible healthcare services. Intervention programs should be tailored to the mothers' level of knowledge (Rini, 2020).

Mothers with moderate knowledge understand the basics of stunting, including the importance of adequate nutrition for children. However, their knowledge may be limited to general information without a deep understanding of how to apply it in real-life situations. Mothers in this group typically try to implement a healthy diet for their children, such as providing balanced and nutritious meals. However, inconsistency or lack of in-depth understanding may affect their performance. Mothers may not be able to fully utilize parenting methods that support stunting prevention due to issues such as time constraints, cost, or social environment (Billa et al., 2024).

Mothers with high levels of knowledge typically have a good understanding of what stunting is, its causes, effects, and how to prevent it. They are aware that nutrition during the first 1,000 days of a child's life is crucial, including exclusive breastfeeding and the provision of nutritious complementary foods. Mothers in this group are more proactive in providing good nutrition to their children, monitoring their child's development, and frequently consulting with doctors. Additionally, healthcare professionals are more likely to provide them with guidance and up-to-date information. Mothers with busy lifestyles or work pressures still need support in planning the best times to care for their children, regardless of how knowledgeable they are (Devianto et al., 2022).

This research (N. S. Mulyani et al., 2022) "Overview of Mothers' Knowledge Level Regarding Stunting" states that mothers' knowledge about stunting is crucial for ensuring balanced nutrition in children. This is also related to the present study, which examines the level of mothers' knowledge regarding stunting in toddlers.

## **Conclusion**

Based on the research conducted on the "Knowledge of Mothers About Stunting in Toddlers in Mulyajaya Village, Wado District, Sumedang Regency, 2024" and the data processing carried out, it can be concluded that mothers' knowledge about exclusive breastfeeding for infants aged 0-6 months as a prevention for stunting in toddlers shows that the majority of respondents have good knowledge, with 6 individuals. Regarding the knowledge of mothers about complementary feeding in accordance with recommendations for stunting prevention in toddlers, it was found that the majority of respondents have good knowledge. Regarding the knowledge of mothers about monitoring growth and development for stunting prevention in toddlers in Mulyajaya Village, the majority of respondents have

good knowledge (6 individuals) and adequate knowledge (10 individuals). Mothers' knowledge is crucial for ensuring proper nutritional balance for children.

### **Conflict of interest**

The researchers stated that there is no conflict of interest related to the implementation and publication of the results of this research. The entire research process, from planning, data collection, analysis, to report preparation, was carried out independently without any influence or pressure from any third party. A commitment to research ethics is upheld throughout the research process, ensuring transparency, accuracy and honesty in reporting results. Respondents' participation was voluntary with informed consent, and their confidentiality and privacy were maintained in accordance with applicable research ethics standards. With this statement, researchers hope that the research results can be trusted and used as a valid reference for the development of science and health practices related to ethnomedicine and reproductive health.

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### **Authors' contribution**

Each author makes an equal contribution to all parts of the research. All authors have reviewed and approved the final draft critically and are responsible for the index and similarity of the manuscript.

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