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EXCLUSIVE BREAST FEEDING AS AN EFFORT TO OVERCOME STUNTING IN TODDLERS WITH THE FAMILY EMPOWERMENT STRATEGY APPROACH

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ABSTRACT

Background : Stunting is a major problem experienced by toddlers in the world and Indonesia. Efforts to prevent stunting are changing people's behavior through health promotion programs and community empowerment, all of which seek to intervene in positive behavior change, especially in mothers during pregnancy and breastfeeding. The purpose of this study was to determine the relationship between exclusive breastfeeding and stunting.

Method : It was correlational descriptive study using a cross sectional approach. Respondents in this study were mothers who had stunted toddlers in Kepuh Village, Papar District, Kediri Regency, 25 respondents. The sampling technique used is total sampling.

Result : The results of the study showed that 76% of toddlers who experienced stunting did not get exclusive breastfeeding. The results of the chi square test obtained a p value: 0.028, where the p value <0.05. Because the p value <0.05, there was a relationship between exclusive breastfeeding and the incidence of stunting in toddlers

Analysis : The effect of exclusive breastfeeding on stunting doesn't come from aspects of nutritional intake, but from efforts to prevent infection. Increasing efforts to prevent this infection will reduce the risk of toddlers getting sick and will increase the growth and development of toddlers so that they can reduce the risk of stunting

Conclusion : there was a relationship between exclusive breastfeeding and Stunting. Exclusive breastfeeding alone will not be able to reduce the incidence of stunting, but it must be supported by improving socioeconomic conditions, education levels, infectious disease, and empowering women.

Keywords : Exclusive Breastfeeding, Toddlers, Stunting

1. INTRODUCTION

The toddler period is a period of growth and development that occurs very rapidly. Counted from the first day of pregnancy, the birth of the baby until the age of 2 years or what is known as the "golden period" or "critical period". At this time toddlers are very sensitive to the environment so that more attention is needed, especially nutritional adequacy. If nutritional needs are not met at this time, then the growth and development of children will be hampered. It is known that the fastest growth and development of the brain also occurs at the age below the first five years of life. Thus, the quality of children is a reflection of healthy and optimal growth and development. One indicator of growth is the height or length of a toddler's body (Fadillah, 2021).

Childhood malnutrition is often associated with specific vitamin mineral deficiencies and is associated with specific micronutrients and macronutrients. In recent years, there have been many studies regarding the impact of inadequate intake of nutrients, starting from the increased risk of infectious diseases and death which can hinder growth and development in children (Apriluana & Fikawati, 2018).

Stunting is a major problem experienced by toddlers in the world and Indonesia is included in the fifth country with the highest number of toddlers experiencing stunting in the world. Stunting is a condition where a person's height is shorter than his age. Stunting is one of the targets of the Sustainable Development Goals (SDGs) in 2030 (Agustina, 2021).

The high number of stunting incidents is a concern of the government. Some of the causes of stunting itself are a lack of intake that is absorbed by the body starting from still in the womb until after birth, lack of access to health services, lack of access to clean water and sanitation (Azrimaidaliza et al., 2020).

Malnutrition affects a large number of children in developing countries.

Malnutrition results from a variety of factors, often related to poor food quality, insufficient food intake and infectious diseases (Rustiyani & Susilo, 2020)

Stunting also often results in retarded mental development, decreased school achievement, and reduced intellectual capacity in children. This will affect the economic productivity of a country. Children whose growth is stunted as a result of insufficient intake or repeated infections are at greater risk of experiencing illness and even death (FKM UI, 2019).

Efforts to prevent stunting are changing people's behavior through health promotion and community empowerment programs, all of which seek to intervene in positive behavior changes related to mother's knowledge about nutritional intake during pregnancy, childbirth and children before the age of 2 years (Hamzah & B, 2020).

The high prevalence of stunting is caused by various risk factors including a history of maternal habits during pregnancy, birth weight, infectious diseases, parental education, exclusive breastfeeding and early complementary breastfeeding. In addition, certain food restrictions are also included in it. This can be an obstacle in improving the pattern of feeding (parenting) and nutrition for family members with nutritious food (Awwalin & Munir, 2023).

The results of a preliminary study in Kepuh Village, Papar District, Kediri Regency found that 25 (15.79%) toddlers experienced stunting. From interviews with village midwives, it was found that parenting styles were not quite right in determining nutrition for their toddlers. The family said that they still provide other food besides breast milk for babies less than 6 months old. The results of interviews with families also obtained data that the selection of food menus was based on children's likes, not on the basis of the nutritional value contained in food. So that the nutritional content and micronutrients contained in food do not meet the daily needs of children during their growth and development

period, causing children to experience stunting.

Family-centered empowerment provides opportunities for family caregivers to acquire knowledge and skills so that they can manage family life optimally and, accordingly, enhance the lifestyles and quality of life of all family members (Deyhoul et al., 2020).

One factor in the incidence of stunting is not giving exclusive breastfeeding (Louis et al., 2022). Therefore, as an effort to find out and understand the relationship between exclusive breastfeeding given by mothers to toddlers who experience stunting, researchers are interested in conducting research on the link between exclusive breastfeeding and the incidence of stunting in toddlers.

2. METHODS

The research design carried out was a quantitative non-experimental research design. This type of research is descriptive correlational research using a cross sectional approach (Handayani et al., 2019).

The population in this study were mothers who had stunted toddlers in Kepuh Village, Papar District, Kediri Regency. The population in this study was 25 respondents. The sampling technique used was Total Sampling, so that the number of samples was the same as the existing population, namely 25 respondents.

The independent variable in this study is exclusive breastfeeding and the dependent variable in this study is the incidence of stunting in toddlers aged 12-60 months. Exclusive breastfeeding was measured using a feeding questionnaire.

Exclusive breastfeeding while the incidence of stunting was measured using anthropometric and microtoise observation sheets. The data analysis used was a statistical test using Chi square with a significance value of 0.05 ($\alpha = 5\%$). Researchers protect the rights of respondents by upholding research ethics including: informed consent, anonymity, confidentiality, beneficency and justice.

3. RESULTS

The results of the research conducted, obtained the following data:

Table 1. Characteristics of Respondents

Characteristics	Frequency	Percentage
Mother's Age		
≤ 20 Age	1	4%
21 - 30 Age	14	56%
31 - 40 Age	9	36%
>40 Age	1	4%
Mother's Education		
Elementary School		
Junior High School	7	28%
Senior High School	15	60%
College	3	12%
Mother's Job		
Housewife	22	88%
self-employed	2	8%
Employee	1	4%
Family Income		
< 1 Million	12	48%
1 - 2 Million	5	20%
>2 Million	8	32%
Total	25	100%

Source: Primary Data, June 2023

Based on table 1. It can be seen that most of the mothers or 56% are aged 21-30 years. In terms of education, most of the respondents or 60% had high school education or the equivalent. Most of the respondents or 88% were housewives (IRT). Family income obtained 48% of respondents have income < 1 million rupiah / month. The results of interviews with respondents showed that many of the respondent's families had erratic incomes each month.

Table 2. Characteristics of Toddlers

Characteristics	Frequency	Percentage
Child Age		
≤12 month	1	4%
13-24 month	7	28%
25-36 month	8	32%
37-48 month	6	24%
49-60 month	3	12%
Gender		
Male	18	72%
Female	7	28%

Characteristics	Frequency	Percentage
Child's height		
71-80	9	36%
81-90	9	36%
91-100	7	28%
Child's birth length		
<48	2	8%
≥ 48 cm	23	92%
Child Birth Weight		
<2500 gr	2	8%
≥2500 gr	23	92%
Total	25	100%

Source: Primary Data, June 2023

Based on table 2, it was found that the most age of toddlers was 32% aged 25-36 months, 72% were male, there were 8% of toddlers whose birth length was less than 48 cm and birth weight less than 2500 grams.

Table 3. Exclusive breastfeeding

Characteristics	Frequency	Percentage
Exclusive breastfeeding	6	24%
Non Exclusive breastfeeding	19	76%
Total	25	100%

Sumber: Data Primer, Juni 2023

Based on table 3, it was found that most toddlers did not get exclusive breastfeeding or 76%.

Table 4. Exclusive breastfeeding with stunting

Characteristics	Frequency	Percentage	Significance
Exclusive breastfeeding	6	24%	p: 0,028
non Exclusive breastfeeding	19	76%	
Total	25	100%	

Source: Statistical Test Results, June 2023

Based on table 4. It can be seen that 76% of toddlers who experience stunting do not get exclusive breastfeeding. There are among these toddlers who only get formula milk and some get breast milk adapted to formula milk. The results of the chi square test obtained a p value: 0.028, where the p value <0.05. Because the p value <0.05, there is a relationship between exclusive breastfeeding and the incidence of stunting in toddlers.

4. DISCUSSION

The results showed that most of the respondents were aged 21-30 years or 56%. Where in this age a person has reached maturity in thinking and deciding something. This is in accordance with research which says that if the age of less than 20 years is considered still not ready physically, mentally and psychologically in dealing with pregnancy, childbirth and breastfeeding a child by giving it exclusively breast milk, at the age of 35 years or more it is considered dangerous because of the reproductive organs and the mother's physical strength has been greatly reduced and decreased, besides that there can be congenital risks to the baby and can increase complications in pregnancy, childbirth and puerperium(Handayani et al., 2019). Age that is too young during pregnancy can cause physiological and psychological conditions that are not ready to become a mother, this can affect pregnancy and childcare(Husna & Farisni, 2022).

Data on exclusive breastfeeding for mothers who have stunted toddlers is still relatively low, namely 24%, where the majority of respondents (76%) do not provide exclusive breastfeeding for their babies. Many factors influence a mother's decision to fully breastfeed her baby for quite a long time. Adequate knowledge about breastfeeding a good baby can encourage mothers to fully breastfeed. Breastfeeding counseling is very important in the first few months to achieve the long-term target of breastfeeding children as desired(Hikmahrachim et al., 2020). In addition to collecting data using a questionnaire, the researchers also conducted interviews with respondents, where the results of the interviews obtained by most mothers felt that their breast milk could not meet the needs of their babies, so many mothers decided to give formula milk to their babies. The mother's decision to give formula milk gets support from the family. The family is the first and foremost social environment for growth and

developmentchild. Children will develop optimally if they get good stimulation from the family. The family has a social function, namely: making a living, providing education, providing protection and community. Utilizing various potential resources owned by families to overcome the problems they face is far more effective and potential than developing other potentials that they don't really have or don't have. Therefore the family empowerment model is considered appropriate(Oxy Handika, 2020).

The results of the research conducted obtained the results written in table 4. It can be seen that in toddlers who experience stunting, as many as 76% do not get exclusive breastfeeding. There are among these toddlers who only get formula milk and some get breast milk adapted to formula milk. The results of the chi square test obtained a p value: 0.028, where the p value <0.05. Because the p value <0.05, there is a relationship between exclusive breastfeeding and the incidence of stunting in toddlers. Some researchers suspect that the effect of exclusive breastfeeding on stunting does not come from aspects of nutritional intake, but from efforts to prevent infection (Hikmahrachim et al., 2020). Increasing efforts to prevent this infection will reduce the risk of toddlers getting sick and will increase the growth and development of toddlers so that they can reduce the risk of stunting.

Another related theory is a model from experts which shows that exclusive breastfeeding alone will not be able to reduce the incidence of stunting, but must be supported by improvements in socioeconomic conditions, education levels, infectious disease problems, and women's empowerment.(Indrawati, 2016). Many factors influence the incidence of stunting that appears in toddlers, so multifactor support is needed, including support from the family.

Nutrition improvement programs for infants and toddlers receive important attention from government through the

policy of the first 1000 days of life national movement. The 1000 HPK movement consists of specific nutrition interventions and sensitive nutrition interventions. Specific interventions are actions or activities that are planned specifically for the 1000 HPK group. These activities are generally carried out by the health sector, such as immunization, PMT for pregnant women and toddlers, monitoring the growth of toddlers at Posyandu, tablet supplements for the Planning Guide for the First 1000 Days of Life Iron-folate program for pregnant women, promotion of exclusive breastfeeding, MP-ASI and so on. Specific interventions are short term, the results can be recorded in a relatively short time(Nurlaela Sari et al., 2023). This program from the government must get support from the community so that it is able to support the success of the program, namely reducing the stunting rate in Indonesia.

5. CONCLUSION

There was a relationship between exclusive breastfeeding and the incidence of stunting in toddlers. However, there are several things that must be considered to reduce the incidence of stunting in toddlers. Exclusive breastfeeding alone will not be able to reduce the incidence of stunting, but it must be supported by improving socioeconomic conditions, education levels, infectious disease problems, and empowering women

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