

Parenting Patterns In The Incidence Of Stunting In Children Under Five In Indonesia

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Abstract.

The parenting provided by parents plays an important role in the growth and development of toddlers. Poor parenting can increase the incidence of stunting in toddlers. This research is qualitative with a literature study approach. Primary data sources were accessed from scientific journals, scientific books, videos, images and other sources that are compatible with this paper. The sources were sorted, analysed and conclusions were drawn. Parenting patterns are associated with the incidence of stunting in toddlers. These parenting patterns include exclusive breastfeeding, MP breastfeeding and immunisation completeness. It is recommended for parents to continue to provide exclusive breastfeeding until the baby is 6 months old. age of 6 months, provide complementary foods that contain balanced nutrition, and actively bring toddlers to the posy. balanced, and actively bring toddlers to the posyandu to get complete basic immunisations and monitor the nutritional status of toddlers so that and monitoring the nutritional status of toddlers so that it is expected that toddlers can grow and develop well.

Keywords: Parenting, Stunting and Children.

I. INTRODUCTION

Stunting is a condition characterised by a child's lack of height when compared to other children their age. Simply put, stunting is a term for growth disorders in children. The main causes of stunting are maternal malnutrition and inadequate nutritional intake during a child's growing years. Many don't realise that a child's short height can be a sign of a chronic nutritional problem. Keep in mind that short children are not necessarily stunted. Children with limited nutritional intake since childhood and for a long time are at risk of stunted growth. Toddlers need good nutrition to grow and develop optimally. Insufficient nutritional needs will cause health problems including stunting [1]. Stunting is one of the growth disorders caused by a lack of intake of nutrients and nutrients that take place over a long period of time [2].

The magnitude of the impact caused by the problem of stunting, so the parenting pattern given by parents is one of the important efforts to prevent stunting. Provided by parents is one of the important efforts for the growth and development of toddlers [3]. Parenting patterns is a behaviour in caring for or maintaining children which includes providing breast milk, providing complementary foods, teaching how to eating properly, providing foods that are of high nutritional value, providing immunisations for toddler immunity so that nutritional intake and child health can be maintained properly[4]. The quality of care provided by mothers plays an important role in the growth and development of children. Children's growth and development because the better the parenting, the lower the morbidity will be lower and the nutritional status of children will be better (5), Parenting patterns for toddlers, which are still the target of the RPJMN and the target of the performance indicators of community nutrition coaching activities in 2020-2022.

II. METHODS

This research is qualitative with a literature study approach. Primary data sources were accessed from scientific journals, scientific books, videos, images and other sources that are compatible with this paper. The sources were sorted, analysed and conclusions were drawn. The method of this study is a scoping

literature review using international and national publications through various databases in terms of research articles, report, and working papers using keywords hospital and digital. The type of research used in this study is descriptive research with a qualitative approach. The data taken, identified in the following order: (1) data collection (2) data sorting (3) data analysis (4) conclusion making. As for data analysis, there is a predetermined sequence in accordance with the empirical steps taken, namely as follows: (1) Examination of data (2) suspected data findings, (3) Data confirmation (4) Diagnosis, (5) Action.

III. RESULT AND DISCUSSION

Major Factors Causing Stunting

Nutritional problems are problems throughout the life cycle, starting from pregnancy, infants, toddlers, adolescents, up to the elderly. Nutrition problems can occur in all age groups, even nutritional problems in a particular age group will affect the nutritional status of the next period of the life cycle. In developing countries, undernutrition in pre-pregnant and pregnant women results in birth of children with IUGR and low birth weight. (LBW). IUGR conditions are almost half are related to the nutritional status of the mother, i.e. (BW) of the pre-pregnant mother that does not match the mother's height or short stature and weight gain during pregnancy (PBBH). Weight gain during pregnancy (PBBH) is less than it should be. than it should be. Mothers who are short at 2 years of age tend to be short in stature when they into adulthood. When pregnant, short mothers are more likely to give birth to LBW babies. Pregnant women who are short limit uterine blood flow and uterine blood flow and the growth of the uterus, placenta and foetus so that the baby will be born with low body weight[6]. Adequate fulfilment of nutrients, both macro and micronutrients macro and micronutrients is needed to avoid or minimise the risk of stunting. Good quality and quantity of complementary foods are an important component in the diet because contains macro and micronutrients that nutrients that play a role in linear growth[7]. Feeding foods that are high in protein, calcium, vitamin A, and zinc can boost children's heigh. Providing adequate nutritional intake affects the pattern of normal growth pattern so that it can be caught up [8]. Research in Ethiopia identified factors associated with high stunting in breastfed infants.

The results showed that infants of mothers who had low zinc concentrations in breast milk were more who were stunted. Therefore, it is necessary to increase the supply of nutrients by providing additional food/supplements and continue to breastfeeding infants. Toddlers who are no longer breastfeeding have a 2 times greater risk of of being stunted compared to toddlers who who are still breastfeeding [9]. In general, stunting is caused by poor nutrition or lack of nutritional intake. This is then followed by a series of other causes. Stunting can occur when the mother-to-be is anaemic and malnourished, increasing the risk of the mother-to-be giving birth to a chronically malnourished baby. This condition can be worsened if there is inadequate nutritional intake for the baby after birth. For example, a 6-month-old baby should not be given water or tea, and should only be exclusively breastfed. Apart from these factors, inadequate maternal nutrition during the breastfeeding period can also lead to stunted growth. Environmental Sanitation and Hygiene. Paying close attention to home hygiene is very important. This is because stunting can also occur in children if they live in a less clean environment. A very dirty bathroom, for example, can cause diarrhoea and worms in children. Both diseases can hamper the nutritional adequacy of your child and have been proven to play a role in the emergence of chronic malnutrition in children. Therefore, make sure that mums always take care of kitchen utensils and cutlery after use. The bathroom should be cleaned at least once a week. A clean home environment is the beginning of a healthy life.

Stunting countermeasures

The policy foundation of the food and nutrition programme nutrition programme in the long term is formulated in Law No.17 of 2007 on the National National Long-Term Development Plan (RPJPN) 2005-2025. The multi-sectoral approach in food and nutrition development includes production, processing, distribution, and food consumption, with adequate, balanced and safe nutrition. Long-term development is carried out in stages over a period of five years, formulated in the National Medium-Term Development Plan (RPJMN) document. (RPJMN), which is stipulated in a Presidential Regulation. which is stipulated in a Presidential Regulation. In RPJMN stage 2 for the period 2010-2014, there are two outcome indicators

related to nutrition, namely the prevalence of malnutrition (undernutrition and malnutrition) of <15 per cent and prevalence of stunting (short stature) of 32 per cent by the end of 2014. The target of the nutrition programme is more focused on pregnant women to children aged 2 years. The nutritional role of folic acid is very important in the development of your baby's brain and spinal cord.

Taking folic acid during pregnancy can reduce the risk of physical disorders. Folic acid also helps prevent neural tube defects, which is a congenital disease caused by the failure of the baby's organ development. Mums can get folic acid intake from egg yolks, poultry, corn, carrots, and green vegetables such as spinach, celery, broccoli, beans, and broad beans. Folic acid intake can also be obtained from fruits such as avocados, oranges, bananas, and tomatoes. Grains such as sunflower seeds and wholemeal products are also high in folic acid. In addition, mums are advised to increase their folic acid intake through supplements. This is to ensure that the amount of folic acid that enters the body remains at the right amount every day. We recommend that you start taking folic acid supplements at 400 micrograms (mcg) per day for one month before pregnancy until the first trimester of pregnancy. This can reduce the chances of the baby being exposed to the risk of other birth disorders, including stunting. Lack of nutrition in the first 1,000 days is one of the causes of stunting in children. Poor nutritional intake will hinder the growth and development of children, which can be directly seen from their height at certain ages.

IV. CONCLUSION

The problem of stunting is a nutrition problem faced by the world, especially poor and developing countries. Stunting is growth failure due to the accumulation of nutritional inadequacies that last for a long time starting from pregnancy to 24 months of age. Many factors that cause the high incidence of stunting in toddlers. Society has not realised stunting as a problem compared to other malnutrition problems. Interventions are carried out throughout the life cycle in both the health and non-health sectors that involving various layers of society such as government, private sector, civil society, UN through collective action to improve nutrition, both short-term (specific interventions) and long term (sensitive).

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