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EXCLUSIVE BREASTFEEDING RELATIONSHIP WITH THE INCIDENCE OF STUNTING IN TODDLERS IN THE REGION WORK OF PUSKESMAS LOHBENER

Eleni Kenanga Purbasary[1], kitri Hikmawati[2], Titin Hidayatin[3], Yanni[4]
Sekolah Tinggi Ilmu Kesehatan Indramayu, Indonesia
Email: eleni.kenanga@gmail.com

KEYWORDS
Exclusive Breastfeeding, Stunting

ABSTRACT

Stunting is a failure to thrive in children under two years old due to chronic malnutrition. Stunting occurs due to a lack of nutritional intake in children in the first 1000 days of life, namely since the child is still in the womb until the child is two years old. Exclusive breastfeeding is very influential in the process of development and growth in children because breast milk contains substances that support motor intelligence and development. The purpose of this study was to determine the relationship between exclusive breastfeeding and the incidence of stunting in toddlers in the Lohbener Health Center Work Area. This study uses a descriptive-analytic method with a cross-sectional approach with a retrospective approach. The population of this study was 1258 respondents, sampling using simple random sampling with a total sample of 93 respondents. The research instrument used a checklist sheet and was analyzed using the Chi-Square test. The results of this study showed that of the 93 respondents who had children under five years old >24-69 months who were given exclusive breastfeeding 36 (87.8%) were in the normal category, and those who were not exclusively breastfed had stunting 36 (69.2). %) respondents. The results of data analysis showed that P value = 0.000 (α = 0.0121). This study concludes that there is a relationship between exclusive breastfeeding and the incidence of stunting in toddlers in the Lohbener Health Center Work Area. Suggestions for further researchers by taking samples of the factors that influence the incidence of stunting.

INTRODUCTION

In 2018, globally around 149.2 million children under the age of 5 were stunted and more than half were from Asia (55%) (Widiartini, 2017). The prevalence of stunting in South Asia is 32.7%, Southeast Asia 25%, Central Asia 10.9%, West Asia 15.1%, and East Asia 4.9% (UNICEF, 2022). The prevalence of very short and short toddlers (stunting) in 2018 was 11.5% and 19.3% (Perempuan, 2018). This condition increased from the previous year, namely in 2016 very short toddlers by 8.57% and short by 19.18% while in 2017 very short toddlers by 9.8% and short toddlers by 19.18% (Wiji, 2013).

The prevalence of stunting in 2021 includes 9 districts/cities in the medium category, 14 districts/cities in the high category, and 4 districts/cities in the very high category, namely Cirebon City, Bandung Regency, Cianjur Regency and Garut Regency (Yosephin,

2019).

The prevalence of stunting cases in Indramayu Regency reaches 752 very short toddlers and 4431 short toddlers, the highest stunting prevalence in Indramayu is in Lohbener District, with 87 very short toddlers and 252 short toddlers.

Stunting is a condition where a person's height is shorter than the height of other people in general (who are the same age) (Saadah et al., 2021).

One of the causes is a lack of protein intake, stunting in children can be caused by problems during pregnancy (Gracia, 2020), breastfeeding, or afterward such as insufficient nutritional intake of MP-ASI and not exclusive breastfeeding (Imani, 2020).

One of the efforts to increase development and growth is exclusive breastfeeding (Annisa et al., 2019). The content of breast milk consists of colostrum, fat, carbohydrates, protein, vitamin A, iron, mineral calcium, and lysozyme, these contents have benefits for toddlers and mothers, one of which is to prevent more nutrition in toddlers (Lestari, 2019).

The results of a survey conducted by researchers at the time of sampling as many as 10 mothers who had children under the age of >24-60 months in the Working Area of the Lohbener Health Center, Indramayu Regency obtained the results of 8 toddlers given formula milk, 2 toddlers were given exclusive breastfeeding (Cynthia et al., 2019). Of the 8 toddlers given formula milk, 7 of them were stunted, 1 who was given formula milk was not stunted and 2 toddlers who were given exclusive breastfeeding were not stunted.

Based on this background, researchers are interested in researching "The Relationship of Exclusive Breastfeeding with the Incidence of Stunting in Toddlers in the Working Area of the Lohbener Health Center" (Setiadi, 2013).

METHOD RESEARCH

The research method used is descriptive-analytic with a cross-sectional approach with a retrospective approach (Nursalam, 2013). The population in this study was mothers who had children under the age of >24-60 months in the Lohbener Health Center Working Area as many as 1258 respondents. Sampling using simple random sampling with a sample of 93 respondents (Widaryanti, 2019).

The data collection instrument used by researchers is in the form of checklist sheets that are tailored to the needs of researchers and the data needed in research (Hidayat & Alimul, 2014). After the data is collected, it is then analyzed using univariate and bivariate analysis with the chi-square test. This research was conducted in the Lohbener Health Center Working Area from 11 to 24 November 2021.

RESULTS AND DISCUSSION

Results of Analysis of Maternal Characteristics

Table 1
Distribution of Education and Employment

Education	F	P (%)
SD	45	48,4
SMP	33	35,5
SMA	9	9,7
S1	6	6,6
Total	**93**	**100**
Work	**F**	**P (%)**
IRT	60	64,5
PNS	5	5,4
Swasta	2	2,2
Wiraswasta	26	28
Total	**93**	**100**

Based on table 1, shows that the distribution of the Education category is SD 45 (64.5%) respondents. Based on the job category, most of the respondents were housewives, Housewives (IRT), 60 (64.5%) respondents.

Results of Toddler Characteristics Analysis

Table 2
Gender Distribution of Toddlers

Gender of Toddler	F	P (%)
Man	43	46,2
Woman	50	53,8
Total	**93**	**100**

Based on Table 2, it is known that the majority of the sex in toddlers is women, 50 (53.8%) respondents.

Table 3
Usia dan Tinggi Badan Balita

Variable	n	Mean	Median	Std.Deviation	(Min-Max)	95% CI
Age	93	42.49 trillion	43 trillion	10,592 Trillion	≥24-58 Trillion	40.31-44.68 trillion
Variable	**n**	**Mean**	**Median**	**Std.Deviation**	**(Min-Max)**	**95% CI**
Height	93	93.565 cm	92 Cm	8,4850 Cm	75-108 Cm	91.817 - 95.312 cm

Based on Table 3, it is found that the average age of toddlers is 42.49 months with a standard deviation of 10.592. The age of the oldest toddler in toddlers is 58 months and the youngest age in toddlers is ≥24 months. The average age of toddlers ranged from 40.31 to 44.68 months with confidence levels (95% CI). The average height of toddlers is 93.565 cm

with a standard deviation of 8.4850. The highest height in toddlers is 108 cm and the lowest height is 75 cm. The average height in toddlers is between 91,817 and 95,312 cm with a confidence level (95% CI).

Analyzes Univariat

Table 4
Exclusive Breastfeeding and Stunting Events

Exclusive breastfeeding	**F**	**P (%)**
Exclusively breastfed	41	44,1
Not exclusively breastfed	52	55,9
Total	**93**	**100**
Stunting Events	**F**	**P (%)**
Normal	52	55,9
Stunting	41	44,1
Total	**93**	**100**

Based on table 4, shows that most toddlers are not given exclusive breastfeeding as many as 52 (55.9%) respondents. In the incidence of *stunting* in the normal category as many as 52 (55.9%) respondents.

Bivariate Analysis of the Relationship between Exclusive Breastfeeding and the Incidence of *Stunting in* Toddlers in the Working Area of the Lohbener Health Center.

Table 5
The Relationship between Exclusive Breastfeeding and the Incidence of *Stunting in* Toddlers in the Lohbener Health Center Work Area

Category	**Normal**	***Stunting***	**Total**	***P-value***
Exclusively breastfed	36 (87,8%)	5 (18,1%)	**41 (100%)**	
Not exclusively breastfed	16 (30,8%)	36 (69,2%)	**52 (100%)**	**0,001**
Total	**52 (55,9%)**	**41 (44,1%)**	**93 (100%)**	

Based on Table 5, it was found that toddlers who were given exclusive *breastfeeding* with the stunting incidence in the normal category obtained as many as 36 (87.8%) respondents, while toddlers who were not given exclusive breastfeeding in *the stunting* category obtained 36 (69.2%) respondents (Paramashanti et al., 2016).

The results of the study after the *Chi-Square* test got a p-value of 0.001 so that the *p-value* <0.01 then the decision Ha was accepted, meaning that there is a significant relationship in the results of this study, namely there is a relationship between exclusive breastfeeding and the incidence of stunting in toddlers aged >24-60 months in the Lohbener Health Center Work Area.

Overview of the Incidence of Exclusive Breastfeeding for Toddlers in the Working Area of the Lohbener Health Center.

Based on the results of research that has been conducted as many as 93 respondents on mothers who have children under the age of >24-60 months in the Lohbener Health Center Work Area, as many as 52 (55.9%) respondents were not given exclusive breastfeeding. Lack of knowledge due to low education and work of mothers so that mothers' knowledge about the importance of exclusive breastfeeding is less than optimal.

The results of this study were obtained based on maternal characteristics in education for mothers who have children under the age of >24-60, as many as 45 (48.4%) respondents with the elementary education category. This shows that mothers with the characteristics of elementary school education are related to the mother's understanding or knowledge of important information that needs to be done to improve the welfare and health of mothers and toddlers (Rahmawati et al., 2019).

This is in line with the theory put forward by (Asdi et al., 2018), saying that knowledge can be obtained from experience, both personal experience and experience from others. This experience is a way to gain truth. Knowledge can be obtained from various sources such as mass media and electronic media to realize an increase in exclusive breastfeeding to babies. Therefore, maternal characteristics from the level of education can affect exclusive breastfeeding for mothers with toddlers aged >24-60 months.

This is in line with research conducted by (Kurniawati, 2014) that respondents' knowledge is related to the failure of exclusive breastfeeding in the Pegandan Health Center Working Area with the result of *p-value* α = 0.010. This means that mothers with less knowledge are 2,480 times more likely to experience failure of exclusive breastfeeding compared to respondents who have good knowledge.

Factors that can influence mothers in providing exclusive breastfeeding are socio-cultural change factors such as mothers who work and do not have much time to provide exclusive breastfeeding, and imitating friends or neighbors who provide formula milk. Working mothers can still strive for their babies to be exclusively breastfed, so that mothers can still do activities outside the home and still have time to leave time for their babies (Sari & Farida, 2020).

Based on the results of research that has been conducted by researchers on the characteristics of mothers with the type of work respondents in mothers who have children under the age of >24-60 months, as many as 60 (64.5%) respondents with IRT jobs, as many as 5 (5.4%) respondents with jobs as civil servants, as many as 2 respondents (2.2%) with private jobs, and as many as 26 respondents (28%) with types of work as self-employed. This is based on the results obtained that the most types of distribution jobs are in the type of work respondents with IRT with 60 (64.5%) respondents.

According to Dewi, Soesetijo, &; Nengtyias (2020) 3 factors influence exclusive breastfeeding for housewives, namely lactation management, husband support, and family support.

Overview of the *Incidence of Stunting* in Toddlers in the Working Area of the Lohbener Health Center.

The results of the study in the Lohbener Health Center Working Area showed that mothers who had children under the age of >24-60 months were 52 (55.9%) in the normal category while as many as 41 (44.1%) respondents were in the *stunting* category. This proves that the highest distribution is mostly in the normal category (Pramulya et al., 2021).

Risk factors for stunting include the nutritional status of pregnant women on the growth and development of their fetuses, where nutritional problems must be considered since they are still in the womb. If there is a lack of nutritional status early in life, it will have an impact on later life such as having an impact on later life such as late fetal growth (RJT), low birth weight (BBLR), small, short, thin, low endurance, and risk of death (Zaif et al., 2017).

Stunting is caused by problems with nutritional intake consumed during the womb and toddlerhood. Lack of maternal knowledge about health and nutrition before pregnancy, as well as the postpartum period, limited health services such as antenatal services, and postnatal services, low access to nutritious food, and low access to sanitation and clean water are also causes of *stunting*. These very diverse multi-factors require the most decisive intervention, which is at 1000 HPK (first 1000 days of life). Factors causing stunting are also influenced by the mother's occupation, father's height, mother's height, income, number of household members, parenting, and exclusive breastfeeding, besides *stunting* is also caused by several other factors such as maternal education, maternal knowledge about nutrition, exclusive breastfeeding, age of breastfeeding, zinc and iron adequacy levels, history of infectious diseases and genetic factors (Yuwanti et al., 2021).

The Relationship between Exclusive Breastfeeding and the Incidence of *Stunting in* Toddlers in the Working Area of Lohbener Health Center

Based on the results of research that has been conducted most of the 93 maternal respondents have toddlers aged >24-60 months. It was found that 52 (55.9%) respondents were not given exclusive breastfeeding, while 41 (44.1%) respondents were given exclusive breastfeeding. Toddlers who were exclusively breastfed in the normal category were 36 (87.8%) respondents, while toddlers who were not exclusively breastfed in *the stunting* category were 36 (69.2%) respondents. Therefore, based on the data obtained, it shows that most data from the incidence of not being exclusively breastfed results in *stunting* in toddlers aged >24-60 months.

The calculation results using the *Chi Square Test*, obtained *a p-value of 0.001 (α <0.01), thus the hypothesis states that Ha is accepted, meaning that there is a significant relationship between exclusive breastfeeding and the incidence* of stunting *at the age of >24-60 months in the Lohbener Health Center Work Area.*

This research is in line with research conducted by (NIngrum, 2020), entitled the relationship between exclusive breastfeeding and the Incidence of stunting in Toddlers aged 25-59 Months, *saying that there is a relationship between exclusive breastfeeding and the incidence of stunting in toddlers aged 25-59 months at the Drajat Village Posyandu* (Annisa

et al., 2019), *Baureno Puskemas Working Area, Bojonegoro Regency, it can be seen that the significant value of CI 18,635 and p value* = 0.000 where p < 0.05.

This research is supported by the results of research that has also been conducted by Nurfadillah (2018), in her research, 49 respondents in the exclusive breastfeeding category given short, 6 toddlers (54.5%) were obtained and very short heights obtained as many as 5 toddlers (45.5%), while the exclusive breastfeeding category that was not given with short height was obtained 35 toddlers (92.1%) and very short height 3 toddlers (7.9%). With the results of his research, *a p-value* of 0.00 (0.009 < 0.05). So it was concluded in his research that there is a relationship between exclusive breastfeeding and *stunting* in toddlers aged >2-5 years.

CONCLUSION

The incidence of stunting in toddlers who were given exclusive breastfeeding in the Lohbener Health Center Work Area was known to include exclusive breastfeeding as many as 36 (87.8%) respondents in the normal category while 5 (12.2%) respondents were in the stunting category.

The incidence of stunting in toddlers who are not given exclusive breastfeeding in the Lohbener Health Center Working Area is known to include 16 (30.8%) respondents not being given exclusive breastfeeding in the normal category while 36 (69.2%) respondents are in the *stunting category*.

accepted, which means that there is a relationship between exclusive breastfeeding and the incidence of *stunting in* toddlers in the Lohbener Health Center Work Area with a p-value of *0.001 (p-value* <0.01).

Suggestion

For health services

The role of health services is to better educate mothers to breastfeed babies exclusively because, at the age of 0-6 months, babies need breast milk intake alone without any additional food. Height measurement and education to mothers about breastfeeding need to be done often so that mothers know about the importance of attention to toddler growth to reduce the incidence of *stunting*.

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