A STUDY ON THE CHARACTERISTICS OF PREGNANT WOMEN CONCERNING STUNTING AT THE MIDWIFERY CLINIC IN THE BAHKAPUL HEALTH CENTER WORKING AREA

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ABSTRACT

Stunting is a condition in which the height of an infant or toddler is shorter than that of other children of the same age. This condition is usually identified by the failure of growth in infants (0–11 months) and toddlers (12–59 months), which results from chronic malnutrition during the First 1,000 Days of Life. Stunting in children is a serious issue because it is associated with an increased risk of illness and death, impaired brain development, delays in motor skill development, and hindered mental growth. In North Sumatra, the stunting rate in 2021 was 25.8%, while in Pematangsiantar City, it was 15% which is below the national average of 24.4%. This study aims to describe the characteristics of pregnant mothers about stunting in the Batu Anam Health Center area, Simalungun Regency. The design of this research was descriptive with a cross-sectional design. The analysis uses univariate analysis to describe the characteristics of pregnant mothers. The population is pregnant mothers in the working area of Batu Anam Health Center from May 2024 to September 2024. The sample for this study was the whole population of 30 pregnant mothers. The results of the study showed that the majority of pregnant mothers who were aged 20-35 years (80%), the majority of pregnant mothers who had higher education (80%), the majority of pregnant mothers who were primigravida (50%), the majority of postpartum mothers who experienced tearing worked as housewives (60%), %), and the majority of pregnant mothers who have good knowledge about stunting (73.3%). The conclusion of the research above showed that most of the respondents of pregnant mothers who have good knowledge about stunting (73.3%).

Keywords : *pregnant mothers, stunting*

Introduction

Stunting is a nutritional problem caused by inadequate nutrition, leading to further nutritional issues. Ideally, adequate nutrition should begin from the time a child is in the womb until they reach the age of two years (the first 1,000 days of life). According to the Ministry of Health (Kemenkes), stunting is defined as a condition in which a toddler's z-score is less than -2.00 standard deviations (stunted) and less than -3.00 SD (severely stunted) (Kemenkes RI, 2022a). Stunting can be caused by both direct and indirect factors. The factors that can influence the occurrence of stunting include nutritional intake, exclusive breastfeeding, genetic factors, maternal education, maternal knowledge, infectious diseases, socioeconomic status, environment, and food availability.(Kemenkes RI, 2022a)

Stunting remains one of the major nutritional problems among toddlers in Indonesia. According to data from the World Health Organization (WHO) in 2020, 5.7% of toddlers globally were overweight, 6.7% were undernourished or severely malnourished, and 22.2% or 149.2 million children suffered from stunting (chronic malnutrition)(Kemenkes RI, 2022b). The stunting prevalence rate in Indonesia, based on the 2022 Indonesian Nutrition Status Survey (SSGI), was 21.6%, showing a decrease from the previous year's rate of 24.4%. Although the trend is decreasing, it is still considered high based on WHO criteria (>20%). The stunting prevalence in Pematangsiantar City according to SSGI (2022) was 14.3%.

Stunting has both short and long - term effects on a child's health. Short-term effects include impaired growth and development, and metabolic disturbances. Common characteristics of stunted children include short stature, delayed growth, learning concentration difficulties, and increased susceptibility to illness. If not addressed early, stunting can have long-term impacts such as reduced cognitive ability, greater vulnerability to diseases, and increased risk of metabolic disorders and conditions such as heart disease. Stunting can be prevented, starting as early as pregnancy. Pregnant women need to pay close attention to their nutritional intake during pregnancy. A mother's knowledge plays a crucial role in shaping her behavior regarding nutrition during and after pregnancy.(Kemenkes RI, 2022a)

A study conducted by Munthe (2022) found a significant relationship between the level of maternal knowledge and the incidence of stunting in children, with a p-value of 0.022, indicating that a low level of parental knowledge is associated with a higher incidence of stunting. The study also found a correlation between maternal knowledge and stunting prevention efforts.(Munthe, Atika, & Candra, 2023) Based on this background, the author is interested in conducting research titled: "The Characteristics Of Pregnant Women Concerning Stunting At The Midwifery Clinic In The Bahkapul Health Center Working Area.

Materials and Methods

This research method is descriptive and uses a cross-sectional design. The analysis used univariate analysis to describe the characteristics of pregnant mothers in the Batu Anam Health Center area, Simalungun Regency. The population of this study was population is pregnant mothers in the working area of Batu Anam Health Center from May to September 2024. The sample for this study was the whole population of 30 pregnant mothers, with as many as 30 respondents. The analysis uses univaraite to describe age, level of education, parity, employment status and knowledge about stunting of pregnant mothers at the Batu Anam Health Center in Simalungun Regency.

Findings and Discussion

This research is about the characteristics of pregnant mothers about knowledge stunting in the Batu Anam Health Center area, Simalungun Regency in 2024**.** This research was conduct in from May to September 2024. During this period, 30 respondents were obtained as a research sample. The results of the study obtained the following data :

Table 1. Characteristic of Respondents were by Age, Level Education, Parity Employment Status and Knowledge about Stunting Of Postpartum Mothers At The Batu Anam Health Center In Simalungun Regency.

No	Characteristic of Respondents	n	%
1	**Age**		
	- Risk Age (< 20 Years & > 35 Years Old)	6	20%
	- Not Risk Age (20-35 Years Old)	24	80%
	Total	**30**	**100%**
2	**Level of Education**		
	- Higher Education (SMA/PT)	24	80%
	- Low Education (SMP/SD)	6	20%
	Total	**30**	**100%**
3	**Parity**		
	- Primipara (1)	15	50%
	- Multipara (>1)	15	50%
	Total	**30**	**100%**
4	**Employment Status**		
	- Housewives	18	60%
	- Working	12	40%
	Total	**30**	**100%**
5	**Knowledge about stunting**		
	- Less Knowledge (<70)	21	70%
	- Good Knowledge (≥70)	7	30%
	Total	**30**	**100%**

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- Base on the table above showed that that most of the respondents were not at risk age (were 20 to 30 years old), as many as 24 respondents or (80%), and very few of the respondents were at risk age (less than 20 years & more than 35 years old), as many as 6 or (20%) respondents. The majority of respondents, 24 respondents or (80%) had higher school education and very few of the respondents, 6 respondents or 20 % had low education. Half of the

respondents, 15 respondents (50%) had primipara parity, and half of the respondents, 15 respondents or 50 % had Multipara parity. Most of the respondents of pregnant mothers worked as housewives as many as 18 respondents or (60%) and almost half of the respondents, 12 respondents or 40 % was working. Most of the respondents had good knowledge about stunting, namely as many as 21 respondents (70%) and and almost half of the respondents, 7 respondents or 30 % had less knowledge.

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Conclusion and Recommendations

The results showed that most of the respondents were within the non-risk reproductive age group (20 to 30 years old), accounting for 24 respondents (80%). Meanwhile, a very small portion of the respondents, 6 individuals (20%), were considered to be in the at-risk age group (under 20 years or over 35 years old). A study conducted by Hasrun (2024) found a significant relationship between maternal age and the incidence of stunting in toddlers, with a p-value of 0.015.(Hasrun, 2024) These findings suggest that maternal age can influence the occurrence of stunting in children. Mothers who are either too young or too old are more likely to have children affected by stunting (Kemenkes RI, 2022a). The ideal reproductive age for women to conceive is between 20 and 35 years (Purborini & Rumaropen, 2023). A similar study was conducted by Sani (2020), who found a significant association between maternal age at the time of pregnancy and stunting among children aged 24 to 59 months in the service area of the Citeras Public Health Center. The study reported that 49 respondents categorized as being of high-risk maternal age (< 20 years and > 35 years) had children who were classified as having short or severely short stature (Sani, Solehati, & Hendarwati, 2020).

The majority of the respondents (24 respondents or 80%) had a high school level education, while only a few (6 respondents or 20%) had a lower educational background. This is consistent with the findings of Hasrun (2024), who reported a significant relationship between the mother's education level and stunting in toddlers, with a p-value of 0.000. (Hasrun, 2024)Low maternal education can affect the mother’s ability to absorb information, which in turn influences her behavior in preparing nutritious food for her child (Kemenkes RI, 2022a).

Half of the respondents (15 respondents or 50%) were primiparous (first-time mothers), while the remaining half (15 respondents or 50%) were multiparous. These findings indicate that maternal parity may influence the incidence of stunting. Closely spaced pregnancies and births can increase the risk of stunting in children (Kemenkes RI, 2022a).

Most of the pregnant respondents were housewives (18 respondents or 60%), while nearly half (12 respondents or 40%) were employed. According to a study by Savita (2020), there is a significant relationship between maternal employment and stunting among children aged 6–59 months in South Bangka Regency, with a p-value of 0.000 (Savita & Amelia, 2020). Similarly, Rahmawati (2023) found a significant relationship between maternal occupation and stunting in the working area of Landono Health Center, also with a p-value of 0.000 (Rahmawati, Zakiah, & Mutmaina, 2023). Working mothers are expected to have better access to information and resources through their experiences in the workplace (Savita & Amelia, 2020).

- Most of the respondents had good knowledge about stunting, namely as many as 21 respondents (70%) and and almost half of the respondents, 7 respondents or 30 % had less knowledge. The results of this study are also consistent with the research conducted by Juniantari (2024), which states that there is a relationship between maternal knowledge and the

incidence of stunting in toddlers in the working area of Puskesmas Abang I. The assumption of the researcher, Juniantari, states that if a mother has good knowledge, then her behavior regarding stunting will also be good (Juniantari, Triana, Sukmandari, & Purwaningsih, 2024). Mothers who have sufficient knowledge about stunting can also be influenced by other external factors that can contribute to the occurrence of stunting in children (Juniantari, 2024). This study is also in line with the research conducted by Asnawi (2024), which states that maternal knowledge is statistically significantly related to the incidence of stunting in children under five years old (p=0.209) (Asnawi et al., 2024). Similar research by Hamdin (2023) also states that there is a relationship between maternal knowledge and the incidence of stunting in toddlers in the working area of Puskesmas Moyo Hilir, Sumbawa Regency, with a p-value of 0.006 (Hamdin, Hamid, & Nurhayati, 2023).

Stunting in children can be caused by several direct and indirect factors. These factors include: toddler nutritional intake, infections, maternal factors, genetic factors, exclusive breastfeeding, food availability, socioeconomics, education level, knowledge, maternal nutrition knowledge, and environmental factors. Mothers with insufficient knowledge about nutrition may find it difficult to prepare nutritious food for their children. Conversely, when a mother has good knowledge, it is expected that her behavior and actions will align with the knowledge she possesses, allowing her to prepare good nutrition for her child and thus prevent stunting (Kemenkes RI, 2022a).

Stunting can result in disturbances in a child's growth and development, leading to long-term effects on their overall development. Stunting can even be prevented by paying attention to nutritional content starting from pregnancy. The role of the mother is crucial in preventing stunting, as the mother is primarily responsible for preparing the nutritional intake for the family. Therefore, mothers need to be equipped with knowledge about nutrition and stunting (Kemenkes RI, 2022a).

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