



Research

# The Experience of a Mother Who Has Been Malnourished

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## A B S T R A K

**Background:** Malnutrition is a health issue that contributes to infant morbidity and mortality. In order for toddlers' growth and development to proceed normally, it is crucial that mothers surmount these obstacles.

**Aims:** The aim of this research is to find out how the experience of the mother in treating poor nutrition babies in the work area of Public Health Centre Air Dingin City Padang.

**Methods :** This study employs qualitative techniques and a phenomenological approach. In-depth interviews serve as the data collection method. The number of participants in this study was four mothers selected via purposive sampling based on the criterion of having successfully treated malnourished infants to adequate nutrition. The collected data consists of a verbatim transcription of the results of the interview, which is then analyzed using the collaizi technique.

**Results:** This study's findings include mothers' knowledge of how to treat malnourished infants, the food consumed by children, mothers' positive conduct during babysitting, emotional regulation during infant care, and support for mothers during infant care.

## INTRODUCTION

Childhood (0 to 5 years) is the optimal time for brain growth and development, as brain cells and body organs grow extremely rapidly during this time. (Anugrahadi, 2021). This period is also known as the critical period because children are susceptible to negative influences such as malnutrition and disease during this time. (Khasanah & Sulistyawati, 2018). Inadequate nutrition is a lack of energy and protein due to an imbalance between the intake of food and nutritional requirements. It is characterized by conditions of severe malnutrition and nutritional status that falls far below the standards (Aryani & Riyandry, 2019; Rachmawati & Puspongoro, 2021).

According to the World Bank, the global rate of malnutrition in 2020 will be 2%. By the year 2020, 1.1% of infants in Indonesia suffered from malnutrition. 1,2% of infants in Western Sumatra suffer from malnutrition. (Kemenkes RI, 2021). In 2020, according to the Health Service Profile of the City of Padang, there will be 65 cases of malnourished infants. In the city of Padang, Public Health Centre Air Dingin has the highest incidence of malnourished infants, with 11 cases. (DKK Padang, 2020).

The pattern of a mother's care for her offspring is closely associated with the growth and development of infants. (Mardhiah et al., 2020) Mothers, as primary caregivers and educators, play an essential role in the nutrition of young children, particularly those aged 1 to 5 years. As a role model, a mother's ability to recognize nutritional disorders in children is crucial for fostering healthy lifestyle practices in children. (Parkinson et al., 2017).

The care of malnourished infants becomes a source of tension for their mother. When infants are not cared for properly, many issues will arise, but some mothers have managed to provide their infants with an inadequate nutritional history. From the decrease in the number of cases of poor hygiene, researchers are interested in determining the significance and significance of the mother's experience in successfully treating the infant to improve the hygiene status. The results of this analysis can then serve as guidelines for efforts to improve infant nutrition and as references for mothers of malnourished infants.

## METHOD

This research uses qualitative methods with a phenomenological approach. The method of data collection used is in-depth interview. The sample in this study was a mother who had a baby recorded having experienced poor nutrition in 2020 and the condition of the baby when doing research in good nutrition status. The total number of participants in this study was 4 mothers taken by purposive sampling. The instrument in this research is the researcher himself who functions to set the focus of the research, select the informant as the source of data, perform data evaluation, evaluate the quality of the data, interpret the data and make conclusions on its findings. In the data collection, the researchers used the help tool of interview guidelines. The data collection strategy used is with in-depth interviews. (indepth interview). To help in research is with recording tools and field records. The data collected is a recording of the results of the interview transcribed verbally which is then analyzed with the collaizi technique.

## RESULT DAN DISCUSSION

There were a total of four mothers included in this study. Participants between 32 and 39 years of age. The level of education of the participants varies: one junior high school and three seniors in high school. Homework, marriage status is matrimony. On the basis of the analyzed data, we have identified five themes that explain the success of mothers in improving the nutritional status of babies who have experienced poor nutrition to good nutrition, namely 1) Mother's knowledge about how to improve babies' nutrition status, 2) Food consumed by babies during care, 3) positive mother behavior during babies care, and 4) mother-infant interactions that promote breastfeeding. 4) Emotional management during infant care 5) Assistance for mothers during infant care.

### 1. Topic 1: Knowledge of How to Improve Baby Nutrition Status

The mother's knowledge of how to better the nutritional status of her infant is divided into two subthemes:

#### a. *Knowledge of Enhancing the Health of Infants*

All participants were able to enhance the nutritional status of infants, as determined by an analysis of data derived from the interview.

*"Ya cara meningkatkan gizi ini dengan pemberian PMT P, pantau perkembangan anak terus melalui posyandu, kasih makan makanan yang bergizi" (P2-16)*

*"ASI Eksklusif ko berikan ke anak, berikan MP-ASI yang bergizi untuk anak dan pantau perkembangan anak tiap bulan ke posyandu (P3-76)*

*(Berikan ASI Eksklusif kepada anak, berikan MP-ASI yang bergizi untuk anak dan pantau perkembangan anak tiap bulan ke posyandu)*

"Yes, how to improve this nutrition by giving PMT P, continuously monitor the child's development through posyandu, and feed nutritious foods" (P2-16)

"This exclusive ASI provides the child with a nourishing MP-ASI and monitors the child's development on a monthly basis." (P3-76).

(Give the child only breast milk, provide the child with a nutritious MP-ASI, and monitor the child's development every month to posyandu)

#### **b. Information Sources on How to Enhance the Standing of Babysitters**

All participants receive information from health officials and the Internet on how to enhance the nutritional status of infants.

*"Kakak coba cari di internet cara meningkatkan gizi.."*(P2-15) *"Dari bidan posyandu, pas awal awal tu kan dikecek an.."* (P4-86)(*Dari bidan posyandu, ketika awal-awal itu dibilang.* ")

"Search on the Internet for ways to increase nutrition" (P2-15). "As of the beginning of the process, the information was provided". (P4 to 86). (In the early days, when it was said)"

By seeking information about a healthy lifestyle, diet, and balanced nutrient intake for infants, mothers with a high level of health and nutrition knowledge will be able to reduce the incidence of health problems in their children. In addition, a mother with a high level of knowledge can check her child's access to health services, such as posyandu and puskesmas, and consult on the development of the baby's growth, focusing on its nutritional requirements. (Yuhansyah, 2019). Even if a person has a low level of education, if he receives quality information from a variety of media sources, he will be able to increase his knowledge. With the presence of information sources, a mother's knowledge of her child's nutrition can be increased, allowing her to better understand the nutritional demands of infants. (Aryni & Agustina, 2018).

## **2. Topic 2: Foods Consumed by Infants During Medical Treatment**

The foods ingested by infants during treatment are categorized into four subthemes:

### **a. Dietary Staples for 6 to 12 Months**

As a result of the data analysis, three participants with infants aged 6 to 12 months were identified, along with the primary type of food, the quantity of food, and the frequency of consuming that corresponds to the age of the infants, such as bubur promina, SUN, rice team, and milna bubur. The amount of sustenance consumed increases with age. Three times per day, meals are consumed.

*"Kayak Promina, SUN itu yang akak agiah.... "* (P1-8)

*(Seperti Promina, SUN itu yang kakak kasih. )*

*"Kakak suapin dan biasanya nasi tim... terus milna. "* (P2-62)

*"Kakak kalo bikin nasi tim kasih campuran sayur sayuran seperti wortel, bayam, telur "* (P2-41)

*"Umua 8.....agak 5 sendok habis... kalau alah 9-10 bulan kalau makan tuhabis dek nyo 8-9 sendok makan tu dek ....."* (P3-26)

*(Umur 8 bulan kira kira 5 sendok makan habis... jika sudah 9-10 bulanhabis sama dia 8-9 sendok makan)*

*"3 kali sehari.."* (P1-157) *"Makan 3 kali*

*sehari.."* (P2-57)

"Like Promina, I gave the SUN" (P1-8)

(Like Promina, I gave the SUN)

"I feed it and usually the team rice... then milna." (P2-62)

"When I make rice, the team gives mixed vegetables such as carrots, spinach, eggs" (P2-41)

"At the age of 8.....about 5 spoons are used up... if it's 9-10 months, if you eat it, it's finished, bro, 8-9 tablespoons" (P3-26)

(8 months old, about 5 tablespoons is used up... if it's 9-10 months old, it's 8-9 tablespoons used up)

"3 times a day." (P1-157) "Eats 3 times a day."(P2-57)

#### b. Food for one year.

According to the findings of the data analysis, two participants had infants older than 12 months. Participants provided the variety of food, serving size, and frequency of meals based on the age of the child. The type of food provided is a family meal, the portion size is two grains of rice, and three meals per day are provided.

*"Mulai makan makanan samo jo awak, tapi nasinyo yo agak lunak...."* (P4-56)

*(Mulai makan makanan sama dengan kita, tetapi nasinya agak lembek) "Kalau nasi habis dek nyo 2 sendok nasi tu a, beko batambah tambah taruihbanyak makannyo"* (P4-31)

*(Nasi habis sama dia, 1 sendok nasi itu, bertambah terus makannya)"Makan 3 kali sehari..."* (P1-119)

"Has begun consuming the same food as us, but the rice is a little soggy" (P4-56)

"Rice flows out with him, but he continues to eat "Eat three times per day..." (P1-119)

#### c. Snack

The foods provided by the mother consist of nutritious nibbles and light foods. All participants included nutritious treats in their packages, such as royal bread, milna, promina, and PMT-P from puskesmas, fruit, and milk. While two participants provided refreshments such as high-sugar biscuits and bakso.

*"Kayak bali susu indomilk, milo."* (P1-133)

*(Seperti beli susu indomilk, milo. )*

*"Penggantinya roti milna. "* (P1-145)

*(Penggantinya biskuit milna)*

*"Biscuit PMT P tu yang dari posyandu sama biscuit promina....."* (P2-58)

*"Akak agiah buah pisang, pepaya. "* (P1-145)

*(Kakak kasih buah pisang, pepaya. )*

*"Rori roma, gabin tu aa acok nyo bali mah ..."* (P1-133)

*(Roti roma, gabin itu sering dia beli)*

*"Kok sore tu bali bakso bakar. Ha kalau malam tu nak bali bakso lai.."* (P1-1341)

*(Kalo sore beli bakso bakar, nanti malam beli bakso)*

How to purchase milk milk, milo

He frequently purchased the Milna Cookie with a banana, papaya Roman bread, and gabin.

Buy a bowl in the afternoon and a bakso in the evening.

#### d. Reaction to sustenance

From the analysis of the interview data, it was determined that the infants' responses to food rejection included not desiring to eat, difficulty eating, and mouth-closing movements.

*"Tu ado akak buek nasi tim, tapi ndak namuah nyo makan...."* (P1-4)(Kakak buat nasi tim, tetapi ga mau dia makan)

*"Masalahnya palingan ya An.R ini dia suka GTM dek, gerakan tutup mulutketika makan"* (P2-81)

*"Untuk masalah mungkin lebih ke susah makan se dek ....."* (P3-83)

*(Untuk masalah lebih ke susah makan aja)*

“I made Nasi Tim, but I don't want to eat it”

“For more difficult problems just eat”

In this investigation, MP-ASI self-processed and MP-ASI manufacturer-processed MP-ASI is alternately given throughout the day. MP-ASI self-processes local culinary ingredients, such as team rice, while MP-asi produces milna powder packaging. In addition to the type of food, it is essential to consider the quantity and frequency of meals. The correction is the number of food corresponding to the child's age, where 6-8 months are provided. 2-3 tablespoons, 9-11 months is given 12 - 34bowls of 250 ml or the equivalent of 7-10 bowls and progressively increases with age. And at 12 months, the quantity of supplementation is adjusted to the child's age, where the central portion of food for this age is approximately three-quarters to one bowl of 250 ml. 6-8 months is the correct dietary frequency, which is 2-3 times the primary food per day; 9-11 months is 3-4 times the primary food per day. (Kemenkes RI, 2020).

At 12 months or greater, the child may be fed the same foods as the rest of the family. (Helmiyati,2020 dalam Purnama & Sulami, 2022). At 12-23 months, the infant can be given the main meal in the form of a family meal with a serving size of three-quarters to one bowl (250 ml) and three to four times a day. In addition to the main dish, infants receive two or three smaller meals per day. Selling food is an endeavor to provide nutritional supplements in order to achieve a healthy nutritional status. The issue with feeding is the challenges that mothers face when feeding their infants. The most common forms of behavior include fasting at the time of eating, selecting or desiring specific foods, extended chewing or storing food in the mouth, vomiting food, losing appetite, and mouth closure movements. (Ardra, 2019).

### 3. Topic 3: The mother's behavior during infant care.

The positive behavior of mothers during infant care can be broken down into five subthemes:

#### a. *Mother's Feeding Strategy*

Participants have a strategy for feeding babysitters, which includes sucking infants and feeding according to babysitting preferences.

*“Ketika masih sakit tu kakak yang nyuapin terus sampai umur 1 tahun dek”*(P2-100)

*“Akak agiah makan yang di suko nyo, bia nyo makan”* (P1-18)(Kakak kasih makanan yang dia suka, biar dia makan)

I give him the food he likes, let him eat.

#### b. *Make hand cleaning a habit.*

All participants were accustomed to cleaning their hands prior to and following meals and after playing.

*“Ada dek, apa apa cuci tangan dulu, sebelum makan”* (P2-124) *“Lai, sebelum makan*

*cuci tangan, siap makan.....”* (P4-102)

*(Ada, sebelum makan cuci tangan, setelah makan. )*

*“Siap main cuci tangan dulu, gitu dek sampai kini tabiaso cuci tangan”* (P3-112)

*“Setelah main cuci tangan dulu, gitu sampai sekarang terbiasa cuci tangan”*

“Washing hands before eating, after eating”

“Once you wash your hands, you are used to washing your hands”

**c. Breastfeeding continues until the age of 2 years.**

From the analysis of the data from the interview results obtained participants continued breastfeeding until the age of 2 years.

*“Sampai umua 2 tahun dek. Pas umua 2 tahun waktu tu” (P3-60)(Sampai umur 2 tahun, pas umur 2 tahun ketika itu) “.....ASI sampai 2 tahun menyusu dek” (P4-49)*  
*(.....ASI Menyusu sampai umur 2 tahun)*

“Up to the age of 2 years, up to 2 years old at that time”

“Breastfeeding until 2 years of age”

**d. Supply of vitamins**

Participants administer supplements to infants in an effort to stimulate their appetites.

*“Kakak beliin vitamin untuk anak biar bertambah nafsu makannya” (P2-42) “Akak balian vitamin ko aaa..... ” (P3-71)*  
*(Kakak beliin vitamin. )*  
*“Ibuk cubo agiah vitamin penambah nafsu makan tu dulu a ..... ” (P4-16)*

“I bought vitamins”

“I give vitamins to boost appetite”

**e. Compliance with the public health center program**

Participants are compliant with public health center programs such as routine posyandu visits, immunization boosters, and PMT-P administration.

*“Kakak rutin ke posyandu dek ” (P2-14)*  
*“Ibuk rutin ka posyandu untuak tau ado ndak penambahan barek badannyogitu dek ” (P4-16)*  
*(Ibu rutin ke posyandu untuk tau ada tidak penambahan berat badannya) “Imunisasi ada dek, yang belum tu imunisasi campak karena kemaren lagidemam” (P2-78)*  
*“Jadi dari posyandu nyo akak diagiah lah PMT P..... ” (P3-49)*  
*(Jadi dari posyandunya dikasih PMT P)*

“Mother routinely posyandu to ascertain that she has not gained weight”

“Category: PMT P”

A effective strategy is required for dealing with infants who have difficulty eating through dietary efforts, namely planning food according to taste, preference, and dish variety, and psychological efforts by fostering an emotional bond between the child and mother. You must exhibit patience, composure, and perseverance. Create an inviting environment for children. Compliment your infant when he or she is eating well and enough. Use food that the child enjoys and that is appropriate for the child's condition to make eating simpler. (Judarwanto, 2010 dalam Istiqomah & Nuraini, 2018).

Hand cleansing is a crucial component of disease prevention. Handwashing has an effect on the health of infants. Beginning at a young age, hand-washing with soap and running water can become a healthy habit later in the day. (Ambarwati & Prihastuti, 2019). Even if the amount of breast milk does not satisfy the needs, breastfeeding continues until the age of 2 because breast milk still contains essential nutrients. In addition, it will strengthen the emotional bond between mother and child and increase the baby's immune system until it matures. (Permenkes R1, 2014).

Stierman et al. (2020) found that when a child can meet or adequately satisfy their nutritional needs through their daily diet, whether it be energy, vitamins, proteins, or minerals, supplements should no longer be necessary. However, because it is often challenging for mothers to provide a balanced diet for their children, they choose to give food supplements as a supplement or even as a replacement for foods or substances that are not obtained through daily diet.

Monitoring development is crucial for identifying early growth barriers (growth faltering). To comprehend this development, monthly weighing is essential. (Nurdin et al., 2019). The mother who actively brings her infant to posyandu receives information from health officials regarding the status of babysitters (Febriyanti1 et al., 2022). Symbolon (2020) discovered a correlation between the frequency with which mothers visited posyandu and the nutritional status of their infants. The more frequently you use Posyandu, the better the status of the infant will be. Pebrianti et al. (2022) discovered a significant correlation between the fundamental immunization status and the nutritional status of young children aged 1 to 5 years, as measured by the anthropometric index Weight/Height. According to research by Wulandari et al. (2020), the completeness of immunization has a significant relationship with the status of infant nutrition, such that the higher the immunization status, the higher the status, and the lower the immunization status, the lower the status. In 2009, in conjunction with efforts to improve public nutrition, the government established health efforts as a top priority in nutrition services, i.e., by reducing the prevalence of poor nutrition and malnutrition. (Hadiriesandi, M.,2019 dalam Wihelmus et al., 2019).

#### 4. Topic 4: Emotional regulation during infant care.

The regulation of emotions during infant care can be broken down into two subthemes:

##### a. *Positive coping style*

The analysis of interview data revealed that all participants had a positive coping style, i.e., they confronted and resolved problems.

*“Kita sebagai ibu ya harus mencoba dan berusaha agar anak kita tumbuh dengan sehat tanpa sakit gitu kan...” (P2-128)*

*“Yo baa awak sebagai ibu tu yo harus merawat anak awak dengan baik biandak sakik nyo, bia nutrisinyo tercukupi. (P3-117)*

“As mothers, we must make every effort to ensure that our children grow up robust and without illness”

##### b. *Nice experience*

Participants described their experiences with enhancing the nutritional status of toddlers, including feelings of relief, happiness, significance, and contentment.

*“Akak kini lega bana, akak bisa meningkatkan gizi anak akak” (P1-110)(Sekarang kakak lega, kakak bisa meningkatkan gizi anak kakak) “Sanang akak walaupun dulu yo susah payah awak kan ...” (P1-110) (Senang kakak, walaupun dulu bersusah payah kan)*

*“Alhamdulillah senang kakak, ketika tau berat badannya udah naik” (P2-128)*

“Now I'm relieved because I can enhance my child's nutrition”

Yunere (2018) and Mesuri, Rosalina (2019) define an adaptive coping mechanism as a pattern for holding back tension that threatens itself by solving the problems it encounters. Positive coping styles are coping styles that are able to support ego integrity, and they influence adaptive coping mechanisms. Positive coping styles include problem solving or facing and resolving problems (Nasir & Muhith, 2011). The formulation of healthy emotional regulation begins with the mother's positive experiences during her development. Life experiences

that are well-received and allow the individual to overcome a variety of obstacles will train them in self-defense and give them an advantage when teaching other family members (Ostlund et al., 2016).

## 5. Topic 5: Assistance for mothers caring for infants

Support for mothers while providing for infants is divided into three subthemes:

### a. Instrumental support

Participants receive assistance from their spouses, other children, and parents.

*"Kan kalo ekonomi dari suami"* (P2-141)

*"Suami yang nolongan buek nasi tim sebelum pai karajo dek"* (P3-126) (Suami yang abntu bikin nasi tim sebelum pergi kerja)

*"Llitak akak, suami yang mengasuh anak gitu dek"* (P3-128) (Capek kakak, suami yang mengasuh anak)

*"Abangnyo pulang karajo dibaliak an kue untuk adeknyo"* (P1-107) (Kakak laki lakinya kalo pulang kerja dibeliin kue untuk adiknya)

*"Nenek an.r juga bantu ngasuh kalo kakak lagi masak dek, bantu nidurin"* (P2-142)

"Husband who helps make Nasi Tim before going to work"

"When his brother comes home from work, he buys cakes for his sister"

### b. Informative support

Health professionals provided informative support to participants.

*"Bidan ngecek usahoan nyo tetap makan bergizi walaupun sasuoak duo suok"* (P1-42)

*(Bidan bilang usahakan tetap makan bergizi walaupun sesuap dua suap) "Perawat posyandu bilang kalo biasakan anak makan buah agar gizinyaseimbang"* (P2-144)

*"Bilang kalau terus kasih anak PMT P, Vitamin dan makanan anak itudengan menu bervariasi"* (P2-1)

*"Bidan posyandu nyaranan kalau rancak pantau barek badannyo taruih dek"* (P3-133)

*(Bidan posyandu memberi saran bagusnya pantau berat badannya terus)*

"The obstetrician advised continuing to consume nutritious food, even if it's only a mouthful or two"

"The posyandu midwife's advice to continue monitoring her weight was sound"

### c. Emotional Support

Participants received emotional support from their husbands.

*"Kalau suami akak menyemangati akak taruih dalam merawat anak"* (P3-127)

*(Suami kakak menyemangati kakak terus dalam merawat anak) "Selalu menyemangati dek"* (P4-118)

"My husband encourages my sister to continue providing child care"

Four dimensions of social support are identified by Smet (2008): emotional support, informational support, instrumental support, and appreciation support (Santoso, 2020). Social support is the physical and emotional comfort afforded by friends, neighbors, and family members. Social support consists of verbal or non-verbal information or advice, actual assistance, or actions that are provided by social intimacy or obtained due to their presence and have positive emotional or behavioral effects on the recipient (Batubara, 2018).

According to research conducted by Elizabeth Herwanti (2017), the function of the father or husband has a significant impact on the nutritional health of toddlers. Role in guiding and providing a sense of security, such as preventing the child's condition from worsening, participating in feeding the toddler, inquiring about the toddler's nutritional development, and making decisions if there are problems in improving toddler nutrition; for example, if the child refuses to eat, the father buys the child's favorite food and vitamins to stimulate the child's



appetite. Researchers Maria et al. (2019) received assistance from health workers in the form of health education through the provision of information on family eating patterns, information to parents of toddlers regarding the prevention of malnutrition at toddler age, and the provision of additional food.

Good social support can have a direct impact on health and well-being because it provides security, solace, and a sense of purpose in life. Social support can reduce various forms of stress, enhance coping mechanisms, and enhance quality of life (Hauken, M.A., 2020, cited in Santoso, 2020).

## CONCLUSION

On the basis of the preceding description, it can be deduced that the mother's experience in care for toddlers with malnutrition revolves around the following five themes:

1. Knowledge of how to enhance the baby's hygiene status possessed by the mother, Participants have a solid understanding of how to treat malnourished infants.
2. Food consumed throughout treatment the participants provide infants with age-appropriate, nutrient-rich foods.
3. Positive maternal conduct during infant care, Participants in the care of infants should have a feeding strategy that encourages the child to consume and familiarize him or her with washing. Hand, breastfeeding was maintained until the age of two, the infant was given supplements, and the participant followed the public health center program.
4. Control of Emotions Throughout Baby Treatment, During the treatment of infants, participants have a positive coping style, confront existing problems, and solve them. Participants reported that the experience of treating infants was a positive one because it improved the health of infants.
5. Assisting the mother in the care of infants, Support is essential to the success of mothers in improving the nutritional status of malnourished infants to that of adequate nutrition. The husband, other children, parents, and health care provide support.

## ANNOUNCEMENT

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