

Analysis of factors related to the incidence of stunting in toddlers based transcultural nursing in the technical implementation unit in the work area of public health center Kaluku Bodoa Makassar

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ABSTRACT

The term "stunting" is used to describe the nutritional condition of a child based on anthropometric standards, based on the PB/U or TB/U index. The aim of the research is to analyze the factors related to the incidence of stunting in toddlers based on transcultural nursing in children aged 24-59 months in the Kaluku Bodoa Makassar Public Health Center TECHNICAL IMPLEMENTATION UNIT working area. The research design used in this study used a quantitative methodology, with a "cross-sectional" approach. Purposive sampling was used to select a sample size of 103 respondents. Data analysis was carried out with research findings showing that the majority of toddlers, specifically 72.8%, were categorized as stunting, as determined through the use of the chi-square test at a significance level of $\alpha=0.05$, while 27.2% of toddlers were classified as normal from a total of 103 respondents. The research results show that there is a significant relationship between technological factors and the incidence of stunting ($p=0.007$), social factors and family support ($p=0.000$), cultural values and lifestyle factors ($p=0.000$), economic factors ($p=0.010$), educational factors ($p=0.032$), and the most influential factors identified were social factors and family support ($p=0.000$), with a 31 times higher risk of stunting. The P value is $0.000 < 0.005$, with a 95% confidence interval (14.828-6.7013).

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INTRODUCTION

Over a long period of time, inadequate nutritional consumption can cause chronic nutritional problems called stunting. This occurs when the food given does not meet the requirements necessary for good growth and development. The stunting process can begin during fetal development and is usually seen at the age of two years. In assessing children's nutritional status, stunting,

Anthropometric standards use the PB/U or TB/U index to determine measurement classification. If a measurement is below the threshold (Z-Score) <-2 SD to -3 SD, it is labeled "stunted". Measurements that are below <-3 SD are categorized as "very short" or "very stunted". Stunting is characterized by a reduction in body height due to prolonged malnutrition (Candra in Nur Puji Winasis, 2018).

In Indonesia, the problem of stunting is still a top priority in efforts to increase growth and development of the next golden generation in 2048. The causes of stunting are not only limited to health problems and government intervention; Family environment also plays an important role in overcoming this problem. The application of transcultural nursing as stated by Leininger (2002) is a field in cultural science that guides nurses in providing care to clients, taking into account the similarities and differences between cultures, regardless of their health status.

In the context of Medeleine Leininger's Sunrise Model Theory, there are seven key factors that contribute to the understanding of cultural concerns: Factors that contribute to a particular phenomenon can be categorized into various domains, such as technological factors, religious and philosophical factors, social factors and family support, cultural value and lifestyle factors, political and legal factors, economic factors, and educational factors. However, in the context of the specific case being discussed, the researcher chose to only examine these five factors, namely technological factors, social factors and family support, cultural values and lifestyle factors, economic factors. Educational factors.

The aim of this research is to analyze the factors related to the incidence of stunting in toddlers based on transcultural nursing. This research will specifically target children aged 24 - 59 months in the working area of the Kaluku Bodoa Makassar Public Health Center. The research design used was descriptive analytic with a cross-sectional approach. This approach allows the collection of data on both independent and dependent variables at a specific point in time, without any follow-up. By examining technological factors, social factors and family support, cultural values and lifestyle factors, economic factors, as well as educational factors based on transcultural nursing.

RESEARCH METHOD

In this research, the research design chosen in this research is descriptive analytic with a cross-sectional approach. The focus of this research is to observe independent and dependent variable data on one occasion, without any follow-up. To collect data, a questionnaire was used. The questionnaire consists of 41 statement items for all variables, including technological factors, social factors and family support, cultural values and lifestyle factors, economic factors, and educational factors for children aged 24-59 months. The research conducted at the technical implementation unit public health center Kaluku Bodoa Makassar was based on the theory of Transcultural Nursing. The research population was parents and toddlers aged 24-59 months, totaling 197 toddlers. The total sample of 132 toddlers was selected using Simple Random Sampling. To collect data, a questionnaire was used which included technological factors, social factors and family support, cultural values and lifestyle factors, economic factors and educational factors. In addition, a measurement table (nutritional status of toddlers based on TB/U) is used to assess the incidence of stunting.

RESULTS AND DISCUSSIONS

Table 1. Demographic distribution of respondents based on variables related to the occurrence of stunting in children under five years of age based on transcultural nursing in the technical implementation unit in the working area of Kaluku Bodoa Public Health Center Makassar in 2024

No	Demographic characteristics of respondents	Category	frequency	Percentage
1	Mothers' age	<20 years	2	1,9%

No	Demographic characteristics of respondents	Category	frequency	Percentage
		20-35 years	79	76,7%
		> 35 Years	22	21,4%
	Total		103	100%
2	Child's age	24 -35 months	44	42,7%
		36-47 months	52	50,5%
		48-59 months	7	6,8%
	Total		103	100%
3	Immunization status	Less than 6 times	76	73,8%
		complete 6 times	27	26,%
	Total		103	100%
4	Family form	Nuclear family	73	70,9%
		Big family	30	29,1%
	Total		103	100%
5	work	Farmer	8	7,8%
		Civil government	6	5,8%
		Self-employed	17	16,5%
		Private officer	8	7,8%
		Housewife/not working	64	62,1%
	Total		103	100%

Source: Primary Data, 2024

If we analyze the data presented in table 1, it can be seen that respondents can be categorized based on their mother's age. The majority of respondents, namely 76.7%, were in the age range of 22 to 35 years. Apart from that, there were 21.4% of respondents who had toddlers and were over 35 years old, while only 1.9% of respondents were in the young category, namely under 20 years of age. If we shift our focus to the age of children or toddlers, it can be seen that the largest group consists of toddlers aged 24 to 35 months, namely 42.7% of the total. In addition, there were 52 toddlers aged 36 to 47 months which constituted 52% of respondents, and 7 toddlers aged 48 to 59 months which represented 6.8% of the total respondents.

In terms of immunization status, 26% of respondents had completed the recommended immunization schedule 6 times. However, the majority, namely 73.8%, received less than 6 immunizations. This is due to the concerns of parents who are worried that their children will experience a fever after being immunized.

If we look closely at the family structure, it can be seen that the majority of respondents, namely 70.9%, have a nuclear family consisting of father, mother and children. In contrast, 29.1% of respondents were members of an extended family, which included grandparents, siblings, father, mother and children.

Respondents' jobs also varied. The largest group, namely 62.1%, does household work. Apart from that, there are 16.5% who are Self-employed, 7.8% work as private employees, 7.8% work as farmers or planters, and 5.8% work as Civil government.

Results

Table 2. Relationship between technological factors based on Transcultural Nursing and the nutritional status of toddlers aged 24 -59 months in the technical implementation unit in the working area of Kaluku Bodoa Public Health Center Makassar in 2024

Technologic al factor	Nutritional status of toddlers				Total	
	Stunting		Normal		Amount	
	F	%	F	%	F	%
Good	12	16%	11	39,3%	23	22,3%
Enough	17	22,7%	9	32,1%	26	25,2%
Less	46	61,3%	8	28,6%	54	52,4%
Total	75	100%	28	100	103	100%

Test chi square $p = 0.007$

Based on the data presented in table 2, respondents who mastered and effectively utilized

technological factors showed normal nutritional status for 12 toddlers (16%) and normal nutritional status for 11 toddlers (39.3%). Meanwhile, respondents who owned and utilized technological factors indicated that 17 toddlers experienced stunting (22.7%) and 9 toddlers (32.1%) experienced normal growth. Finally, among respondents who lacked technological factors, there were 46 toddlers (61.3%) experiencing stunting and 8 toddlers (28.6%) were normal. The chi square statistical test produces a p-value of 0.007 ($\alpha \leq 0.05$), so H1 is accepted which shows that there is a significant relationship between transcultural nursing-based technology factors and the prevalence of stunting.

Table 3. The relationship between social factors and family support based on transcultural nursing with the nutritional status of toddlers in children aged 24-59 months in in the technical implementation unit in the working area of Kaluku Bodoa Public Health Center Makassar in 2024.

Social factors and family support	Nutritional status of toddlers				Total	
	Stunting		Normal		Amount	
	F	%	F	%	F	%
Good	3	4%	27	96,4%	30	29,1%
Enough	33	44,7%	0	0%	33	32,%
Less	39	52%	1	3,6%	40	38,8%
Total	75	100%	28	100	103	100%

Test chi square $p = 0.000$

Source: Primary Data, 2024

Based on table 3, it shows that respondents who received good social and family support with toddler nutritional status (Stunting) were 3 (4%) and (normal) were 27 (96.4%) while respondents who received adequate social and family support with the nutritional status of toddlers (Stunting) was 33 (44.7%) and (normal) did not receive support or 0 and for those who received less social and family support the nutritional status of toddlers (Stunting) was 39 (52.3%) and (normal) as much as 1 (3.6%). The chi-square statistical test gave significant results ($p = 0.000$, $\alpha \leq 0.05$), indicating a strong relationship between social and family support factors, as defined by transcultural nursing, and the prevalence of stunting in toddlers with normal nutritional status. Therefore, the alternative hypothesis (H1) is supported which confirms the existence of a relationship between social and family support factors and the occurrence of stunting.

Table 4. The relationship between cultural values and lifestyle factors based on transcultural nursing, nutritional status of toddlers in children aged 24 -59 months in in the technical implementation unit in the working area of Kaluku Bodoa Public Health Center Makassar in 2024.

Cultural values and lifestyle factors	Nutritional status of toddlers				Total	
	Stunting		Normal		Amount	
	F	%	F	%	F	%
Positive	20	26,7%	25	89,3%	45	43,7%
Negative	55	73,3%	3	10,7%	58	56,3%
Total	75	100%	28	100	103	100%

Test chi square $p = 0.000$

Source: Primary Data, 2024

Based on table 4, it is clear that among respondents who adhere to positive cultural values and lifestyles, there are 20 people (26.7%) and (normal) 25 (89.3%) have toddlers with stunting nutritional status. In contrast, there were 55 (73.3%) respondents who adhered to negative cultural values and lifestyles, and 3 (10.7%) (normal) respondents. Statistical analysis using the chi square test produces a p value of 0.00 ($\alpha \leq 0.05$), thus confirming the acceptance of the alternative

hypothesis (H1). These findings indicate a substantial correlation between cultural values and lifestyle factors based on transcultural nursing, and the occurrence of stunting.

Table 5. The relationship between economic factors based on transcultural nursing and the nutritional status of toddlers aged 24 -59 months in in the technical implementation unit in the working area of Kaluku Bodoa Public Health Center Makassar in 2024

Economic factors	Nutritional status of toddlers				Total	
	Stunting		Normal		Amount	
	F	%	F	%	F	%
Height	15	20%	14	50%	29	28,2%
Currently	14	18,7%	4	14,3%	18	17,5%
Low	46	61,3%	10	35,7%	56	54,4%
Total	75	100%	28	100	103	100%

Test chi square $p = 0.010$

Source: Primary Data, 2024

Based on table 5, respondents who are in a high economy with a nutritional status of toddlers (Stunting) are 15 (20%), and (normal) are 14 (50%) and for respondents who are in a medium economy with a nutritional status of toddlers (Stunting) of 14 (18.7%) and (normal) as many as 4 (14.3%) while for respondents who are in low economic conditions who have nutritional status under five (Stunting) as many as 46 (61.3%) and (normal) as many as 10 (35.7%). Statistical analysis After carrying out the chi-square test, a p value of 0.010 ($\alpha \leq 0.05$) was obtained, which confirmed the acceptance of the alternative hypothesis (H1). This shows that there is a significant correlation between economic factors, as defined by transcultural nursing, and the prevalence of stunting.

Table 6. The relationship between educational factors based on transcultural nursing and the nutritional status of toddlers aged 24-59 months in in the technical implementation unit in the working area of Kaluku Bodoa Public Health Center Makassar in 2024.

Factor education	Nutritional status of toddlers				Total	
	Stunting		Normal		Amount	
	F	%	F	%	F	%
Not completed in primary school	0	0%	1	3,6%	1	1%
Finished elementary school	2	2,7%	0	0%	2	1,9%
Finished junior high school	23	30,7%	4	14,3%	27	26,2%
Finished senior high school	47	62,7%	18	64,3%	65	63,1%
Finished un university	3	4%	5	17,9%	8	7,8%
Total	75	100%	28	100	103	100%

Test chi square $p = 0.032$

Source: Primary Data, 2024

Based on the data presented in table 6, it can be seen that respondents who did not complete elementary school did not have cases of nutritional status problems in toddlers (Stunting). Meanwhile, there was 1 respondent (1%) with normal nutritional status. Of respondents who completed elementary school, 2.7% had toddlers who experienced nutritional status problems (stunting), while there were no toddlers who had normal nutritional status. Continuing with junior high school graduate respondents, 30.7% had children under five years old with nutritional status problems (Stunting), and 14.3% had normal nutritional status. Furthermore, among respondents with high school education, 62.7% had children under five years old with nutritional status

problems (Stunting), and 64.3% had normal nutritional status. Finally, respondents who graduated from academies/universities. Among children under five, 4% experienced nutritional status problems, especially stunting, while 17.9% still maintained normal nutritional status. Application of the chi-square statistical test produces a p value of 0.032 ($\alpha \leq 0.05$), which confirms the acceptance of H1 and shows a significant relationship between economic factors in transcultural nursing and the occurrence of stunting.

Table 7. Bivariate analysis selection results

No	Variable	P value	Information
1	Technology	0,007	Join the multivariate
2	Social and family support	0,000	Join the multivariate
3	Cultural values and lifestyle	0,000	Join the multivariate
4	Economy	0,010	Join the multivariate
5	Education	0,032	Join the multivariate

Source: Primary Data, 2024

The information presented in table 7 confirms that the P value of all variables is less than 0.25. As a result, all variables were eligible for inclusion in the multivariate analysis. To carry out logistic regression analysis, the Backward LR method is used. This involves including all independent variables in the model initially, and then removing them one by one based on certain statistical significance criteria.

Table 8. The variable most related to the nutritional status of children aged 24-59 months in the technical implementation unit in the working area of Kaluku Bodoa Public Health Center Makassar in 2024

No	variable	Grade B	Arp	95%CI	P
1	Social and family support	5,753	315,213	14,828-6,7013	0,000
2	Cultural values and lifestyle	2,729	15,321	1,452-161,708	0,023
3	Education	-2,555	0,78	0,012-0,510	0,008
	Permanent	-6,475	0,002		

Source: Primary Data, 2024

The data obtained in table 8, the use of a multivariate approach with the Backward LR method shows that social factors and family support are the most influential factors among the variables studied, where the results show that there was an increase of 31 times, as evidenced by a P Value of 0.000, Value 0.005 with a confidence interval (95%CI = 14.828-6.7013).

Discussion

Technology-based Factor Relationships Transcultural Nursing with the nutritional status of children aged 24-59 months in the technical implementation unit in the working area of Kaluku Bodoa Public Health Center Makassar in 2024

Research findings reveal that respondents who have and utilize technology factors effectively show different levels of nutritional status in their toddlers. Among those who had adequate technological factors, 16% experienced stunted growth, while 39.3% experienced normal growth. In contrast, participants with less technological factors had higher levels of stunting, where 61.3% experienced this condition, compared to only 28.6% who had normal growth. Based on the chi square statistical test, it is known that there is a substantial correlation between aspects of transcultural nursing technology and the prevalence of stunting. This conclusion is supported by a p-value of 0.007 which is below the predetermined significance level, namely $\alpha \leq 0.05$. (H1) shows a clear relationship between technological factors and stunting prevalence.

Respondents who use technology less show the highest number and experience stunting. According to the author's observations during the distribution of questionnaires and giving a few

verbal questions, it turned out that the respondents had *Smartphone* Android/internet-based e-based devices are mostly used for playing games for their children and some respondents still don't understand several applications in obtaining health services and are still manual and there is a laziness in using electronics such as blenders to make juice, and for those who are economically disadvantaged they usually leave food or side dishes raw materials such as fish and vegetables to neighbors who have refrigerators/freezers.

In the latest research conducted by (Al Jihad et al., 2022), it was revealed that the implementation of the Prevent Stunting program is very important for early detection and prevention of stunting. To ensure wide accessibility, this program can be accessed via family members' cellphones. Realizing that many people may not be familiar with the term "stunting", it is important to provide health education about stunting prevention through various media channels, including direct media and internet programs. By utilizing online platforms that can be accessed via people's mobile phones, people can easily access health information related to stunting prevention.

Researchers believe that technology, whether in the form of information, infrastructure or health services, can be used effectively. It is important for mothers to have adequate access to these resources to ensure the well-being of their children and prevent stunting. By providing mothers with the necessary health information and services, they will be empowered to make informed decisions and demonstrate positive maternal behavior. In addition, it is important to address the issue of food storage, as many families do not have refrigerators, and mothers often go to work without preparing food at home. Therefore, it is very important to encourage the use of appropriate technology to prevent and overcome stunting.

The relationship between social factors and family support based on transcultural nursing with the nutritional status of toddlers in children aged 24-59 in the technical implementation unit in the working area of Kaluku Bodoa Public Health Center Makassar in 2024

Research findings show that respondents who have strong social and family support show a prevalence of stunting in toddlers of only 3 cases (4%), while the majority, namely 27 cases (96.4%), have normal nutritional status. On the other hand, participants who received sufficient social and family support had a higher percentage of stunting incidents, namely 33 cases (44.7%), and none of them had normal nutritional status. In contrast, respondents who had limited social and family support had the highest percentage of stunting, namely 39 cases (52.3%), and only 1 case (3.6%) had normal nutritional status. The alternative hypothesis (H1) was confirmed through statistical analysis using the chi-square test, resulting in a p value of 0.000 ($\alpha \leq 0.05$), as defined by transcultural nursing, and the occurrence of stunting.

Respondents who received the least support from social networks and families were the group that had the highest incidence of stunting, namely 52% or 39 of the total number of stunted toddlers. Researchers noted during distribution of questionnaires and interviews that some respondents lived with their in-laws or mothers, while others lived alone with their husbands. This living arrangement often results in limited communication and support from extended family members. As a result, respondents often relied on community health workers for assistance in monitoring their children's health and understanding expected growth targets for their age. Even though they received explanations from local health center officers and participated in integrated health service activities where the meaning of red line and red line had been explained in the "KMS book", researchers observed that respondents often nodded without really understanding the information. Emotional support, cognitive/information support, and material/facility support are very important in meeting children's nutritional and health care needs.

The occurrence of stunting in children can be influenced by family support and socio-cultural factors, according to researchers. Cultural and societal practices related to nutrition as well as the presentation, preparation and type of food consumed can contribute to health problems, particularly malnutrition in children. To prevent stunting and improve health, it is important to

educate individuals about the impact of unhealthy eating habits and encourage behavioral change. By cultivating awareness and encouraging the adoption of healthier practices, we can effectively maintain control over eating habits and establish new, beneficial ones.

Factors based on cultural values and lifestyle Transcultural Nursing with the nutritional status of children aged 24-59 months in the technical implementation unit in the working area of Kaluku Bodoa Public Health Center Makassar in 2024.

The research results showed that respondents who had a positive attitude towards cultural values and lifestyle had 20 toddlers (26.7%) with normal nutritional status, while 25 respondents (89.3%) had high positive values. Meanwhile, those who had a negative attitude towards cultural values and lifestyle were 55 toddlers (73.3%) with stunting nutritional status and only 3 respondents (10.7%) had normal status. After carrying out the chi-square statistical test, it was found that the resulting p value was 0.00 ($\alpha \leq 0.05$), which indicated that the significant result H1 was accepted, confirming the existence of a correlation between cultural value factors, transcultural nursing-based lifestyle, and prevalence stunting.

The results of this research are in line with research conducted by Andayani et al. (2024) which states that individual nutritional intake in a family is influenced by socio-cultural factors and local cultural aspects in a society. This in turn indirectly affects the prevalence of stunting. Researchers have determined that the transmission of negative cultural values and lifestyles between generations plays a role in the formation of wrong parenting methods, which ultimately hinder children's optimal growth and development. On the other hand, the application of cultural values and a positive lifestyle serves to encourage appropriate child rearing practices, thereby impacting age-appropriate progress and development. In addition, researchers emphasized the importance of cultural negotiation, as certain cultural practices among respondents could have a negative impact on the baby's health. The main goal is to reduce stunting rates, as well as cases of malnutrition and infant mortality among children under five.

The relationship between economic factors and based Transcultural Nursing with the nutritional status of children aged 24-59 months in the working area of Kaluku Bodoa Public Health Center Makassar in 2024

Based on analysis of research data, it is known that respondents with high economic backgrounds show the nutritional status of toddlers, known as stunting. This number amounted to 15 people, or 20% of the respondents. Apart from that, 14 respondents (50%) from the high economic group had normal nutritional status. In comparison, respondents with moderate economic backgrounds showed 14 cases of stunting (18.7%) and 4 cases of normal nutritional status (14.3%). In contrast, respondents from low economic backgrounds had a much higher number of cases, namely 46 cases of stunting (61.3%) and 10 cases with normal nutritional status (35.7%). After carrying out statistical analysis using the chi-square test, a p value of 0.010 was obtained (with α set at ≤ 0.05), which indicates that the alternative hypothesis (H1) is accepted. This indicates a correlation between economic factors, as assessed through transcultural nursing, and the occurrence of stunting.

The occurrence of stunting, as stated by (Oktavia et al., 2021), is a complex problem that cannot be solely caused by a lack of nutrition in pregnant women or children under five years of age. One of the causal factors is the family's socio-economic status. Socioeconomic status includes income and education, both of which impact the growth process. Family income directly influences a person's ability to obtain certain types of food, thereby affecting children's nutritional well-being. The risk of inadequate food intake increases in individuals with low socioeconomic status, because they face barriers in obtaining certain foods. Research conducted by Apulina Ginting et al. (2023) supports the influence of socio-economic factors, especially maternal educational background and family income, on the prevalence of stunting in children aged 6-59 months in Kotamobagu City.

This study provides evidence that maternal education and family income are the main risk factors for stunting in Kotamobagu City.

Based on the explanation above, researchers believe that improving economic conditions will have an impact on better health and a reduction in stunting cases. The findings of this research show that the majority of respondents have low socio-economic status, but their toddlers show healthy growth. According to researchers, individuals who have extended families or relatives who provide financial support, such as partners or extended family members, are more likely to receive the resources necessary to meet daily needs. This includes expressions of empathy, concern, and concern for the welfare of the individual concerned. The researchers argue that improving economic conditions will contribute significantly to improving overall health outcomes and ultimately reducing the prevalence of the disease stunting.

Education-based factor relationships Transcultural Nursing with the nutritional status of children aged 24-59 months in the working area of Kaluku Bodoa Public Health Center Makassar in 2024

Research findings show that there is a significant correlation between the level of education and the nutritional status of children under five, especially related to stunting. Respondents who did not complete elementary school with nutritional status of toddlers (Stunting) were none while (normal) was 1 (1%) and for respondents who completed elementary school with nutritional status of toddlers (Stunting) was 2 (2.7%) and (normal) none, while respondents who graduated from junior high school had 23 (30.7%) toddler nutritional status (Stunting), and 4 (14.3%) (Normal) then respondents who graduated from high school with toddler nutritional status (Stunting) as many as 47 (62.7%) and (normal) as many as 18 (64.3%) followed by respondents who graduated from Academy/College with nutritional status of children under five (Stunting) as many as 3 (4%) and (normal) as many as 5 (17, 9%). Based on statistical analysis using the chi-square test, a p-value of 0.032 ($\alpha \leq 0.05$) was obtained, which shows that there is a significant relationship between educational factors related to transcultural nursing and the prevalence of stunting. Other results revealed that 47 respondents with upper secondary school education, or 62.7% of their children, experienced stunting. However, it should be noted that there were also respondents who had not completed elementary or middle school and did not experience stunting.

According to the book by Al Jihad et al. (2022), education represents the final stage of human progress, serving as a vehicle for scientific action. Level of education plays an important role in shaping nutritional outcomes, as it impacts an individual's capacity to understand and accept new information. Additionally, education has the potential to influence children's eating habits by influencing their engagement with the food system.

According to recent research conducted by Trisutrisno et al. (2022), there is a strong relationship between the mother's educational background and the incidence of stunting in her child ($p=0.000$). The findings show an odds ratio of 2.869 (1.552-5.303), which shows that mothers with limited education are almost three times more susceptible to having stunted toddlers. Education has a significant influence in shaping overall health outcomes, as individuals with higher levels of education tend to prioritize and implement healthy lifestyle practices that are independent, creative, and sustainable. Additionally, education significantly impacts an individual's ability to access and understand nutritional information, thereby influencing their acceptance of knowledge in this field.

Research conducted by Apriluana and Fikawati in 2018 supports these findings, emphasizing the influence of maternal education on the occurrence of stunting in children. Their study revealed that lack of education among mothers was the main cause of stunting which was 1.67 times higher. Individuals who attain a higher level of education experience increased opportunities to make choices regarding the quality and quantity of food, thus having an impact

on improving the nutritional status of their children. Therefore, it can be concluded that the level of education is directly correlated with children's nutritional well-being.

Researchers argue that a mother's ability to access external sources of nutrition and health information determines her level of education. A mother's formal education has a direct impact on her level of knowledge. As a mother's educational level increases, she becomes more adept at acquiring practical knowledge through formal and informal channels, including the mass media. This allows her to process, present and share information based on her specific needs, thereby significantly increasing her level of knowledge. Education and employment status of parents, especially mothers, play an important role. A higher level of education is associated with improving the quality of children's nutrition. Therefore, education and employment of parents, especially mothers, are expected to be very important. Children whose mothers are highly educated have better growth rates according to the child's age.

The factor that has the most influence on the nutritional status of toddlers is based on transcultural nursing in children aged 24-59 months in the working area of Kaluku Bodoa Public Health Center Makassar in 2024

The Backward LR method was used to carry out multivariate analysis. It was found that social factors and lack of family support were the factors that had the most influence on the nutritional status of toddlers with stunting in the Kaluku Bodoa Makassar Health Center working area. These factors have a 31 times higher risk of stunting, with a P value of $0.000 < 0.005$ and a value of (95% CI = 14.828-6.7013). Medeleine Leininger's Sunrise Model Theory of 7 includes various factors, including technological, religious and philosophical components, social components, family-based (kinship and community), cultural values and lifestyle, political and legal components, economics and education. The researchers in this case chose to only utilize 5 of the 7 factors described in the Leininger sunrise model theory. Through multivariate analysis, it was found that the factors that had the greatest influence on the nutrition of stunted toddlers in the context of transcultural nursing for children aged 24-59 months in the working area of Kaluku Bodoa Public Health Center Makassar in 2024, were social factors and family support.

Based on research findings, the decision-making process in the family, especially regarding providing nutrition to children, is greatly influenced by various factors such as family structure, family roles and status, community values, and support from the community.

CONCLUSION

The incidence of stunting is known to be related to various factors. The technology factor ($p=0.007$) shows that respondents who use technology less have the highest number of stunted toddlers, namely 46 (61.3%). Likewise, social factors and family support ($p=0.000$) show that those who receive social support and have fewer stunted toddlers reach 52% or 39 stunted toddlers. The cultural values and lifestyle factor ($p=0.000$) shows that the negative cultural values and lifestyle of respondents contributed to the occurrence of stunting in around 73.3% or 55 out of 75 children under five and then economic factors ($p = 0.010$) the majority of respondents with low economic status were 46 (61.3%) with the incidence of stunting and educational factors having a p value of 0.032. The majority of respondents have a high school education, and 62.7% of their children experience stunting. The factor that has the greatest influence on children's nutritional status (stunting) is social factors. and lacking family support has a 31 times higher chance of stunting, P value 0.000 (95% CI = 14.828-6.7013).

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