

The Relationship between Parenting Style and Nutritional Status of Child Aged 12-24 Months at Jelbuk Public Health Center, Jember Regency

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Abstract

Children aged 12-24 months are included in the golden period of the first 1000 days of life, where their nutritional needs greatly affect growth and development in the future. The role of the mother is very influential in the upbringing and care of the child. This study aimed to determine the relationship between parenting style and nutritional status of babies aged 12-24 months at the Jelbuk Public Health Center, Jember Regency. The research design used was cross-sectional. The sampling technique used proportionate random sampling and obtained a total sample of 97 mothers and babies under two years. Mothers were instructed to fill out mother's parenting questionnaires. The nutritional status of children under two years is measured by weight/age indicators and interpreted based on the WHO classification of nutritional status. The child's weight was obtained using a hanging-type scale (dacin). Statistical analysis using Spearman rank with significance ≤ 0.05 . Most children (50%) of mothers with permissive parenting are underweight, 47.1% are normal, and 2.9% are at risk of being overweight. Most children (86%) of mothers with democratic parenting have normal nutritional status, and 14% are underweight. Most children (83.3%) of mothers with authoritarian parenting have normal weight, and 16.7% are underweight. There is a relationship between parenting style and the nutritional status of children aged 12-24 months (p value = 0.001; α = 0.05). The application of democratic parenting has the potential to cause normal weight in children. Therefore, health promotion is needed about parenting by related parties to mothers of children because parenting affects eating habits that impact children's nutritional status.

Keywords: parenting style, nutritional status, children

Introduction

Children under two years old are most vulnerable to malnutrition because, at this age, there is an increase in nutrition-related needs (Rahayu *et al.*, 2018). Nutritional status in toddlers is important and needs to be known by all parents. Considering that toddlers who are malnourished at a brilliant age, especially in the first 1000 days of life, cannot be changed, and

toddlers who do not meet their nutritional needs can affect their growth and development (Fatkuriyah & Sukowati, 2022).

According to UNICEF, one of the causes of malnutrition or undernutrition is poor parenting in feeding practices in the early stages of a child's first day of life. The most significant thing that affects the development of malnutrition in children is the parenting style adopted in the household. Parenting is a cooperation that exists between parents and children. The character of a child can be formed from the parenting style of parents in raising him, thus influencing them to be disciplined in everything, including food intake (Sutanto & Andriani, 2019). Because it affects a child's feeding and healthcare practices, parenting can affect nutritional status (Rahayuningati *et al.*, 2015).

According to data in 2020, in Jember Regency, it was found that 3,155 (3.92%) of all toddlers weighed had BGM or malnutrition. The percentage of children under five with BGM or malnutrition from 2016-2020 tends to increase yearly, from 0.9% in 2016 to 3.92% in 2020 (Dinkes Jember, 2020). public health center Jelbuk is one of the public health centers with the highest nutritional status of under-five children in Jember Regency, namely toddler wasting 204 toddlers (9.2%), stunting 392 toddlers (17.8%) and underweight 320 toddlers (14.5%). Especially for children aged 6-24 months at the Jelbuk Health Center, 35.6% and 6.5% were severely malnourished from all children-under-2-years weighed (Puskesmas Jelbuk, 2022).

Several efforts and programs have been implemented to overcome toddler nutrition problems at the Jelbuk Health Center, including counseling and provision of PMT and MP ASI. However, nutritional problems in toddlers remain the most serious problem in the Jember Regency. According to data from the Jelbuk Health Center, there has never been a study on parenting patterns in mothers with toddlers at the Jelbuk Health Center. Hence, the author is interested in researching the relationship between parenting style and the nutritional status of children aged 12-24 months at the Jelbuk Health Center.

Research Methods

The design used in this study was a correlation with the *cross-sectional approach*. The samples of this study were mothers and children aged 12-24 months at the Jelbuk Health Center, Jember Regency. The number of samples was calculated based on the Slovin formula and obtained 97 mothers and children aged 12-24 with inclusion criteria: 1) children-under-2-years visiting Posyandu, 2) mothers are not illiterate. The exclusion criteria in this study are 1) children-under-2-years has a congenital disease, 2) children-under-2-years with low birth weight, and 3) children-under-2-years who are sick. The sampling technique uses

proportionate random sampling, where all respondents have the same opportunity to be sampled according to their proportions.

In this study, questionnaires measured maternal parenting using parenteral demandingness (D) and Parenteral responsiveness (R) indicators to determine democratic, authoritarian, permissive, and neglectful maternal parenting. The parenting questionnaire in child feeding was adopted from (Yumni & Wijayanti, 2017) research. The nutritional status of child under 2 years old is determined by weight indicators according to age (BB/U). The nutritional status of child under 2 years old is classified based on the results of the Z-Score in accordance with the *World Health Organization anthropometric standard z-scores*, namely 1) very underweight (<-3SD); 2) underweight (-3SD to -2SD); 3) normal weight (-2SD to +1SD); and 4) risk of overweight (>+1SD) (Permenkes RI, 2020). The statistical test used is the Spearman rank test with a value of $\alpha = 0.05$. This research was declared ethically worthy of the Ethics Commission of Universitas dr. Soebandi, based on ethical permit No. 045/KEPK/UDS/III/2023. Only mother who signed the informed consent were included in the research.

Results

Table 1 Respondents' characteristic

Respondents' characteristic	Frequency	Percentage
Gender of Child under 2 years old		
Male	45	46,3%
Female	54	55,7%
Mother education level		
Primary School	10	10,3%
Junior School	32	33%
High School	53	54,7%
Diploma	0	0%
Bachelor	2	2%
Maternal Age		
< 20 years old	4	4,1%
20–30 years old	69	71,2%
31-40 years old	22	22,7%
41-50 years old	2	2%
> 50 years old	0	0%
Mother's Work		
Does not work	91	93,8%
Civil Servant	0	0%
Farmworker	0	0%
Private employees	6	6,2%
Farmer	0	0%
Self employed	0	0%
Number of Children		
1	45	46,4%
2	45	46,4%
3	7	7,2%
> 3	0	6,2%

Total	97	100%
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Table 1 shows most child under 2 years old are female (55.7%), most of the mother's education is high school (54.7%), the mother's age is mostly 20-30 years (71.2%), the mother's occupation is mostly not working (93.8%) and mothers with the same number of children 1 and 2 (46.4%).

Table 2 Overview of mother's parenting

Parenting	Frequency	Percentage
Parenting neglect	0	0%
Permissive parenting	34	35%
Authoritarian parenting	6	6,2%
Democratic parenting	57	58,8%
Total	97	100%

Table 2 shows that the parenting style of child under 2 years old aged 12-24 months at the Jelbuk Health Center, Jember Regency is mostly democratic parenting, which is 57 (58.8%).

Table 3 Overview of nutritional status of children under 2 years old aged 12-24 months

Status Gizi Child under 2 years old	Frequency	Percentage
Very less weight	0	0%
Underweight	26	26,8%
Normal weight	70	72,2%
Risk of more weight	1	1%
Total	97	100%

Table 3 shows that the nutritional status of child under 2 years old aged 12-24 months at the Jelbuk Health Center, Jember Regency is mostly normal weight, which is 70 (72.2%).

Table 4 The relationship between parenting style and nutritional status of child under 2 years aged 12-24 months

Parenting	Nutritional Status						Total	
	Underweight		Normal		Risk of Obesity		f	%
	f	%	f	%	F	%		
Permissive	17	50	16	47,1	1	2,9	34	100
Authoritarian	1	16,7	5	83,3	0	0	6	100
Democratic	8	14	49	86	0	0	57	100
Total	26	26,8	70	72,2	1	1	97	100

Spearman's Rank *Test Results* = 0,001 $\alpha = 0,05$

Based on table 4 above, it is known that permissive parenting shows that as many as 17 child under 2 years (50%) have less weight, 16 child under 2 years (47.1%) have normal weight and 1 child under 2 years (2.9%) have a risk of overweight. In democratic parenting, it shows that as many as 8 children under 2 years (14%) are underweight and 49 children under 2 years

(86%) have normal weight. While in authoritarian parenting, as many as 1 child under 2 years (16.7%) has less weight and 5 children under 2 years (83.3%) has normal weight.

In the results of the analysis of the Spearman rank test $\alpha = 0.05$, the results of $p = 0.001 < 0.05$ were obtained, which means that there is a relationship between parenting style and nutritional status of child under 2 years aged 12-24 months.

Discussion

The results of this study are in line with research by (Hidayathillah & Mulyana, 2017) that there is a significant relationship between parenting style and nutritional status in children under the age of 1-5 years in Selokgondang village, Sukodono District, Lumajang Regency. Parenting is divided into two aspects, namely the demandingness aspect and the responsiveness aspect. In terms of feeding, the demandingness aspect and the responsiveness aspect in parenting refer to the extent to which parent guide and control their children's eating, how they support their children's nutritional intake, how they choose their children's meals, and how they prepare their meals (Iskandar *et al.*, 2022).

In democratic parenting, the *demandingness* aspect and the *responsiveness* aspect are high, which means that parents have high demands / control and responses / responses to children. In the aspect of demandingness, parents actively encourage children to eat without using commands and have clear limits on children in terms of eating, while from the aspect of responsiveness parents support children to express their desires, provide role model of good eating behavior and carry out open communication encouraging parents and children to interact with each other about the food to be consumed so that the risk of malnutrition can be reduced (Yumni & Wijayanti, 2017). This is evidenced by the majority of child under 2 years with democratic maternal parenting experiencing normal weight, which is as many as 49 (86%) and 8 children under 2 years (14%) experiencing underweight. Child under 2 years who underweight with democratic parenting is likely due to poor knowledge about nutrition and health (Hidayathillah & Mulyana, 2017).

In permissive parenting, the *demandingness aspect is low while the responsiveness aspect* is high, meaning that parents have low demands/control but high responses/responses to children. From the aspect of *demandingness*, parents give few demands for eating but not in the form of orders and there is no supervision / control over eating choices and children's eating behavior, from the aspect *of responsiveness* parents tend to give complete freedom to children to choose the type of food that suits the tastes and desires of children without paying attention to the nutritional content (Yumni & Wijayanti, 2017). Permissive parenting in feeding

like this can have an impact on children becoming less disciplined, very demanding and controlling eating so that children are picky eaters (Rofiqoh *et al.*, 2021). This can cause children to experience underweight or risk overweight. This is evidenced by the results of the study found that mothers with permissive parenting most child under 2 year experience underweight nutritional status, namely as many as 17 child under 2 years (50%), normal weight as much as child under 2 years 16 (47.1%) and the risk of more weight as much as 1 child under 2 years (2.9%).

In authoritarian parenting, the *demandingness aspect is high while the responsiveness aspect* is low, which means that parents have high allocation / control and low response / response to children (Utari, 2017). In the aspect of demandingness, menu selection and meal times are determined by parents and tend to command children to eat, this can cause children to possibly have less or more weight because eating activities are in a stressful atmosphere (Hidayathillah & Mulyana, 2017). From the aspect of *responsiveness*, parents never guide children in terms of eating and are not responsive to children's desires for food. From the results of this study, mothers with authoritarian parenting mostly child under 2 years experienced normal nutritional status, namely as many as 5 children under 2 years (83.3%) and 1 child under 2 years (16.7%) underweight. According to researchers, this is likely due to good parental knowledge about nutrition so that when the selection of menus and meal times is fully determined by parents, the needs of children's nutrition are met. However, it is said that authoritarian parenting is not good because it makes children passive and less courageous.

Conclusion

When mothers apply democratic parenting, nutritional status in children has the potential to gain normal weight, on the contrary, when mothers apply permissive parenting, the nutritional status of children has the potential to gain less weight. This is because in democratic parenting, mothers provide support and actively participate in the process of feeding children.

Research Advice

Health care institutions further increase health promotion to mothers of toddlers about parenting in good feeding practices for toddlers. Mothers are expected to always pay attention to meet the nutritional needs of their children, according to the age of the child and apply good parenting in feeding practices.

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Author Contribution

First author: designing the whole concept of the study, collecting and analyzing the data, and writing the manuscript

Second, third and fourth author: giving a guidance for the researcher during the process of research preparation and implementation, supervising and ensuring that research project is carried out in accordance with the methodology research.

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