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Maternal Parenting Practices in Feeding and Their Impact on Nutritional Status of Toddlers in Mampang Village, Depok City, West Java

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Abstract

One indicator of community nutritional status is the nutritional status of children under five. Efforts to achieve good nutritional status for children under five cannot be separated from the role of parents, especially mothers, as caregivers because mothers are responsible for organizing family meals, including for children under five. Therefore, this study aims to assess the dominant risk factors related to maternal parenting in feeding with the nutritional status of toddlers. The research method used was an analytic observational study with a cross-sectional design. Data collection was conducted at the integrated health post (Posyandu) Mampang Village, Depok City, in May 2024, which coincided with the month of monitoring toddler growth and development. The population of this study was 1,853 toddlers. While the number of samples taken was 92 toddlers using the purposive sampling technique. The instrument used was a maternal parenting questionnaire modified from the Ministry of Health's infant and young child feeding guidelines, and the reliability test results of this questionnaire were 0.722. Data analysis used the chi-square test, and multivariate analysis used the logistic regression risk factor model. The results showed that 87% of toddlers had good nutritional status and 13% were malnourished. Based on the study result, the factor that plays the most role in the nutritional status of toddlers is the provision of main meals 3 times (*p*-value 0.000) and snacks 2 times a day (*p*-value 0.046). Training in feeding the type and amount, how to serve, and variety of food diversity is necessary to improve toddlers' optimal growth and development.

Keywords: feeding practice; food intake; nutritional status; risk factor; toddler

INTRODUCTION

Nutritional status is one of the key indicators in the determination of the children's health. Toddlerhood is an essential period in children's growth and development, where adequate nutrition is needed to support their physical, psychological, and cognitive growth (Said et al., 2021). Malnutrition in children under two reduces brain cell development by approximately 15 to 20%, potentially resulting in long-term cognitive capacity of only 80 to 85% of its potential (Gannika, 2023). Children's nutritional status is influenced by various factors, including maternal parenting patterns in providing food in the early stages of the child's first days of life (Prasetyo et al., 2023).

The maternal parenting pattern in feeding infants and children (PMBA) is one of the risk factors that can improve nutritional status

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(Permatasari and Waluyanti, 2019). The PMBA program also aimed to improve children's nutritional status, health, growth, development, and survival in Indonesia. It is one of the recommended gold standards because PMBA can reduce child mortality and improve the quality of life of mothers (Sari et al., 2022).

Toddler growth and development are closely related to the maternal parenting style, and malnutrition can inhibit brain growth and development. Parenting is closely associated with the growth and development of children under five. Children aged 1 to 5 years, also known as toddlers, need adequate food intake. Malnutrition at an early age can cause physical, mental, social, and intellectual growth disorders that persist until the child becomes an adult (Nikmah et al., 2024). In Jakarta in 2021, there was a significant relationship between maternal parenting patterns in feeding and nutritional status. Improper feeding will result in poor nutritional status in toddlers (Said et al., 2021). According to UNICEF (2024), poor parenting in providing food for toddlers during the early stages of development is a significant contributing factor to malnutrition. Parenting patterns have a significant impact on toddlers' nutritional intake. They can also shape a child's character, fostering discipline in various aspects of life, including maintaining a diet. Regarding providing food, parenting patterns, especially for mothers, are fundamental (Telova, 2025).

According to another research conducted by Furqan et al. (2020) in Pagelaran Sub-district, Pandeglang Regency, PMBA, nutritional knowledge, infection status, and food intake are some of the factors associated with the nutritional status of toddlers. Inadequate PMBA practices can increase the risk of morbidity and mortality, especially in low-resource settings. In addition, based on the results of interviews, many mothers still do not know about providing complementary feeding in terms of balanced food composition, texture, and the amount of food given. As a result, the implementation of PMBA practices remains suboptimal among some mothers (Wulandari and Wati, 2020).

Based on the health profile of Depok City, the status of malnutrition and poor nutrition in toddlers at the Mampang Health Center is 13.01%, and one of the factors related to nutritional status is the feeding practice. In Indonesia, several indicators are included in good child-feeding practices. In previous studies, many have seen the relationship between maternal parenting patterns and good feeding practices but have not seen which factors are most related to the nutritional status of toddlers. This research uses multivariate logistic regression analysis to examine the dominant risk factors of maternal parenting patterns affecting feeding practices and nutritional status in toddlers. Therefore, appropriate interventions can be carried out to reduce the prevalence of malnutrition in Depok City, especially in Mampang Village.

MATERIALS AND METHOD

Study design and participants' characteristics

This quantitative research with a cross-sectional design was carried out in Mampang Village, Pancoran Mas Sub-district, Depok City, during the activities at the integrated health post (Posyandu). This research was carried out and implemented in May 2024, coinciding with the scheduled month of toddler growth monitoring. According to the 2024 profile data from the Mampang Health Center (Statistics of Depok City, 2024), the total toddler population was 1,853. Determining the number of samples uses the Slovin formula calculation because the population size is known. This study included 92 mothers of toddlers, aged 30 to 40 years on average, who were chosen using purposive sampling.

The inclusion criteria for this study were toddlers who lived permanently at the research location and whose mothers could read and write. Meanwhile, the exclusion criteria are toddlers who are not cared for by their mothers and toddlers who have physical disabilities. Since the data collection process was carried out during the toddler growth monitoring, the samples consisted of the mothers who brought their toddlers for check-ups at four integrated health posts in Mampang Village, Depok. There are 16 neighborhoods in Mampang Village, and only seven neighborhoods were used as samples because there are already nine integrated health posts that have carried out monitoring activities on toddler growth and development when collecting data.

Instruments and variable

The instrument used in this research was a questionnaire related to maternal parenting patterns in providing food modified from PMBA

from the Ministry of Health and a questionnaire from previous investigations tested for reliability and validity. The reliability test results for this questionnaire were 0.722, meaning that the questions were reliable and could be used on respondents. The validity test results on each question were more than 0.3, with the total number of questions being 12. The first variable measured was the nutritional status of toddlers, the dependent variable in this study. The nutritional status of toddlers is seen from the body mass index (BMI) based on age which is then compared with the anthropometric Z-score table. BMI is obtained by calculating the toddler's weight (in kg) divided by the toddler's height (in m) squared. Measuring the weight of toddlers using a baby scale (digital baby scale) for toddlers who cannot stand yet, a digital body scale, and a stadiometer to measure the height of toddlers. Meanwhile, other variables use questionnaires derived from the Ministry of Health's PMBA guidelines, and there are five additional questions created by researchers whose validity and reliability have been tested.

Statistical analysis

Univariate analysis was used to analyze the data of dependent variables (nutritional status of toddlers) and independent variables (maternal parenting patterns in feeding). The results of this data analysis are presented in the form of a frequency distribution. Bivariate analysis determined the relationship between the independent and dependent variables. Data analysis was performed using the chi-square test, with a significance level (*p*-value) of ≤ 0.05, indicating a statistically significant relationship. For the multivariate analysis, logistic regression based on the risk factor model was employed (Equation 1), as the data were categorical (Dahlan, 2022). To examine the variable that has the most significant influence (dominant variable) from other independent variables, it can be seen from the exp (B) value on the significant variable. The greater the exp (B) value, the greater the difference in the analyzed dependent variables.

$$\text{Logistic regression equation: } f(x) = \frac{1}{1+ e^{-x}} \quad (1)$$

Ethical consideration

Researchers conduct ethical tests through the digiTEPP account (Digitalization of Research Protocol Ethics Review). Then, fill in the specified protocol form and upload the required documents: informed consent for research, research questionnaire form, researcher CV and team members. After that, an initial review was carried out. The initial review results were exempted because the research carried out had minimal risk. The research ethics committee that the researcher chose to review was Universitas Alifah Padang, with certificate number 001714/KEP Universitas Alifah Padang/2025.

RESULTS AND DISCUSSION

Univariate result

The univariate analysis presents respondents' data based on the category of nutritional status in toddlers and the independent variables studied. These variables include washing hands with soap before feeding, providing main meals 3 times and snacks 2 times a day, feeding when there is a hunger signal, daily fruit intake, daily vegetable intake, daily animal protein, daily menu variations, provision of milk other than breast milk, regular weighing, and consultation with a doctor or health worker (Table 2) if the baby is underweight.

Based on the results of the frequency distribution test conducted on 92 toddlers in Mampang Village, Depok City, there were 87% of toddlers with normal nutritional status (Table 1) using the anthropometric standards of the Regulation of the Minister of Health of Indonesia No. 2 of 2020, which is seen from the BMI according to age (BMI/U) (Ministry of Health, 2020). Therefore, the results show that the nutritional status of toddlers in Mampang Village in 2024 is mostly normal.

Nutritional status is a condition caused by the balance between the amount of nutrient intake and the amount needed by the body for physical growth, development, activity, health maintenance, etc. The nutritional status of toddlers is an important indicator of children's health and well-being. Good nutrition at an early age has a long-term impact on physical growth,

Table 1. Distribution of nutritional status in toddlers

Nutritional status	Number of respondents	Percentage (%)
Malnutrition	12	13
Normal status	80	87

cognitive development, and lifelong health (Saavedra and Prentice, 2023).

More than two-thirds of child deaths due to malnutrition are associated with improper diet during the first 2 years of their lives. There will be a decrease in the burden of morbidity and mortality if there is an improvement in toddler feeding practices. Indicators of toddler feeding include identifying soft, solid, or semi-solid foods, food variations, frequency of eating and drinking, and food intake according to age up to 2 years. Therefore, PMBA practices must be carried out optimally, and the success of these practices is highly dependent on support from the mother's environment (Lestari and Putri, 2024).

According to the Ministry of Health (2020), at toddler age, the need for various nutrients increases and can no longer be met by breast milk alone. At this age, children are in a period of rapid growth and development, being exposed to infections, and begin to be physically active, leading to a rise in nutritional needs. In PMBA, several things must be considered, such as the nutritional content of the ingredients used, the amount of food given that is under the child's nutritional needs and must be made from ingredients that contain lots of nutrients and must be well absorbed by the child. However, even though most mothers have provided food for toddlers, malnutrition still occurs. This is likely because providing additional food is still not under the guidelines for delivering appropriate food according to standards.

Bivariate result

Table 3 shows the bivariate analysis to determine the relationship between maternal parenting patterns related to providing additional food to toddlers and the incidence of malnutrition. This study used the chi-square test (x^2) with a confidence level of 95% or $\alpha = 0.05$ and to see the risk factors with the dependent variable seen from the odds ratio (OR) value.

Based on the bivariate analysis using the chi-square test, there is a significant relationship between several feeding practices and nutritional status in toddlers. Variables related to nutritional status in toddlers in this study include the relationship between feeding during hunger signals and toddler nutritional status. In line with Gümüş et al. (2020) and Félix et al. (2025), mothers' perceptions of hunger and satiety signals will affect toddler weight status. Increasing adequate perception of these signals is vital to prevent early childhood nutritional problems (Félix et al., 2025). Maternal responsiveness to hunger cues is relevant to developing toddler nutritional status. Mothers skilled at recognizing signs of hunger and fullness in toddlers influence the adequacy of their toddler's intake (McNally et al., 2020). Based on the results of an online survey with a large sample of mothers in Australia, non-responsive feeding practices are associated with lower nutritional quality in toddlers (Killion et al., 2024).

The provision of animal protein and a varied menu are also related to this research. There is a correlation related to the relationship between animal protein intake and feeding toddlers because the better the animal protein intake, the better the growth of their height (Nurhidayah et al., 2023). Meanwhile, the results of a literature review of eight articles published in indexed national and international journals with a period of 2013 to 2023 showed that 5 of 8 articles on

Table 2. Distribution of nutritional status with feeding behavior in toddlers

Variable	Number of respondents		Percentage (%)	
	Yes	No	Yes	No
Washing hands with soap	92	0	100.0	0.0
Providing main meals 3 times a day	70	22	76.1	23.9
Snacks 2 times a day	84	8	91.3	8.7
Feeding when there is a hunger signal	81	11	88.0	12.0
Daily fruit intake	72	20	78.3	21.7
Daily vegetable intake	70	22	76.1	23.9
Daily animal protein	88	4	95.7	4.3
Daily menu variations	76	16	82.6	17.4
Provision of milk other than breast milk	51	41	55.4	44.6
Regular weighing	39	53	42.4	57.6
Consultation with a doctor	5	87	5.4	94.6

Table 3. The relationship between maternal parenting patterns related to the practice of providing additional food and the nutritional status of toddlers

Variable	Nutritional status				*p*-value
	Underweight		Normal		
	n	%	n	%	
Washing hands with soap					
No	-	-	-	-	Constant
Yes	28	30.4	64	69.6	
Providing main meals 3 times a day					
No	17	77.3	5	22.7	0.000*
Yes	11	15.7	59	84.3	
Snacks 2 times a day					
No	5	62.5	3	37.5	0.053**
Yes	23	27.4	61	72.6	
Feeding when there is a hunger signal					
No	6	54.5	5	45.5	0.070**
Yes	22	27.2	59	72.8	
Daily fruit intake					
No	7	35.0	13	65.0	0.821
Yes	21	29.2	51	70.8	
Daily vegetable intake					
No	15	68.2	7	31.8	0.000*
Yes	13	18.6	57	81.4	
Daily animal protein					
No	4	100.0	0	0.0	0.007**
Yes	24	27.3	64	72.7	
Daily menu variations					
No	8	50.0	8	50.0	0.077**
Yes	20	26.3	56	73.7	
Provision of milk other than breast milk					
No	11	26.8	30	73.2	0.649
Yes	17	33.3	34	66.7	
Regular weighing					
No	22	41.5	31	58.5	0.014**
Yes	6	15.4	33	84.6	
Consultation with a doctor					
No	28	32.2	59	67.8	0.318
Yes	0	0.0	5	100.0	

Note: * = Significant (*p*-value ≤ 0.05 and is included in the multivariate model), ** = Not significant (*p*-value > 0.05 but is included in the multivariate model because the *p*-value < 0.25)

food variations had a positive effect on fulfilling toddlers' nutritional needs, namely increasing energy, carbohydrate, protein, fat, vitamin, and mineral intake. Toddlers who get food variations also have better nutritional status (Pratiwi et al., 2021; Sartika et al., 2024).

This research is in with the investigation conducted by Larasati et al. (2019) at the Ngraho Bojonegoro Health Center in 2022, which reported that there was a relationship between PMBA and good nutritional status in toddlers showing a probability value of *p*-value 0.000 ≤ 0.05. According to research by Said et al. (2021) in the Kebayoran Lama Health Center area, South Jakarta in 2021, there was a relationship between PMBA and good nutritional status in toddlers, with the results showing a probability value of *p*-value 0.001 ≤ 0.05.

Based on Table 4, two variables have a relationship with nutritional status in toddlers in Mampang Village, providing main meals 3 times and snacks 2 times a day. In this research,

Table 4. Final model of multiple logistic regression multivariate analysis

Variable	B	*p*-value	OR 95% CI
Providing main meals 3 times a day	18.521	0.000	4.827-71.059
Snacks 2 times a day	7.925	0.046	1.037-60.557
Feeding when there is a hunger signal	5.217	0.059	0.939-28.990
Daily animal protein*	3.998	0.999	.000
Regular weighing*	3.100	0.083	11.146

Note: B = Predicted change in odds for an increase in each variable in the multivariate model, * = Confounding factor

the variables of feeding in response to hunger cues, daily animal protein intake, and routine weighing acted as confounding factors. The analysis results obtained an OR of 18.52 for the variable related to information access. This shows that toddlers who are given main meals 3 times and snacks 2 times a day have an 18 times greater chance of having good or normal nutritional status than those who do not receive such a feeding pattern.

This research also identified the variables with the most significant influence, namely the provision of main food 3 times a day, which has the greatest relationship to the nutritional status of toddlers in Mampang Village. Therefore, it can be reported that the provision of main food 3 times a day is a dominant factor related to the nutritional status of toddlers. When entered into the logistic regression model, the exponentiated values revealed that toddlers with three main meals and two snacks daily had a 99.89% probability of achieving good nutritional status. These results were obtained after controlling for the variables of feeding at the time of hunger, daily animal protein intake, and routine weighing. In contrast, after adjustment for the same, toddlers who were not provided with three main meals and two snacks per day had only an 11.4% probability of achieving good nutritional status.

The final results of the multivariate analysis of the risk factor model contain two variables included in the model, namely providing main meals 3 times and snacks 2 times a day. In addition, variables for providing food when hungry, consumption of animal protein, and routine weighing are included as counseling. This aligns with Susanti and Putri (2023), who stated that 61.7% of toddlers with good nutritional status were in mothers who routinely provided main meals 3 times and snacks 2 times a day. Similarly, research conducted by Mar'atik and Muniroh (2023), which was conducted in the Kediri Health Center area, found that more stunted toddlers were found in mothers who gave less than three types of food with appropriate portions, with a *p*-value of 0.013.

Regular eating patterns will affect the nutritional status of toddlers as an effort and method usually done by mothers in providing food to toddlers, starting from menu preparation, processing, serving food, and how to provide food that aims to meet the nutrients needed in the toddler's growth and development process. The basic principles of delivering food to toddlers must meet four requirements: on time, free from contamination, able to meet the adequacy of energy, protein, and micronutrients for growth and development, and scheduled (Ministry of Health, 2021). Additional food for toddlers is given in between the main food, and with sufficient portions and also scheduled. Likewise, with the provision of main food to babies. Scheduled times will let toddlers know when they should eat.

Eating patterns in toddlers play an important role in their growth and development because food contains many nutrients. Nutrition is a very important part of growth, and nutritional intake is closely related to health and cognitive development. Inadequate nutrition will increase the possibility of children becoming more susceptible to infectious diseases, and this nutrition significantly affects appetite. If toddlers do not get sufficient and balanced nutritional intake, their growth will be disrupted, potentially resulting in low body weight, stunted growth, and even malnutrition (Ministry of Health, 2021; Amalika et al., 2023; Afianti et al., 2024).

CONCLUSIONS

In Mampang Village, 88% of toddlers have good nutritional status, while 12% have poor nutritional status. There is a relationship between providing main meals 3 times and snacks 2 times a day, feeding when hungry, and daily vegetable

and animal protein intake. Providing main meals 3 times and snacks 2 times a day is a risk factor significantly influencing maternal parenting patterns related to toddler nutritional status. The existence of PMBA practical training, especially related to snacks that meet balanced nutritional content during integrated health posts, as well as variations in making main foods that are carried out periodically, is expected to reduce the prevalence of toddlers with malnutrition status and increase efforts for optimal toddler growth and development. Further research is expected to focus more on fulfilling balanced nutritional intake in providing snacks and main meals, as well as the addition of research variables related to maternal characteristics so that the relationship between feeding patterns in toddlers from the mother's demographic perspective will be more visible.

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