



PICKY EATING BEHAVIOR ON THE INCIDENT OF STUNTING IN CHILDREN TODDLERS IN TIRTOMOYO, WONOGIRI

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ABSTRACT

Background: The process of development and growth during toddlerhood is determined by the food consumed every day. Giving the body the appropriate nutrition it needs will produce good development. However, various obstacles often occur, such as eating disorders in children. One of the eating disorders in children is the habit of refusing food and being picky about food, often called picky eating, which will have an impact on their nutritional status. Thin or poor nutritional status in children under five can put them at risk of stunting. Stunting is a physical growth disorder characterized by a decrease in growth rate and the impact of a nutritional imbalance.

Methods: This research is quantitative, with a type of observational analytical research. This research was conducted from January to October 2023 in Tirtomoyo, Wonogiri, with a population of 55 children and a sample of 50 children. A questionnaire was developed by researchers based on the Picky Eating Behavior Rating Scale and Transcultural Nursing Theory. Whereas the connection between variables is analyzed using the analysis of simple linear regression through ANOVA and power tables, the influence between variables is observed through the model summary table on value correlation (R). The license number of research is 071/277.

Result: There is an influence of the behavior of picky eaters against the incidence of stunting among toddlers in the Tirtomoyo, Wonogiri, with a level of significance (Sig.) of 0.004 and a value coefficient determination (R square) of 0.164.

Conclusion: The behavior of picky eaters can influence the incidence of stunting in children.

Keywords: *Behavior, Picky Eating, Stunting, Children.*

INTRODUCTION

Children are an investment and the foundation of a country's future generations. Toddlers, or what are usually called babies under 5 years of age, are in the period where growth and development have increased rapidly. This period is often called the golden age. It's important

to watch a child's development so if any abnormalities occur, they can be detected as early as possible. In the process of life, childhood is the phase where the growth and development process occurs, so development optimization must be carried out (Muharani, 2020). At this time, toddlers also require adequate nutritional

intake in greater quantity and quality, because toddlers in general have sufficient physical activity and are still in the learning process.

Development and growth processes in infancy are determined by the food consumed every day. Providing appropriate nutritional intake is necessary to produce good growth and development. Nutritional balance is obtained from food intake that meets children's nutritional needs, as seen from age and activities achieving normal body weight (Astuti & Ayuningtyas, 2018). The intake of nutrients obtained from food influences the growth and development process in toddlers. The food consumed every day by humans does not necessarily meet adequate nutritional requirements, so it is necessary to consume food in various quantities and types (Almatsier, 2008). Children who consume food with insufficient nutritional content can cause their immune system to weaken and become susceptible to disease (Waryana, 2010).

Childhood is a phase where various food intake problems usually occur, one of which is picky eating (Muharani, 2020). Saraswati (2012) emphasized that picky eating is a problem with difficulty eating frequently experienced by toddlers. Children who are picky eaters have their own habits of rejecting food and picky food, which will impact their nutritional status (Wiliam & Marta, 2017). In general, toddlers love to pick and choose food (which behaves like picky eating) and will experience inadequate intake of food. They could potentially experience a lack of nutrition because of variations in food consumed in limited quantities, as well as substance nutrition (Ekstein et al., 2010). Based on research conducted by Kusuma et al. (2015), toddlers who picky eat have a thinner nutritional status if compared to toddlers who don't picky eat.

Thin or poor nutritional status in children under five can put them at risk of stunting. Stunting is a nuisance to physical

growth, characterized by a decrease in growth rate and the impact of not doing so on nutritional balance (Apriluana, 2018; Pratiwi, 2021). According to UNICEF (Prakhasita, 2018), influencing factors that stunt an individual include factors such as poor nutritional intake, infectious diseases, low birth weight (LBW), and caregiver or parental factors such as knowledge and attitudes, resilience food, and parenting patterns. Insufficient nutritional intake can occur due to the child's habit of refusing food and being picky about food (picky eating).

According to the United Nations International Children's Emergency Fund (UNICEF 2013), problem child shortness (stunting) is one of the problems of nutrition that occurs in the world, especially in poor and developing countries. There is stunting, which can give rise to the risk of pain and death. Data from the World Health Organization (WHO) noted that in 2017, 22.2%, or around 150.8 million toddlers in the world, experienced stunting. More than half of the world's stunted toddlers come from Asia (55%), while more than a third (39%) live in Africa. Of the 83.6 million stunted toddlers in Asia, the largest proportion comes from South Asia (58.7%), and the largest proportion is slightly in Central Asia (0.9%) (Ilma et al., 2019).

In Indonesia, the prevalence of stunting cases was 30.7 percent in 2013. The prevalence of stunting remains categorized as high and a health problem in society because it is still above 30% (Harahap, 2015; Simarmata, 2020). According to the results of the 2015 Nutritional Status Assessment (PSG), 29% of children under five in Indonesia are in the short category, and the percentage of nutritional status of toddlers (short and very short) in Indonesia in 2013 was 37.2% if compared to 2010 (35.6%) and 2007 (36.8%). This does not show a significant decrease or improvement (Riskesdas, 2015; Simarmata, 2020).

Based on data obtained by Solopos.com on Wednesday, October 18, 2023, from the Wonogiri Health Service (Dinkes), the prevalence of stunted or potentially stunted children under five in Wonogiri in the last five months totaled 45,155 children. The data was obtained from the results of weighing children under five in all sub-districts with details in July. Of the 42,650 children weighed, 4,693 children, or 11%, were in the stunted category. In August, of the 43,510 children weighed, 4,615 children, or 10.6% of them, were stunted. Finally, in September, of the 42,308 children weighed, 48.67 children, or 11.5% of them, were stunted.

Meanwhile, in June 2023, of the number of babies under two years old who had stunted status, there were 1,364 children. Screening was carried out, and 823 children were found to be suspected of stunting. Then, of these suspects, 684 children were successfully examined. From the June data collection, 587 toddlers were declared stunted. This number is spread across various sub-districts with the highest number of stunting cases. These are the five sub-districts in Wonogiri with the highest number of stunting cases: Pracimantoro, 55 children; Tirtomoyo, 55 children; Kismantoro, 40 children; Giriwoyo, 34 children; and Manyaran, 34 children. Through this data, we know that Tirtomoyo is one of the sub-districts with the highest number of stunted children in Wonogiri Regency.

If stunting occurs in toddlers and is not addressed early, maybe it will cause a big impact: an increase in the incidence of pain and death, cognitive development, motor and verbal in children that is not optimal, increased health costs, and body posture that is not optimal when adults (shorter than in general) increases the risk of obesity and other diseases, decreased reproductive health, learning capacity and performance that is less than optimal

during school years, and productivity and suboptimal work capacity (Indonesian Ministry of Health, 2018).

Other similar research regarding the incidence of stunting in children under five in Wonogiri Regency more closely links stunting with maternal nutritional knowledge, attendance at Posyandu, children's eating patterns, and socio-economic status. There has been no research on stunting related to picky eating behavior or children's daily eating habits. Therefore, this research was conducted to determine the effect of picky eating behavior on the incidence of stunting in children under five in Tirtomoyo, Wonogiri.

METHOD

This is a quantitative study with a type of analytic observational study and a cross-sectional study design. This study was carried out from January to October 2023 in Tirtomoyo Wonogiri, with a population of 55 children experiencing stunting, including toddlers. The retrieval technique sample used purposive sampling and obtained a sample of 50 children. A questionnaire was developed by researchers based on the Rating Scale Behavior, Picky Eating, and Transcultural Nursing Theory. The connection between the variables analyzed uses the analysis of simple linear regression through table ANOVA and power influence between variables observed through a model summary table on value correlation (R). The license number of research is 071/277.

RESULTS

1. Description Characteristics Subject Study

This study has been done against 50 subjects of research consisting of children with stunting and non-stunting conditions in Tirtomoyo, Wonogiri..

Table 1 Description of Research Subject Characteristics

Variable	Frequency (n)	Percentage (%)
Gender		
Man	28	56
Woman	22	44
Child Age		
1 to 20 Months	7	14
21 to 30 Months	14	28
31 to 40 Months	15	30
41 to 50 Months	7	14
51 to 60 Months	6	12
61 to 80 Months	1	2
Child's Current Weight		
<5kg	1	2
5 to 7 kg	3	6
8 to 9 kg	14	28
10 to 12 kg	26	52
13 to 15 kg	5	10
16 to 17 kg	1	2
Child's Current Height		
<51cm	1	2
51 to 60 cm	1	2
61 to 70 cm	2	4
71 to 80 cm	21	42
81 to 90 cm	15	30
91 to 100 cm	9	18
101 to 110 cm	1	2
Splints at Birth		
<5kg	3	6
6 to 7 kg	31	62
8 to 9 kg	16	32
Child's Body Length at Birth		
<31cm	1	2
31 to 40 cm	5	10
41 to 45 cm	9	18
46 to 50 cm	34	68
51 to 55 cm	1	2
Age Parents (Father)		
<26 Years	1	2
26 to 30 years old	13	26
31 to 35 years old	14	28
36 to 40 years old	9	18
41 to 45 years old	8	16
46 to 50 years old	4	8
51 to 55 years old	1	2
Age Parents (Mother)		
<26 Years	3	6
26 to 30 years old	20	40
31 to 35 years old	14	28
36 to 40 years old	6	12

41 to 45 years old	5	10
46 to 50 years old	2	4
Work Parents (Father)		
Private	27	54
Employee	2	4
Laborer	11	22
Teacher	1	2
Trader	1	2
Farmer	5	10
Random	1	2
POLRI	1	2
Unemployment	1	2
Work Parents (Mother)		
Private	2	4
Employee	1	2
Laborer	2	4
Farmer	1	2
Housewife	44	88
Father's Last Education		
Never _ School	1	2
Not completed in primary school	1	2
JUNIOR HIGH SCHOOL	16	32
SENIOR HIGH SCHOOL	28	56
Bachelor	4	8
Mother's Last Education		
JUNIOR HIGH SCHOOL	15	30
SENIOR HIGH SCHOOL	29	58
Bachelor	6	12
Parents' Income (Salary).		
<500,000	11	22
500,000 to 1,000,000	22	44
1,000,000 to 2,500,000	9	18
2,500,000 to 5,000,000	8	16
Mother's Meal Preparing Habits		
Bad	1	2
Currently	48	96
Good	1	2
Type of Food Mother Prepares		
Not varied	15	30
Variative	35	70
Amount Portion Food		
Not enough	1	2
Enough	24	48
Good	25	50
Meal Schedule		
Irregular _	1	2
Enough Regular	21	42
Regular	28	56

Table 5.1 shows that the characteristics subject study dominated by children with type sex man as many as 28 people (56%), children with range aged 31 to 40 months as many as 15 people (30%), children with current weight between 10 to 12 kg as many as 26 people (52%), children with current height between 71 to 80 cm as many as 21 people (42%), children with birth weight between 6 to 7 kg as many as 31 people (62%), children with birth length between 46 to 50 cm as many as 34 people (68%), father's age between 31 to 35 years as many as 14 people (28%), age Mother between 26 to 30 years as many as 20 people (40%), the father's job is as employee private as many as 27 people (54%), work Mother as Mother House ladder as many as 44 people (88%), education The last father was high school with 28 people (56 people), education final Mother namely high school as many as 29 people (58%), income parent between Rp. 500,000 to Rp. 1,000,000 as many as 22 people (44%),

total mother who has habit quite good at preparing food for children as many as 48 mothers (96%), total mother prepared variation food for children as many as 35 mothers (70%), total mother gave it amount portion good food for children as many as 25 mothers (50%), and total mother does it in a way regular timetable Eat child as many as 28 mothers (56%).

2. Analysis Results Univariate

Table 2 shows descriptive statistical test results for each variable among them mean, standard deviation, minimum, and maximum to measure both independent variables with a scale continuous variable behavior picky food (picky eating) shows that the mean and SD values are 0.96 ± 0.198 with mark lowest 0 (no picky food (picky eating) and value highest 1 (picky food). Variable incidences of stunting in children and toddlers show that the mean and SD values are 0.92 ± 0.298 , with a mark of lowest 0 (no stunting) and a value of highest 1 (stunting).

Table 2 Description Variable Study

No.	Variable	N	Mean	SD	Min	Max
1.	Behavior Be Picky Food (<i>Picky Eating</i>)	50	0.96	0.198	0	1
2.	Incidence of Stunting in Children Under Five	50	0.92	0.298	0	1

Table 3 shows results univariate from the study. This shows that the behavior of picky food (picky eating) is shared into 2 categories: yes and no. According to the data obtained, up to 48 children (96%) demonstrated picky eating behavior. The

incidence of stunting in children and toddlers is divided into two categories: yes and no. Based on the data above, as many as 46 children (92%) experienced stunting conditions at the age of a toddler.

Table 3 Description of Research Variables Based on Categorical Data

Variable	Category	N	Percentage (%)
Behavior Be Picky Food (<i>Picky Eating</i>)	Yes	48	96
	No	2	4
Incidence of Stunting in Children Under Five	Yes	46	92
	No	4	8

3. Analysis Results Bivariate

Based on analysis bivariate tested using IBM SPSS Statistics 29.0.1.0, the linear

regression test results show level significance in the ANOVA table (Sig.) 0.004 where $p \text{ value} \leq 0.05$, so can meaning

H_a accepted and there is influence behavior picky food (picky eating) to incident

stunting at age toddlers in Tirtomoyo, Wonogiri.

Table 4 Effect Analysis Results from Behavior Be Picky Food to Stunting Occurrence in Children Under Five

Variable	Number (N)	Significance
Behavior Be Picky Food (<i>Picky Eating</i>)	50	0.004
Incidence of Stunting in Children Under Five		P<0.05

Source: IBM SPSS Statistics 29.0.1.0

To see big strength influence, based table model summary obtained mark correlation/relationship (R) is 0.405. From the number, the obtained coefficient

determination (R square) is 0.164, which contains an understanding that strength of influence is 16.4%.

Table 5 Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.405 ^a	.164	.147	.183

a. Predictors: (Constant), Stunting

DISCUSSION

The aims study is know the influence of picky eating behavior on the incidence of stunting in children. This study was carried out in Tirtomoyo, Wonogiri. The size sample used is child toddlers who experienced or allegedly experienced stunting. Amount respondents >30 children make this study not requires a data normality test. The variables in this study are nominal in size with numerical data type. Hypotheses in this research is the test used to know the influence between two variables on a scale and the researcher uses a simple linear regression test.

This study is done on child toddlers who experience or allegedly experience stunting in the Tirtomoyo, Wonogiri. Based on the 50 respondents studied, 48 children (96%) had the behavior of picky food (picky eating), and 2 children (4%) did not have the behavior of picky food (picky eating). Whereas the incidence of stunting in children was highest in toddlers, as many as 46 children (92%) and as many as 4 children (8%) did not experience stunting incidents.

The test results use a simple linear regression test to show level significance in the ANOVA table (Sig.) 0.004 where p value ≤ 0.05, so can be interpreted as H_a accepted and exists influence behavior picky food (picky eating) to incident stunting at age toddlers in Tirtomoyo, Wonogiri. To see the strong influence, a table model summary is obtained, with a mark correlation/relationship (R) of 0.405. From the obtained coefficient determination (R square) is 0.164, which contains the understanding that influence picky eating behavior against the incidence of stunting in children amounted to 16.4%.

Based on the results of the research that has been done, it is known that the behavior of picky eaters can influence the incidence of stunting in children. This matter follows the opinion of Pebruanti and Rokhaidah (2022) in their research entitled "The Relationship between Picky Eating and Incidents of Stunting in Preschool Children at Kindergarten A Nurul Huda Tumaritis Bogor Regency". This study states that there is a connection between picky eating and with incidence of stunting in children in preschool at Kindergarten A Nurul

Huda Tumaritis Bogor Regency (results analysis with the chi-square test was obtained p value = 0.023). The study is also in line with research conducted by Nurmalasari, Utami, & Perkasa (2020) entitled "Picky eaters and stunting in children aged 2 to 5 years in Central Lampung, Indonesia", where statistical test results showing that $p = 0.000 (<0.05)$ which means there is a connection between picky eating with stunting in toddlers in Central Lampung.

Kamumu and Rakay (2023), in a study titled "Relationships: Picky Eating with the Incidence of Stunting in Children Aged Preschool in Lau, Maros" show that the chi-square test result is $\rho = 0.001$, which is significant because there is a picky eating relationship with stunting incidents. Next, the odds ratio test obtained an OR value of 43 (CI 95%), which means picky-eating children own 43 times the odds of experiencing stunting.

According to Biswas (2022), at Mitford Hospital, Dhaka, 30% of children who eat picky food have a low nutritional status compared with children who don't eat picky food, so that matter is what causes it; child picky eating (choosy food) is at risk of stunting. Nadhirah & Taufiq (2021) said picky children have a high food risk of malnutrition along with increased age. If not handled well, it will cause new problems, such as stunting. This can be identified early by measuring the nutritional status of children who are picky eaters to avoid malnutrition.

CONCLUSION

The results of this study show that there is an influence of picky eating behavior on the incidence of stunting in toddlers in Tirtomoyo, Wonogiri, with a strength of influence is 16.4%.

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