# MIDWIFERY CARE FOR DRIWTH AND DEVELOPMMENT OF TODDLERS WITH STUNTING AT WOLIO CENTER

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**ARTICLE INFORMATION**

Received: 15 March 2025
Revised : 20 March 2025
Accepted: 30 April 2025
DOI:

**KEYWORDS**

*Midwifery Care; Growth and Development; Stunting Toddlers*

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**A B S T R A C T**

*Background:Stunting is a state of malnutrition caused by low nutritional content in the body for a long period of time, namely the first 1,000 (thousand) days of life, namely from the fetus to a two-year-old baby, this is caused because the The content of the food consumed is notin accordance with nutritional needs. Objective:Able to provide midwifery care for growth and development in toddler "M" aged 2 years and 3 months with stunting at the Wolio Health Center. Methods: Case study with a descriptive approach using 7-step variation and SOAP intervention methods. Subject: What was taken in this case was on Toddler "M". Result: From this research, it was obtained in toddlers "M", that is, no problems were found when overcoming cases with stunting. When overcoming cases with stunting in toddlers "M", namely improving parenting in toddlers. In addition, foods that contain high levels of animal protein, encourage mothers to maintain the cleanliness of their toddlers and clean water sanitation. Conclusion: The toddler's condition was good, as proven by TTV within normal limits, and the results of the case study , obtained using varney's 7-step management and documentation in the form of SOAP from visits 1 to 3, were all normal and without complications.*

## INTRODUCTION

Especially in developing and poor countries, stunting - a condition in which a child's body is shorter than his height - is one of the global dietary problems. Stunting is one of the health problems in Indonesia. Malnutrition from when a child is in the womb until the age of two is the cause of this disease.(Gaffar, Muhaemin B and Asri, 2021). Stunting is a developmental disorder caused by inadequate psychosocial simulation, frequent illness, and poor nutrition, according to the World Health Organization (WHO). inadequate mental modeling. A child is considered stunted if his or her height is more than two standard deviations below the WHO-determined median for child growth.(Handayani, 2023).

Stunting is a state of malnutrition caused by low nutritional content in the body over a fairly long period of time, namely the first 1,000 (one thousand) days of life, namely from the fetus to the age of two years, this is because the content of the food consumed does not match nutritional needs.(Handayani, 2023)

Posyandu plays an important role in community recovery and care. Health education is one of the programs offered by Posyandu. Health education is an activity to educate the community by providing knowledge so that they are aware, understand, and willing to follow the recommendations given. Health education aims to modify behavior in the target population, both individuals and groups.(Kurniawan et al., 2023)

Although there are gaps in Indonesia in terms of access to balanced and nutritious food, the main cause of stunting is a lack of nutritional intake in the first 1000 days of a child's life. In the first 1000 days of life, the brain and body grow rapidly, starting from pregnancy and continuing until the child is two years old. At this age, a child's ability to get enough nutrition is very important for their development. Lack of knowledge about nutrition can impact the ability of families and communities to provide healthy food for their members. This requires not only an understanding of nutrition, but also an appreciation of its importance for the body's needs.(Handayani, 2023)

Children who experience stunting are still seen in Baubau, especially in Wolio District. In Wolio District, stunting mainly affects children aged between 12 and 59 months. Based on the results of interviews with nutrition officers from the Wolio Health Center, inappropriate feeding patterns by mothers are the main cause of stunting in the community. This eating behavior is related to the fact

that toddlers do not receive food that is suitable for them or in amounts that suit their needs.(Baptista et al., 2018)

Anemia resulting from inadequate dietary intake is very common in low- and middle-income countries, where mineral, vitamin, and protein deficiencies are the main causes of anemia.(Risnawati et al., 2024)

Children are negatively impacted by stunting. The short-term negative impacts of stunting include poor physical growth, decreased IQ, impaired brain development, and changes in body metabolism. On the other hand, long-term stunting will cause decreased cognitive function, learning achievement, immunity, risk of obesity, and high susceptibility to degenerative diseases such as diabetes mellitus, heart and blood vessel disease, cancer, stroke, and disability, as well as decreased productivity as adults. Impaired growth and decreased intellectual capacity are risks associated with stunting.(Ramdhani, Handayani and Setiawan, 2020)

Stunting in toddlers is often characterized by a number of symptoms, including dry skin, abnormal weight, weak body, and suboptimal development. Stunting in toddlers can be caused by various things, including socioeconomic status, vitamin deficiencies, and poor nutritional intake. The low socioeconomic status of the family can be seen from the mother's lack of knowledge about diet, family income, and parental education.

Stunting toddlers were found during an investigation at the Wolio Health Center in Baubau City. Stunting can be caused by low birth weight, inadequate food intake (children are picky eaters), poor parenting, low family income, and lack of parental education, etc.

Based on the background description above, we found a toddler "M", after being measured, toddler "M" aged 2 years 3 months with BB: 11.4 kg, TB: 88.5 cm, the toddler's mother complained that her child's BB had not increased since December 2023 to April 2024, and an interview with the toddler's mother said that her toddler was diagnosed with stunting since the age of 1 year. With the title "Midwifery Care for Growth and Development in Toddlers with Stunting at the Wolio Health Center, Baubau City in 2024", the author is interested in compiling a Final Assignment Report.

## METHODOLOGY

This final project report is written using a case study approach that uses Varney's seven phases and the SOAP intervention method as a descriptive approach. In essence, a case study is an in-depth investigation of one or more important events that occur.

Helen Varney stated that the management of midwifery care and midwifery care used in this study consisted of: evaluation in SOAP format, both subjective and objective, identification of the diagnosis of actual problems, identifying possible problems, determining urgent needs, organizing interventions, implementing them, and assessing the results.

## RESULT AND DISCUSION

### Subjective Data

Toddler “M” aged 2 years 3 months, the 4th child of Mrs. “Y” who works as a housewife and Mr. “A” who is a motorcycle taxi driver who is married.± 9 years old, comes from the Buton-Makassar tribe, is Muslim and lives together in kilo1.

Biological data shows that Mrs. "Y" said she wanted to have her toddler checked with complaints that her toddler's weight had not increased from December 2023 to April 2024, the mother said that her toddler was diagnosed with stunting since the age of 1 year, and the mother said that she was rarely at home because she was working.

From the mother's pregnancy history, the mother has 5 children who have never had a miscarriage before and the toddler "M" is the 4th child. The mother said that on February 25, 2021, the mother had five pregnancy check-ups at the Health Center with HPHT. The mother has never experienced excruciating stomach pain during pregnancy, the mother has never used drugs without a doctor's prescription, and the mother has a history of stomach/ulcer disease.

In the current birth history, toddler "M" was born on December 29, 2021 at: 21.50 WITA with a back of the head presentation, the baby immediately cried. The birth took place normally with a male gender, BB: 3600 kg, PBL: 48cm at Siloam Hospital, Baubau City and assisted by a midwife.

Fulfillment of basic needs of Toddler “M” includes aspects of nutrition, elimination, personal hygiene, and rest. Toddler “M” consumes food with a frequency of eating 2 times a day and drinks 8 glasses a day. Elimination patterns show a frequency of defecating 1 time a day and a frequency of

urinating 4-5 times a day. Personal hygiene of toddler “M” includes bathing twice a day. In terms of rest, toddler “M” takes a nap from 14.00-16.00 WITA, and sleeps at night from 20.00-06.30 WITA.

On May 27, 2024, a re-examination was carried out with the results obtained through a visit to the integrated health post, namely that the weight and height of toddler "M" had changed from BB: 11.4 grams to BB: 13 kg and TB: 88.5 cm to TB: 90.1 cm, as well as changes in eating patterns and parenting patterns for toddlers for the better.

**Objective Data**

On February 30, 2024, a physical examination was carried out on toddler "M" at the Wolio Health Center Posyandu.It was found that the general condition of the toddler was good, his awareness was compos mentis,The toddler's weight is 11.4 kg with a height of 88.5 cm and an upper arm circumference (MUAC) of 15 cm, the Body Mass Index (BMI) is calculated as 13.4,on examination vital indicators (36.5°C, 40 breaths per minute) were within the normal range.

Observation, palpation, auscultation, and percussion methods were used in the physical examination. No lumps/masses were found on the head examination. The face showed no lumps or swelling. The eyes were symmetrical from left to right with pink conjunctiva and scleral fibers without abnormal icterus, and the nose had a septum in the middle, there were 2 nostrils, clean and no abnormalities. The mouth and teeth were in good condition, the lips had no abnormalities, were reddish, and the gums were red. The ears showed no abnormalities, hearing was good with left and right symmetry. There were no lumps on the neck and no enlargement of the thyroid gland. On abdominal examination, no surgical wounds were found and no lumps were palpable. Examination of the genitalia looked clean and the anus had no abnormalities.

On April 24, 2024, a physical examination was carried out on toddler "M" at his home withThe toddler is in good overall condition. Consciousness compos mentis, with vital signs remaining within normal limits. The examination results showed a body weight of 11.4 kg, height 88.5 cm, chest circumference 48 cm, abdominal circumference 42 cm, upper arm circumference 15 cm, and body mass index (BMI) of 13.4.

On May 27, 2024, a physical examination was conducted on toddler “M” at the Wolio Health Center Posyandu with the general condition of the toddler being good. Consciousness is composmentis, and is indicated by vital signs still within normal limits. The results of the examination showed changes in body weight from 11.4 kg to 13 kg and height from 88.5 cm to 90.1 cm.

**Analysis**

Toddler “M” aged 2 years 3 months with stunting.

**Management**

On February 30, 2024 at 09.00 WITA, a mother brought her toddler to undergo various health services. First, explaining to the mother that stunting is a developmental disease caused by chronic malnutrition in toddlers, providing an explanation to the mother of the toddler regarding the impact of stunting, a balanced nutritional menu, and telling the mother to always bring her toddler to the integrated health post. Providing additional food such as cassava to increase nutritional intake

On April 24, 2024 at 10.30 WITA, monitoring of the two care provided was carried out, namely conducting a weighing examination and measuring height with BB: 11.4 & TB: 88.5, explaining to the mother about the meaning of stunting, the impact of stunting, a balanced nutritional menu for her toddler, and telling the mother to continue taking her toddler to the integrated health post so that their growth and development can be monitored.

On May 27, 2024, monitoring of the three types of care provided at the integrated health post was carried out, namely conducting a general examination by measuring the height and weight of toddlers, advising mothers to pay attention to their toddlers' eating patterns, advising mothers to always provide food containing animal protein to their toddlers, always maintaining the cleanliness of their toddlers and clean water sanitation and always bringing their toddlers to the integrated health post every 25th of the month.

## DISCUSSION

### Subjective Data

Toddler"M" aged 2 years and 3 months was brought by his mother to the integrated health post. The toddler's mother complained that her toddler's weight had not increased from December 2023 to April 2024. The mother said that her toddler was diagnosed with stunting since the age of 1 year and the mother was rarely at home because she was working.

Long-term malnutrition can lead to stunting, a growth problem that affects toddlers and can start during pregnancy and last up to 24 months of age. A common indicator is slowed growth in children, especially toddlers. Stunting not only inhibits physical growth, but also inhibits the development of the child's mind, body, and intelligence. It will be very difficult to catch up with a child who has been diagnosed with stunting as a toddler, and this situation will continue until the child reaches adulthood. This does not eliminate the possibility of a child being born underweight, even if the parents have children in the future. The Ministry of Health of the Republic of Indonesia defines stunting as a condition in which a child's height is(Rochmatun Hasanah, Fahimah Aryani and Effendi, 2023)

The incidence of stunting in toddlers is influenced by parental parenting patterns. Children's growth and development are greatly influenced by the interactions that occur between children and parents when they care for their children. The mother's ability to provide sufficient food for her children, along with other factors such as family income, education, behavior, and number of siblings, all affect the nutritional status of children. Stunting is a problem supported by data from various studies that show a high correlation between the incidence of stunting in toddlers and maternal parenting patterns, as well as the strong impact of stunting on children's cognitive development.(Adha et al., 2021)

Toddler "M" with a weight condition that has not increased from the previous month, poor parenting patterns indicate that there are causes of stunting in toddlers. In addition, poor parenting patterns result in toddlers' eating patterns and nutrition not being maintained and fulfilled properly.

Children under the age of five can suffer from stunting for various reasons. In this case, there are two categories of causes that contribute to stunting: direct factors and indirect factors. Infection, inadequate food, premature pregnancy, inadequate feeding, and non-exclusive breastfeeding are direct causes. Meanwhile, socio-cultural aspects, environmental sanitation, health services, and education are indirect causes.(Nasution and Susilawati, 2022)

The characteristics of stunting according to(Esha, Mubin and Hakim, 2023)namely low height; children who experience stunting usually have a shorter height than children of the same age. linear growth caused by ongoing malnutrition. Children who experience stunting often have a lower body weight than the average child of the same age, in addition to having a shorter height. Delayed physical development is something that may occur in children who experience stunting. For example, the growth of muscles and other body structures is hampered. Cognitive disorders are disorders that affect a person's capacity to think, remember, learn, speak, and interact. Children who experience stunting are more vulnerable than children in general. Children who experience stunting usually have less energy and do less physical activity, which can impact their productivity and quality of life in the future.

About 38 grams of carbohydrates per 100 grams of cassava, or about 12% of its weight, are found in this vegetable. It is important to understand that the body uses carbohydrates as its primary source of energy to perform a number of important tasks, including breathing, maintaining heart function, and supporting muscles. Carbohydrates are also needed for daily work and other physical activities such as sports..(Minarti, Ernita and Argaheni, 2024)

Stunting is usually caused by inadequate nutritional intake during the first 1,000 days of life. The fetus is the beginning of the 1,000-day count, which continues until the child is two years old. Age two, or the first 1,000 days of life, is a significant time for developmental abnormalities, including short stature, and this is when stunting problems appear in children.(Sahroji, Hidayat and Nababan, 2022)

1000 HPK, or “1000 Days of Life Movement,” was initiated by the Indonesian government. Improving children’s physical and cognitive development is crucial during the 1000 Days of Life (HPK), which begins from conception to age two. Various studies have shown that children’s development does not end in the first two years of life. If the government only focuses on the 1000 HPK program without considering the children’s subsequent development, then other nutrition problems will emerge after the program ends. In conclusion, to improve outcomes, policymakers in

Indonesia must work together to address nutrition challenges in a sustainable and continuous manner.(Indah Yun Diniaty R and Arisna Kadir, 2022)

Stunting can be prevented with various strategies, including educating people involved in stunting prevention, such as cadres, mothers with young children, pregnant women, and women of childbearing age or unmarried women who are prospective mothers. There are many ways to educate the community, including training, lectures, and counseling. Stunting prevention can also be done by empowering mothers of toddlers by forming study groups that will be a place for independent learning and discussion among mothers of toddlers, accompanied by health facilitators. Stunting can also be prevented by providing toddlers with additional food that has basic elements that are easily obtained in the surrounding environment, such as moringa oleifera or kelor plants.(Rahmi Fitri, 2022)

Overall, the data shows that toddler "M" is healthy and stable, the need for improvement in good eating patterns on the nutritional needs of toddlers is maintained. However, continuous monitoring of parenting patterns of parents towards their toddlers is needed to ensure that nutrition, hygiene and also clean water sanitation are met properly. One of the indirect causes of stunting problems is the socio-economic status of the family, which is influenced by the level of education of the parents. The higher the education of the parents, the more likely the parents can earn enough money to live in a decent and healthy environment, but parents who have better jobs will always be busy with their jobs and therefore tend not to be interested in helping their children when they really need it.(Sapriatin and Sianturi, 2021)

**Objective Data**

Based on the results of the examination of toddler "M" at the Wolio Health Center Posyandu, it was found that the general condition of the toddler was good. Composmentis awareness showed that the toddler was fully conscious and able to interact well during the examination. There was a weight loss of 11.4 kg from December 2024 to April 2024. Weight is one of the factors that plays an important role in a child's growth and development. According to(Juniah and Wulandari, 2024)It is stated that the ideal weight based on the child's age is 1 year for male toddlers (7.7-12 kg) and female toddlers (7-11.5 kg). 2 years old for girls (9-14.8 kg) and boys (9.7-15.3 kg). 3 years old for girls (10.8-18.1 kg) and boys (11.3-18.3 kg). Male toddlers (12.7-21.2 kg) and girls (12.3-21.5 kg) at the age of 4 years. 5 years old for male toddlers (14.1-24.2 kg)

After the examination, it was found that there were causes of toddlers experiencing stunting, namely lack of nutritional intake, family socio-economic status such as family economic income and parental education. A dry body, non-ideal body weight, a weak body, and suboptimal development are some of the symptoms often shown by toddlers with stunting. Stunting in toddlers is caused by various variables, including socio-economic factors, toddler characteristics, and inadequate intake of vitamins and nutrients. Family socio-economic status, including parental education, family income, and limited maternal nutritional knowledge(Sapriatin and Sianturi, 2021)

According to (Indah Prasasti and Normawati, 2023),There are sixteen signs of stunting in toddlers. These symptoms include short and very short toddlers, toddlers who do not receive exclusive breastfeeding, toddlers with poor eating habits, frequent illnesses, comorbidities, low family economic status, inappropriate weight gain, short mothers, mothers in special economic zones, mothers with anemia, irregular use of pregnancy supplements, environmental health in slum areas, incomplete toddler immunization, worms, and motor and cognitive disorders.

Overall, the examination results showed that the toddler was in a healthy condition. Comprehensive physical examination and monitoring of vital signs are very important in ensuring the health of toddlers, as supported by obstetric literature that shows the importance of routine and comprehensive toddler growth and development examinations.

**Analysis**

In this situation, the analysis is based on objective and subjective data collected, namely toddler “M” aged 2 years 3 months with stunting. Being shorter than other children of the same age is known as stunting. Chronic (long-term) nutritional deficits that cause stunted growth are called stunting. Stunting can be identified by comparing height or length with age (PB/A or TB/A). Toddlers are one of the demographic groups at risk of stunting.(Fauziyah et al., 2023)

**Management**

Based on the results of the analysis and evaluation set of subjective and objective data or actions in accordance with the standard operating procedures for midwifery at the Wolio Health Center, the midwife has the authority to manage the case Based on the description above, the treatment plan for toddler "M" with stunting includes providing additional food and providing high levels of animal protein.

On the first visit on February 30, 2024 at 09.00 WITA at the Wolio Health Center Posyandu, one of the educations given to mothers for toddlers was to explain to mothers the meaning of stunting, explain to mothers the impact of stunting, a balanced nutritional menu and tell mothers to bring their toddlers to the posyandu to monitor their growth and development. The mother understood what was explained and would do what was suggested.

The second visit was at the home of toddler patient "M" on April 24, 2024 at 10.30 WITA. The care provided was to the mother about the meaning of stunting, the impact of stunting, a balanced nutritional menu and also advice to always bring her toddler to the integrated health post every 25th so that their growth and development can be monitored.

Increasing animal protein consumption is one of the government's initiatives. One of the best nutrients to support growth is eggs, an animal product with a protein bioavailability value of almost 100%. One egg a day can reduce the risk of toddlers experiencing stunting.(Suswati et al., 2023)

The visit of toddler “M” at the Posyandu of Wolio Health Center on May 27, 2024 at 10.30 WITA, the care provided was to inform the mother about the condition of her toddler and monitor the general condition of the toddler within normal limits. The mother must continue to pay attention to her toddler's diet, encourage the mother to give her toddler food containing animal protein, the mother must maintain the cleanliness of the toddler and also clean water sanitation, and encourage the mother to always bring her toddler to the Posyandu every 25th so that their growth and development can continue to be monitored.

## CONCLUSION

Based on the results of the anamnesis, subjective data was obtained from the patient, namely toddler "M" aged 1 year 3 months, born on December 29, 2021, brought by his mother to the integrated health post complaining that her toddler's weight had not increased from December 2023 to April 2024, the mother said that her toddler was diagnosed with stunting since he was 1 year old, the mother was rarely at home because she was working. Objective information based on examination findings showed that the patient was in general good health, with composmentis awareness, respiratory rate of 40 and 100 times per minute, temperature 36.5 ° C, BB 11.4, and TB 88.5. No anomalies were found during the physical examination; BMI is 13.4. The analysis was made based on objective and subjective data collected by toddler "M" aged 2 years 3 months with stunting. The management carried out was providing food with high levels of animal protein, improving parenting patterns and also eating patterns in toddlers.

## ACKNOWLEDGMENT

I thank motherBdn. Minarti, S.ST.,M.Keb as my supervisor I, Mrs. Bdn. Risnawati S.ST.,M.Kes as my supervisor II and Mrs. Bdn. Anita, S.ST.,M.Kes as my examiner, who have guided me to complete this Final Assignment Report as well as possible. I would also like to thank Mrs. Y as the mother of my toddler patient who was willing to be recorded and her problem was raised in the final assignment report case, as well as special thanks to my father (Usnai, SH) and my mother (Suriafa Ndawari, S.Kep.,Ners) for their prayers and support so far.

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