



## Socioeconomic Factors Associated with Stunting Among Children in Selawangi Village, Indonesia

Dzuliani Faseha<sup>1\*</sup>, Nurlaila<sup>2</sup>, Ahmad Hamdan<sup>3</sup>

<sup>1 2 3</sup> Universitas Siliwangi.

Siliwangi Street No.24, Kahuripan, Kec. Tawang, Kab. Tasikmalaya, Jawa Barat 46115, Indonesia

\* Author correspondence. Email: [dzulianifasehao1@gmail.com](mailto:dzulianifasehao1@gmail.com), Telp: +683820805191

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**Abstract:** In Selawangi Village, there were 34 cases of stunting. This study aimed to determine the socioeconomic conditions of families with stunted children in Selawangi Village. The data were collected through interviews, observation, and documentation. The data analysis method applied a qualitative descriptive method through data collection, data reduction, data presentation, and drawing conclusions. Sampling used purposive sampling. Based on the results of the study, the socioeconomic factors of families with stunted children indicated that the families are primarily from farm laborer families. The parents only attended elementary school and earned less than the regional minimum wage. They rent a house with electricity. Most of them still use traditional sanitation systems. Not all families have vehicles and cell phones. A low income will hinder a child from growing and developing optimally since their family's income mainly determines a child's nutritional intake.

Keywords: socio economy, family, stunting

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## INTRODUCTION

The family is the main educational foundation for children, as stated by (Lilawati, 2021). In this situation, parents' attitudes can help their children reach their full potential by respecting their opinions, allowing them to express themselves to the best of their abilities, and reflecting on their actions when they make mistakes so they learn from them and not repeat them. Parents are responsible for meeting their needs and welfare from their child in the womb until the child reaches maturity. The parents no longer have this responsibility only after their child is married.

Law Number 4 of 1979 concerning child welfare article 1 states that (1) child welfare is a child livelihood system that can guarantee its growth and development naturally, both spiritually, physically, and socially; (2) Child welfare efforts are social welfare efforts aimed at ensuring children's welfare, especially the fulfillment of children's basic needs, meaning that parents are the first to be responsible for the realization of children's welfare both spiritually, physically and socially.

Alwi Muliadi Wijaya (2023) explains that ideal child development is indicated by the growth and development of the children, which includes an increase in body size and the number of cells and tissues as seen from an increase in height, weight, and head circumference, as well as with sensory abilities ( the abilities to hear, see, touch, taste, and



smell), motor (fine, gross, and complex movements), communicate (smile, cry, and speak), and cognitive (ability to recognize, compare, remember, and solve problems). Growth and development go hand in hand—development results from the maturation of the central nervous system, which interacts with the body's organs. When a child's growth is slower and shorter than their age, it can be considered that their development is stunted.

The development of high-caliber, competitive human resources (HR) is one of the national development priorities in the 2019–2024 National Medium-Term Development Plan (RPJMN). Achieving goals and targets in the health sector is one of the metrics for developing excellent human resources. The frequency of stunting in Indonesia is one of the current issues. Hasanah (2018) claims that stunting is a malnutrition-related growth problem that affects children under five—following the Body Length According to Age index (PB/U) or the Height for Age index (TB/U) with a threshold (z-score) between -3 SD and -2 SD). Stunting is also characterized as a condition in which the body is short or very short. According to data from the Health Service, in 2022, there were 14.93 stunting cases in Tasikmalaya Regency. The stunting cases increased due to the prevalence of COVID-19, causing a decrease in people's income. Many employees have been laid off, so they cannot meet their economic needs.

According to statistics in 2020, the most prevalent type of malnutrition in the world is linear growth failure in childhood, which affects an estimated 165 million children under the age of five and has a high Z-score for those under 22 (more than two standard deviations below the population median). The prevalence of stunting decreased from 27.7% in 2019 to 24.4% based on the results of the 2021 SSGI, according to (Almatsier, 2001). When measured by WHO criteria, nutritional status is quite good, with stunting incidence below 20% (10.9%) and wasting below 5% (3%). The 2021 SSGI survey statistics showed that the frequency of stunting in the province was regarded as high that year and established a new record, as explained by the head of the West Java Provincial Health Office.

This study was conducted in Selawangi Village, one of the villages in Sariwangi District, under the Galunggung Mountain Plateau, West Java Province, Indonesia. Based on information from the elders of the residents, Selawangi Village was founded in 1982. Selawangi Village was a division of the village that occurred on May 26, 1982. The village in the Sariwangi District, Tasikmalaya Regency, has an area of 239,475 Ha with a population of 4,307 with administrative area boundaries. Judging from Selawangi Village's soil culture, it generally is in rice fields and land, 600 M above sea level, with an average temperature of 27°C.

The researcher made initial observations by interviewing the stakeholders, obtaining information that Selawangi Village had several economic and social factors problems. The majority of the people there still apply the traditional sanitation system. Toilets are often placed above fish ponds. Human and livestock waste may be collected manually and put in fish ponds. These issues are the reasons for stunting cases in Selawangi Village. Low socioeconomic status will create many gaps. Families do not fulfill micro and macronutrients for the children. This stunting problem needs to be examined in more depth. It should be evaluated how the socioeconomic conditions of families with stunted children in Selawangi Village are based on statistical data of stunting cases in Sariwangi District.

In 2022, there were 178 cases of stunting in the Sariwangi District. The data were obtained from the Sariwangi Public Health Center with the following details. In Sinarsari Village, there were 18 cases of stunting. In Linggarsina Village, there were 29 stunting cases. In Selawangi Village, there were 34 stunting cases. In Sariwangi Village, there were 28 stunting cases. In Jayaputra Village, there were 22 stunting cases. In Village Jayaratu, there were 12 stunting cases. In Sukamulih Village, there were five stunting cases. In Sukaharja Village, there were 30 stunting cases. Thus, Selawangi Village became the village with the highest number of stunting cases in Sariwangi District.

The data are presented in Figure 1.

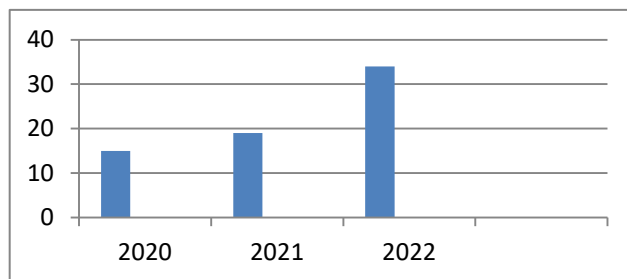


Figure. 1 Number of Stunting Cases in the last three years in Selawangi Village

Figure 1 shows the number of stunted children in Selawangi Village in the last three years, from 2020 to 2022. The data were obtained from the Sariwangi Puskesmas with the following details. There were 15, 19, and 34 stunting cases in 2020, 2021 and 2022 respectively. The highest number of stunting cases in Selawangi Village is in 2022.

By looking at the problems obtained in the field, the construction of socioeconomic conditions in Selawangi Village is the main factor in stunting cases. Stunting is a problem currently being discussed in the world.

By looking at the tendency already existing in the field, the construction of socioeconomic conditions in Selawangi Village is the main factor in stunting cases. Stunting itself is crucial to eradicate because it determines the quality of the next generation. It will decrease productivity in adulthood and increase the risk of other diseases. Family income levels also significantly impact socioeconomic aspects. If family access to food is disrupted, children's welfare will not be met, as in Selawangi Village. Socioeconomic factors are also strongly influenced by the level of family income. Suppose the access to food in the family is disrupted. In that case, child welfare cannot be fulfilled, as happened in Selawangi Village, where most of the people's jobs are laborers and farmers, and the level of education is still low. With the background that has been explained, the author is interested in researching the socioeconomic factors associated with stunting among children in Selawangi Village, Indonesia.

## METHOD

This study used a descriptive qualitative method to explore in depth the socioeconomic conditions of families with stunted children in Selawangi village. Descriptive methods were used to describe socioeconomic factors related to families with stunted children in Selawangi Village. Researchers collected data from interviews and observation documentation. The methods were selected because they can get in-depth and direct information to answer the formulation of the problem. The objective of this study is to determine the socioeconomic conditions of families of stunted children in Selawangi village, with a total of 7 respondents. The respondents include five families of stunted children, nutritionists in the Sariwangi sub-district, and the chairman of the KPM (Human Development Cadre). Accurate data sources are required to get complete and clear information.

This study started from February to April and is located in Selawangi Village, Sariwangi District, Tasikmalaya Regency. The qualitative research approach through descriptive methods was used to describe the socioeconomic factors of families with stunted children in Selawangi Village through in-depth interviews with informants to produce accurate and complete data.

Formulation of the problem	Research focus	Indicator	Data source	instrument
What is the socioeconomic condition of the families with stunted children in Selawangi Village?	Family socioeconomic factors	Work	Families of stunted children, nutritionists, and heads of Human Development Cadres (KPM)	Observations, Interviews, Documentation
		Education		
		Income		
		Valuables		
		Social position		
		Environment		
		Stunting		
	Parenting			
	Sanitation			

Table 1. the detail of collecting data

## RESULT AND DISCUSSION

A person's socioeconomic status is their position or place in society. A person's socioeconomic status is described in terms of their condition in society or when society is evaluated from a socioeconomic perspective, such as income, educational level, and other factors. Parents' income will support the growth and development of children because they can meet all of their children's primary and secondary needs.

### A. Work

According to preliminary research, most families with stunted children work as farmers, farm laborers, casual workers, daily workers, and odd jobs because there is no other choice, and it has been passed down from generation to generation. According to Mulyanto Sumardi and Hans Dieter Evers (In Hasanah, 2018), there are five categories of work in Indonesia, which can be divided as follows: (1) Civil Servants, (2) Private Workers, (3) Traders, (4) Farmers and Fishermen and (5) Laborers.

Thus, based on the findings in the field, the researcher concludes that family work with stunted children is dominated by farmers, farm laborers, casual daily workers, and odd jobs with a low income compared to other types of work. This shows that parents' occupation determines the family income level of stunted children. Low family income will affect the family's ability to make ends meet. Sufficient family income will enable them to buy nutritious food. This aligns with research from (Trinaswati, 2016)) that individuals with moderate income often buy low-carbohydrate foods rather than protein foods because they are more affordable and have fewer calories.

The researcher concluded that the parents' work, especially the father of the stunted children, was dominated by farmers and farm laborers. This was supported by Tamimah Humairah's research (2021), which stated that other people's work dominated the socioeconomic factors that influenced the incidence of stunting. Parents are farmers in the Bontonompo sub-district, Gowa district, South Sulawesi Province, where most of the community's work is farming.

### B. Education

According to the Bommer study (2019), children with low socioeconomic status accounted for 50.3% of stunting cases, while children with high socioeconomic status

contributed 29.2%. Malnutrition in children arises due to intrauterine growth retardation, which tends to develop in high socioeconomic class families. This is supported by the research results of Hairil Akbar Maulindi Ramli (2022), which shows how socioeconomic factors, especially the mother's education, affect the prevalence of stunting at 6 to 59 months in Kotamobagu City. As a result, mothers with lower education have stunted offspring than mothers with higher education. Best parenting practices to ensure children's nutritional needs are met by using food from local sources to prevent stunting.

Thus, most of the education attainment of the Selawangi Village community, seen from the data obtained, is elementary school graduates. Families of stunted children in Selawangi Village vary, starting from graduating from primary school, junior high school, and senior high school. As a result, parents with low education impact parental knowledge regarding healthy eating and good parenting patterns, thereby increasing the risk of stunting. Following the results of research conducted by Notoadmodjo (2003), the level of education significantly affects a person's ability to quickly receive information or knowledge, supported by the fact that it is easier for someone to carry out their duties and responsibilities the more educated they are. On the other hand, it is increasingly difficult for someone with less education to do it.

#### **C. Income**

Income is significant in a family for fulfilling short-term and long-term needs. It can be seen from the money earned for one month. The most significant stunted children's family income is around IDR 2,000,000. The income of families with stunted children in the village of Selawangi tends to be relatively low. Thus, it cannot optimally fulfill the family's needs, following (Sulistyoningsih, 2011), who revealed that a decreased income would reduce the ability to buy food with the same amount and quality. Gains in income will increase the opportunity to do so because they can meet their children's primary and basic needs. Parents with high incomes will support the growth and development of their children by fulfilling child nutrition. Family's financial position significantly impacts food consumption, especially for people in poverty who use most of their income to meet food needs.

Parents with high incomes will support the growth and development of their children by ensuring their children's nutrition. In contrast, parents with low incomes will hinder the growth and development of their children by limiting their ability to buy food in the same quantity and quality. According to data from the Central Statistics Agency (BPS) for 2008, the population's income was divided into four groups: the very high-income group, which has an average monthly income of more than Rp. 3,500,000 per/month high-income group, which has an average income of Rp. 2,500,000 – 3,500,000 per/month, the middle-income group with an average monthly income of IDR 1,500,000–2,500,000, and the low-income group with an average monthly income of less than IDR 2,500 .000.

Thus, the researcher can conclude that the income of families with stunted children is still relatively low because the highest income is Rp—2,000,000 per month (low group). According to Sulistyoningsih (in Ngaisyah, 2015), there are more opportunities to buy quality and quantity food higher. This is in line with Kuntari K's research (2013), which found that low income is a factor causing stunting, and continuing poverty makes families unable to feed their family members properly. According to the research hypothesis, the low economic status of stunting families in Selawangi Village is caused by the parents' work as farmers and laborers, and on average, they do not have a fixed income, the amount of which depends on the harvest.

#### **D. Possession of valuables**

Data on ownership of valuables showed that the three families have their own houses, and two families do not have their own houses. In the opinion of Kaare Svalastoga (In Sumardi, 2004), One way to assess a person's socioeconomic status is to look at their living situation, including whether they own or rent their house, whether they live alone or with their parents, how physically healthy they are, and whether their house is made of solid materials such as wood or bamboo. Families with moderate to low socioeconomic status usually use semi-

permanent or temporary housing, while families with high socioeconomic status usually live in permanent residences. In general, higher socioeconomic status is associated with larger houses.

This is supported by the opinion of Gunawan (2000), who lists the general characteristics of low socioeconomic families, such as initially living in a rented or owned house. However, the conditions are still very simple because they are made of wood, not stone. Both families have more than five dependents or breadwinners who are no longer productive, especially those 60 years old and sick. According to research findings, the stunting rate in Selawangi Village has nothing to do with the house's condition.

#### **E. Energy Sources**

It is said that using electricity is far more practical than using manual or traditional fuel. Six families with stunted children use electricity for lighting, and one still uses traditional cooking methods (firewood). This is in line with the research of Hosier and Dowj (1987) that household energy consumption increases when family income increases. The energy power hypothesis is based on the assumption that lower-class people will depend more on firewood and other biomass fuels to maintain their living standards. Financial and drug factors influence other factors and families. The findings showed that this energy source does not significantly affect stunting cases in Kotabangu.

#### **F. Environment**

Implementing clean and healthy living behavior in families of stunted children is quite good in terms of implementing habits in children, such as washing hands before eating and others. However, an unhealthy environment can be seen from the findings of field observations that still apply the traditional sanitation system because they do not have a septic tank. Four families do not have a septic tank, and one has a septic tank, so they still apply the traditional sanitation system. Toilets are often placed above fish ponds. Human and livestock waste may also be collected manually and put in fish ponds, and unfortunately, the family consumes the fish. According to Maharendrani (2017), a good latrine is a latrine that is far from the reach of animal vectors. A latrine should have a septic tank at a distance of at least 11 meters, be odorless, and be simple to use. Based on observation findings, it is known that families with stunted children do not have a septic tank. This is because some respondents still use traditional latrines, which result in disease transmission (Rokhman et al., 2018). Human waste is a severe problem separate from environmental health. Proper disposal is an essential requirement for health. Careless disposal of waste products has the potential to cause disease and environmental pollution that is not good, causing the risk of illness, one of which is stunting (Rasyidah, 2019).

This is in line with Feni Adriany's research (2021). Based on the results of calculations using the Chi-Square statistical test, the value is 0.027 less than alpha 5% (0.05) OR 0.341, meaning that mothers who do not wash their children's hands have a risk of suffering from stunting of 0.341 compared to mothers who wash their hands with soap and running water, this shows that there is a significant relationship between the mother's habit of washing hands and clean and healthy living behavior with the incidence of stunting. Similar research was conducted by Dewa Nyoman Supariasa (2019), reporting that access to clean water and family sanitation has a vital role in the health of family members. A dirty water supply or poor sanitation practices make family members more prone to illness, especially young children and newborns whose immune systems are still developing. The factors that the researchers analyzed in this section are clean water sources, places for defecation, ventilation, and the occasional position of livestock. So, the environmental sanitation factor has the potential to be a stunting risk. The socioeconomic condition of the family has a significant impact on children's growth and development. Socioeconomic problems, including poor access to sanitation facilities and clean water sources, place stunting at considerable risk (Rahayu et al., 2018)).

### G. Dietary Habit

Irregular eating patterns can be seen in the children's meal schedule. The meal schedule is two times a day without vegetables and fruits to complement children's nutrition. Many continue to add flavor enhancers to every meal that kids eat, which lowers their level of nutritional adequacy, and do not implement exclusive breastfeeding. This is in line with research conducted by Aridiyah et al. (2015) concerning the factors that influence the incidence of stunting in children and toddlers in urban and rural areas, showing that the factors that influence the occurrence of stunting in children under five are mother's education, family income, mother's nutrition knowledge, exclusive breastfeeding, age of Complementary feeding for breast milk, nutritional and iron adequacy level, history of infectious diseases, and genetic factors.

Exclusive breastfeeding until the child is six months old does not guarantee that the child will be free from stunting even if someone gives breast milk, but it is supplemented with other types of food or drink, starting for babies under six months. This follows the opinion of Krisnatuti (In Ayu, 2008), which states that breast milk and crushed fruit are given to babies 1-2 times when they are 6-9 months old, and soft food can be offered once they are 9-12 months old. Children receive breast milk plus fruit 1-2 times along with soft food, and children a year old have breast milk plus fruit 1-2 times along with four or more main dishes and side dishes. Exclusive breastfeeding does not guarantee the risk of stunting if not balanced with a good diet. The same thing was expressed by Damayanti Damayanti et al., (2017)), who argued that children with a history of non-exclusive breastfeeding had a risk of stunting 16.5 times greater than children with a history of exclusive breastfeeding. Children with a history of non-exclusive breastfeeding were more at risk for stunting because this was related to the incidence of Infectious diseases such as diarrhea, which are more common in infants under six months. That way, exclusive breastfeeding for babies up to 6 months of age will affect other infectious diseases, especially stunting.

### H. Parenting

There are still many parenting practices that are not quite right, such as children being allowed to have snacks carelessly without eating rice and parents who are very ignorant when their children do not eat. Based on these results, it can be seen that the parenting style of parents with stunted children shows that most of the respondents have inappropriate parenting styles. This is because the types of food and food schedules given by respondents to their children vary, affecting the risk of stunting. Based on the research and discussion above, it can be concluded that there is a significant relationship between parenting and stunting cases among children. This is because all children's needs depend on their parents. After all, the first year of a child's life is the basis for determining habits in the following year, including eating habits. Parents must get used to giving adequate attention to children. Good attention shows good parenting. The nutritional status will be good if supported with excellent and correct feeding. Good respondents' knowledge is the main factor. Good parenting is an indirect cause.

This is in line with research conducted by Bella F.D et al. (2020) in Palembang City, which stated that there was a significant relationship between feeding habits ( $p$ -value = 0.000), parenting habits ( $p$ -value = 0.001), hygiene habits ( $p$ -value = 0.021) and the habit of getting health services ( $p$ -value = 0.000) with the incidence of stunting. This study is also in line with Putra's research, Y.D (2020) concerning the Relationship between Maternal Parenting and Stunting Incidents in Children Aged 12-59 Months in Juking Panjang Village Working Area of the Puruk Cahu Health Center, Murung Raya Regency, Central Kalimantan Province. Of 82 respondents, 48 showed good feeding practices (58.5%), and 34 (41.5%) had poor feeding practices. Nadiyah, Briawan, and Martianto (2014) found a relationship between mothers' education and the prevalence of stunting in children between 0 and 23 months old. Children of mothers with low education are more likely to be at risk of stunting.

Stunted children are more likely to be born to parents with weak or poor parenting techniques (Aramico, 2013). A similar thing can be realized with the findings of researchers in the field that the application of parenting practices carried out by the people of Selawangi Village, especially mothers with stunted children, is still not appropriate due to a lack of understanding and ability to accurate information on child nutrition, applying discipline and cleanliness to children. It can be concluded that the application of parenting styles affects the stunting cases in Selawangi Village. Some stunted children live with their grandparents in the village. Their parents work outside the city. The parents only send money every month for their children's needs. Continue to adhere to the ways of the past civilization. Therefore, the children do not receive good parenting from their grandparents. This is in line with research conducted by Bella F.D (2020), which states that there is a significant relationship between parenting styles and other people's parenting styles seen from the provision of food and parenting habits applied so that there is a risk of stunting cases. Usually, Parenting patterns carried out by ancient people were more traditional than today's modern parenting patterns.

### **CONCLUSION**

The socioeconomic conditions of families with stunted children in Selawangi Village showed that the family has jobs with low and irregular income. Elementary school graduates dominate the educational attainment of the parents. The parents' income is below the Regional Minimum Wage of Tasikmalaya Regency (Rp 2,326,772). The family residences are rented houses. Wealth in the form of goods, including the use of communication devices, showed that most families have mobile phones. There are families of stunted children who still apply the traditional sanitation system that has not met health standards. The socioeconomic conditions of families with stunted children under five are seen in work, income, education, and ownership of valuables. The environment has the potential to cause stunting cases. This study shows that work will determine the level of family income. If the income is low, the fulfillment of children's nutritional intake is poor because parents cannot afford to buy healthy and nutritious food. If the intake of nutritious food is lacking, the child cannot grow and develop properly. Prevention must start early to reduce the increasing number of stunting cases. For example, the growth and development of children must be supported by nutritional intake, regular monitoring through the Integrated Healthcare Center, and regular health education to increase parents' nutritional knowledge, especially mothers.

Health agencies can collaborate with the local government to provide counseling regarding health, especially related to stunting prevention in Selawangi Village. It is expected that parents with stunted children will always broaden their understanding of stunting and practice good parenting for their children. Besides that, each family must also be independent in utilizing local food in their area to fulfill family nutritional intake to have a healthy and productive life. Using quantitative methods, further researchers can examine the relationship between family socioeconomic factors and the stunting cases in Selawangi Village, Sariwangi District, Tasikmalaya Regency.

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