

## “The Role of Parents in Improving the Nutritional Status of Early Childhood”

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### Abstract

*The nutritional status of early childhood is a crucial indicator of the quality of their growth and development. Nutritional issues such as stunting, wasting, and underweight remain public health issues that require serious attention. The role of parents, particularly in parenting, providing nutrition, and providing healthy behaviors, significantly influences children's nutritional status. This study aims to explore in-depth the role of parents in improving the nutritional status of early childhood. This study employed a qualitative method with a phenomenological approach. Data collection techniques included in-depth interviews, observation, and documentation with parents of early childhood children. Informants were selected using purposive sampling based on specific criteria. Data analysis was conducted thematically through data reduction, data presentation, and conclusion drawing. Data validity was also tested using source and method triangulation. The results indicate that parents' role in improving children's nutritional status includes providing balanced nutritious food, engaging in responsive feeding practices, regularly monitoring children's growth, and implementing clean and healthy lifestyles. Furthermore, knowledge, education level, culture. Barriers identified included time, difficult-to-manage children's eating habits. The study's conclusions indicate that parents play a crucial and complex role in improving the nutritional status of early childhood. Therefore, efforts to improve nutrition education, family support, and support from health workers and the government are needed to optimize parents' role in ensuring children's nutritional needs.*

**Keywords:** Role, Parents, Nutritional

impact on children's physical growth,

### INTRODUCTION

The World Health Organization (WHO) reports that stunting has declined steadily over the past few decades, with 148.1 million or 22.3% of children under 5 years of age worldwide affected by stunting in 2022. Almost all children affected by stunting globally live in Asia, 77.12 million (52%) and Africa, 63.6 million (43%). [19]

Stunting is a health problem that continues to occur globally so that it has an impact on motility, morbidity

and affects the growth and development of children.[13] malnutrition has an

apart from that, malnutrition also significantly impairs cognitive development and reduce academic focus, ultimately leading to a decline in the quality of human capital. Such a trajectory hinders the overall productivity and intellectual resources of a population, will have an impact on the economy and poverty in the country.[5]

The role of parents in previous research regarding the program in Sukabumi is to provide quality care such as providing nutritious food, implementing hygiene practices for children, providing breast milk for up to 6 months and providing good

growth and development stimulation for children.[1] The role of fathers and Mothers serves as a foundational pillar for a child's emotional and psychological well-being. By providing a secure and nurturing atmosphere, parents facilitate optimal developmental conditions through rigorous nutritional management and the promotion of healthy lifestyle habits, key interventions in the prevention of stunting.[21] The contribution of grandmothers is particularly noted in increasing the variety and caloric density of supplemental foods. And fathers play a role in feeding their children by providing expressed breast milk during the mothers absence.[17]

The role of parents is the behavior of two fathers and mothers in working together and taking responsibility for their offspring as role models for children since the formation of fertilization or the zygote.[8] There is a need for further research regarding the role of parents in handling malnutrition toddlers.

Emphasize that parents play a crucial role in improving the nutritional status of early childhood through nutrition knowledge, healthy eating practices, and active involvement in children's daily diets.[22] Found that nutrition and physical activity interventions involving parents were more effective in preventing childhood obesity and improving children's health outcomes than programs without parental participation.[23] Reported that parents' socioeconomic status, dietary quality, and nutritional awareness significantly influenced children's eating behaviors and overall nutritional status, showing that children tend to adopt the dietary habits practiced within the family environment. In addition. [24] Highlighted the importance of parental education and awareness during the first 1000 days of life, explaining that parents' understanding of nutrition strongly contributes to optimal child growth and development. Although these studies differ in focus intervention

effectiveness, socioeconomic influences, and early-life nutrition they all conclude that parents are the primary determinants of healthy nutritional practices and nutritional improvement in early childhood.

## RESEARCH METHODOLOGY

This research design is qualitative research using the single unit of analysis method case studies. Data were collected using one-to-one in-depth interviews with 5 participants using purposive sampling homogeneous. The research location is Tlogosari Village. Tlogosari village was chosen as the research location because it has the highest number of stunted toddlers, namely 10 stunted toddlers from 5 villages in the working area of the Pati health center. Data analysis uses explanation building analysis techniques, testing the validity of the data using credibility, transferability, dependability, and confirmability.

## RESULTS

### The Role of Parents

#### 1. Providing balanced nutritious food

Parents are active in improving their children's nutrition by providing nutritious food such as fish, eggs, vegetables and fruit, and regularly measuring their weight and height at the posyandu. As stated by the following participant:

"...Improving a child's nutrition when serving food, we are also given education about what a child's nutrition is like, what kind of diet is it like, giving it fish, eggs, vegetables, a little fruit..." (P1,P3)

#### 2. Responsive feeding practices

Parents change their child's parenting and eating patterns to overcome stunting, such as providing food that suits the child's nutritional needs. As stated by the following participant:

"...yes, we change our parenting and eating patterns. We accompany them in

playing, and sometimes, what's this? If Dad is holding the cellphone, it's okay, we give him at least half an hour, but we also accompany him. My father usually only invites him to get-togethers, you know, takes him out for walks, my grandmother and I play at home because my mother spends most of her time at home, when she's at home she usually plays..." (P3,P4)

### 3. Regular Monitoring Of Child Growth

Parents regularly measure their child's weight and height at the integrated health post (Posyandu), as conveyed by the following participant.

"...I regularly come to the Posyandu every month to weigh and measure my child's height, because I always worry when I see my child looks smaller than other children his age. But after I weighed him at the Posyandu and the results were normal, I felt relieved..." (P5,P2)

### 4. Implementation Of Clean And Healthy Living Behavior

Parents teach their children to practice clean and healthy living habits in their daily lives, as conveyed by the following participant:

"...I make it a habit to wash my hands before eating, and also after eating. Basically, every time I want to do something, and after doing something, I always ask my child to wash his hands..." (P2,P5)

## Parental Barriers

### 1. Time

The main obstacles in implementing the let's tinkle program are parents' busy lives, lack of time and rest, which makes it difficult to monitor children's growth and development and fulfill children's nutrition. As stated by the following participant:

"...the problem is that I get home from work at three o'clock, so I don't get enough sleep, so I'm a little lazy when I wake up. I don't really see the development of my child in the morning, sometimes I neglect breakfast, I'm still sleeping, I go with my

grandmother for breakfast so I don't see what side dishes they are given..." (P3)

### 2. Picky Eater

Barriers to the picky eater aspect faced by mothers in providing food to children include children often being picky about food, often not wanting to eat and only drinking milk. As stated by the following participant:

"...yes, my child likes to be picky about food, so it makes me confused too, sometimes I have made something that my child likes but he still doesn't want it, he keeps wanting milk..." (P5)

## DISCUSSION

### 1. The Role of Parents in Meeting Nutritional Needs and Preventing Stunting

Research results indicate that parents play a central role in meeting children's nutritional needs through the provision of balanced nutritious food, responsive feeding practices, regular monitoring of growth and development, and the implementation of clean and healthy living behaviors (PHBS). These findings align with the World Health Organization's approach, which emphasizes that family-based interventions are a key component in preventing stunting and malnutrition in children.[19]

#### a. Providing Balanced Nutrition

Participants described active efforts to provide foods containing animal protein (fish, eggs), vegetables, and fruit. This reflects the implementation of the balanced nutrition principles recommended by the Indonesian Ministry of Health, namely the consumption of a variety of foods with adequate macro- and micronutrient content. Scientifically, animal protein intake plays an important role in growth hormone synthesis and tissue development in children. Studies show that regular consumption of animal protein is positively correlated with increased height and stunting prevention.[7] Furthermore, the education received by parents contributes to

increased nutritional knowledge, which has been shown to be an important determinant of child feeding practices.

b. Responsive Feeding Practices

Research findings indicate a shift in parenting practices toward responsive feeding practices, where parents adapt their diets to their children's needs and provide attention while the child eats. This approach aligns with the responsive feeding concept recommended by UNICEF, which emphasizes positive interactions between parents and children during mealtimes.[10]

This practice is important because it can increase children's energy intake and reduce the risk of eating disorders. Emotional involvement, such as accompanying children during play and mealtimes, also contributes to children's psychosocial development. However, the use of gadgets as a distraction during mealtimes requires further study because it has the potential to disrupt children's appetite regulation.[11]

c. Regular Growth and Development Monitoring

Parents' habit of bringing their children to the integrated health service post (Posyandu) every month demonstrates awareness of the importance of monitoring nutritional status. Posyandu, as a community-based service, plays a strategic role in the early detection of growth disorders. This aligns with the national program initiated by the Indonesian Ministry of Health to accelerate stunting reduction.[3]

Anthropometric monitoring (weight and height) allows for early identification of nutritional problems, allowing for more timely intervention. Furthermore, psychological aspects were also evident, with parents feeling calmer after receiving normal measurement results. This demonstrates that integrated health service posts (Posyandu) not only function

clinically but also provide emotional support for families.[2]

d. Implementation of Clean and Healthy Living Behaviors (PHBS)

Implementation of PHBS, such as handwashing, is an important factor in preventing infectious diseases that can worsen a child's nutritional status. According to the World Health Organization, repeated infections such as diarrhea can cause nutrient malabsorption, leading to stunting.[10]

These findings indicate that parents have integrated promotive and preventive aspects into their childcare. Simple but consistent health education, such as washing hands before and after meals, has been shown to be effective in improving a child's overall health.[14]

2. Barriers to Optimizing Parental Roles

Although parents' roles are quite optimal, this study also identified several significant barriers that affect the implementation of parenting practices and the fulfillment of children's nutritional needs.[18]

a. Time Constraints

Busy parents, especially working mothers, are a major obstacle to monitoring growth and development and optimal feeding. This situation results in a lack of attention to food quality and children's eating patterns.[9] This phenomenon aligns with the time constraint theory which states that limited time can reduce the quality of family diets. Parents with heavy workloads tend to rely on convenience foods or pay less attention to nutritional composition.[17]

Furthermore, physical fatigue also affects parents' motivation to provide optimal parenting. This suggests the need for community-based interventions, such as family support (from grandparents or other family members) and time management education.[10]

- b. Children with Picky Eating Behavior  
Picky eating behavior presents a challenge to meeting children's nutritional needs. Children tend to refuse provided food and prefer milk, which, if not balanced with solid foods, can lead to nutritional imbalances.[20] From a Pediatric Nutrition perspective, picky eating is a common developmental phase in early childhood, but it can have negative consequences if it persists over the long term. Inappropriate management, such as forcing children to eat or excessively replacing food with milk, can worsen their eating behavior.[14]

## CONCLUSIONS

Indicate that parents play a crucial and complex role in improving the nutritional status of early childhood. Therefore, efforts to improve nutrition education, family support, and support from health workers and the government are needed to optimize parents' role in ensuring children's nutritional needs

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