

# Factors Affecting Stunting in Merawang District, Bangka Regency

# Taufik Hidayat<sup>1</sup>, Lidyawati<sup>2</sup>, Shela Oktavia<sup>3</sup>, Agung Rizki Putra<sup>4\*</sup>

<sup>1,2,3,4</sup> Faculty of Economics and Business, University of Bangka Belitung

ABSTRACT

Article Information

#### *History of article:* Received October 2024 Approved October 2024 Published October 2024

This study focuses on the analysis of factors that affect the incidence of stunting in Merawang District, Bangka Regency. Stunting is a chronic malnutrition condition that causes physical growth disorders in children, measured by height below standard age standards. This study adopts an observational approach with a cross-sectional design to explore the relationship between parental education levels, employment, family income, and early marriage with the prevalence of stunting in the region. The findings of the study revealed that the low level of parental education, especially among mothers, is closely related to the increased risk of stunting in children. In addition, parents who work as day laborers with uncertain incomes contribute to the provision of inadequate nutritional intake. The study also identified that low family incomes typically range from Rp 1,000,000 to Rp 2,000,000 per month, limiting access to nutritious food and adequate health services. Surprisingly, early marriage did not show a significant correlation with the incidence of stunting in this area. The study underscores the importance of improving education and economic stability as an important step in the fight against stunting. Efforts to raise awareness and improve access to better education, along with economic interventions to increase family incomes, can be an effective strategy to reduce the prevalence of stunting in Merawang Regency

*Keywords:* Stunting, Family Income, Education *JEL Classification Code:* 112; 115; 118

© 2024 MediaTrend

*Author correspondence:* E-mail: agungrizkiputra@ubb.ac.id

DOI: http://dx.doi.org/10.21107/mediatrend.v19i2.27806 2460-7649 © 2024 MediaTrend. All rights reserved.

# INTRODUCTION

According to the World Health Organization (WHO), stunting becomes a health problem if the prevalence exceeds 20 percent, and the stunting rate is still far from the target of the First Thousand Days Movement by 2025, reducing the incidence of stunting and reducing stunting children under five by 9 percent. Stunting describes the chronic malnutrition status that occurs during growth and development, namely from pregnancy to the birth of a child. According to UNICEF, children who are stunted not only face problems with physical growth and brain development, but will also experience economic impacts when they become adults (Susilawati & Ginting, 2023).

President Jokowi issued Presidential Regulation Number 72 of 2021 concerning the Acceleration of Stunting Reduction, which establishes five main pillars: commitment, stunting prevention, convergence, quality food, as well as innovation and accurate data. This regulation is the legal basis for the National Strategy for the Acceleration of Stunting Reduction which has been implemented since 2018. In addition, the regulation strengthens the framework of interventions that need to be carried out and improves related institutions. The President also formed the Stunting Reduction Acceleration Team, where the Vice President acted as the chairman of the steering wheel, accompanied by the Coordinating Minister for Human Development and Culture and a number of other ministers (Tarmizi, 2024).

The government seeks to achieve the target of reducing the prevalence of stunting in Indonesia by 14 percent by 2024 in accordance with the 2020-2024 National Medium-Term Development Plan (RPJMN). Accelerating the reduction of stunting rates is part of the national strategy which is expected to be a guide for all stakeholders in supporting the government's commitment. However, the reduction in stunting rates in Indonesia is still far from the target. The prevalence of stunting in 2023 is still at 21.5 percent, based on the results of the Indonesian Health Survey published by the Ministry of Health. This figure is only down 0.1 percent from 21.6 percent in 2022, according to data from the Indonesian Toddler Nutrition Status Survey. Therefore, the government continues to strive to accelerate the reduction of stunting with a comprehensive approach that includes specific nutrition interventions and sensitive nutrition (Tarmizi, 2024).

The Minister of Health of the Republic of Indonesia, Budi Gunadi Sadikin, on October 31, 2023, said that stunting prevention must start from the time the child is still in the womb. Stunting prevention requires awareness from the community, especially so that every parent ensures that their children remain healthy and not sick. One of the important steps is to meet the nutritional needs of children optimally. In addition, community sensitivity to the early symptoms of stunting is also very important so that it can be anticipated faster and stunting prevention can be carried out (Tarmizi, 2024).

According to the Ministry of Health of the Republic of Indonesia in 2019, stunting in children, if it lasts for a long time, can have an impact on the future of a country. Stunting cases that occur in areas with high poverty rates and low education, such as in Indonesia, can threaten the future of the nation's next generation. Therefore, the government and the community need to pay serious attention to improving the nutritional and health conditions of children, so that children can grow and develop optimally, and avoid negative impacts in the future (Febriani et al., 2024). Stunting affects growth in children and can cause developmental disorders in the brain (Damavanti et al., 2024).

Stunting is an important indicator in assessing the level of welfare, educa-

tion, and income of the community. The impact is very wide, covering aspects of economy, intelligence, quality of life, and has an impact on the future of children and the progress of the nation (Supariasa & Purwaningsih, 2019).

Stunting in toddlers requires serious attention because it can hinder physical growth, mental development, and children's health. Recent research shows that stunting in children is associated with poor academic achievement, low levels of education, and low income in adulthood. Children affected by stunting are at higher risk of growing up to be adult individuals with poor health and poor economic conditions (Nugroho et al., 2021).

Income is the main factor that affects the quality and quantity of food consumed. The relationship between income and nutrition is very close, because income determines a family's ability to meet food needs. The higher the purchasing power of the family, the more food can be consumed, and the better the quality of the food consumed (Dewi et al., 2022).

Stunting not only interferes with children's physical growth, but also has an impact on the brain development of toddlers. Children who are stunted tend to have a lower IQ compared to children who grow normally. The impact of stunting lasts a lifetime, raising concerns about the child's development due to the long-term effects it causes (Tanzil & Hafriani, 2021).

The impact of stunting is divided into short-term and long-term impacts. Short-term impacts include children becoming apathetic, having difficulty speaking, and developmental disorders. Meanwhile, long-term effects include low IQ, impaired cognitive development, difficulty concentrating, and low self-confidence. Malnutrition can inhibit the child's growth and development process and reduce children's thinking skills. (6137) and in addition stunting can have a long-term impact on toddlers, including health, education, and productivity problems in the future. Children under five who experience stunting tend to have difficulty achieving optimal growth and development potential, both physically and psychomotor (Tanzil & Hafriani, 2021).

Various factors can contribute to the high prevalence of stunting, one of which is the socio-economic condition of the family. Socio-economic aspects that can have an impact on children's growth include income, education level, and parental knowledge (Oktavia, 2021).

The theories used in this study are, namely the theory of malnutrition proposed by UNICEF, is a basic concept that explains the causes of malnutrition, including stunting. According to this theory, malnutrition is caused by three main factors: (1) direct causes, namely lack of food intake and infectious diseases; (2) indirect causes, such as inadequate food availability, inadequate care, and poor access to health services and clean water and sanitation; and (3) the underlying causes, namely poverty, lack of education, and social and economic inequalities that affect the family's ability to meet the basic needs of the child (UNICEF, 1990). This theory emphasizes that stunting is not only caused by direct food shortages, but also by various socio-economic factors that affect access to resources needed for children's growth and development. This approach also highlights the importance of multidimensional policies in tackling stunting, which includes improving the economy, education, and health service infrastructure (UNICEF, 1990).

One of the impacts of stunting is the disruption of children's cognitive development, which can affect their lives in the future. According to Yusuf, cognitive ability is the ability of children to think more complex as well as reason and solve problems. Good cognitive development will help children master a wider range of general knowledge, so that children are able to play an active role in social life (Indriani et al., 2024).

According to research conducted by Wicaksono et al. (2024) and Damayanti et al. (2024) This shows that socioeconomic factors such as education level and family income have a significant influence on the incidence of stunting. Some studies have also shown that low levels of education, especially for mothers, and lowincome jobs tend to increase the risk of stunting in children. Research conducted by Raisah Adilah et al (2023), The results of the study show that stunting in Sei Tuan Village is caused by several factors, including the level of parental education and family income.

The results of the analysis showed that there was no significant relationship between family economic income and stunting incidence, but there was a significant relationship between maternal education level and stunting incidence. In Langkan Luar Village, there is a correlation between maternal education and the incidence of stunting. Preventive and promotional efforts need to be made to increase knowledge about nutritional status. Collaboration with cadres and village communities is very important to play a more active role in reducing stunting rates, especially by increasing maternal knowledge related to good nutrition.

The next research was conducted by Nurmalasari & Febriany, (2020). on the relationship between maternal education level and family income with the incidence of stunting in children aged 6-59 months. There was a significant relationship between maternal education level and stunting incidence, with an OR value of 3.313 (CI: 1.878 - 5.848) and a p value of 0.000 or p < 0.05. In addition, family income was also related to stunting events, with an OR value of 5,132 (CI: 2,602 - 10,121) and p 0.000 or p < 0.05, indicating that lowincome families had a five times higher risk of stunting than high-income families. In the middle-income group, the OR value

of 2.255 (CI: 1.127 - 4.512) and p 0.032 or p < 0.05 indicates a twice higher risk of stunting compared to high-income families. There is a relationship between maternal education level and family income with the incidence of stunting in children aged 6-59 months in Mataram Ilir Village, Seputih District, Surabaya, in 2019.

The results showed that there was a significant relationship between maternal education (p=0.003) and father's education (p=0.045) with the incidence of stunting in toddlers, while no significant relationship was found between family income (p=0.678) and stunting incidence in toddlers. Structured and sustainable education is needed to improve public understanding of stunting.

Research conducted by Firrahmawati, (2023), on the analysis of causative factors that affect the incidence of stunting. Based on the results of the chi square test, it was found that maternal knowledge, maternal age, maternal occupation, child age, weight by age (BB/U), birth weight history (BBL), child immunization status, and history of exclusive breastfeeding did not have a significant relationship with the incidence of stunting in children, because the p value > 0.05. Meanwhile, parental income and maternal education showed a significant relationship with the incidence of stunting in children, with a p value of < 0.05. This study concludes that parental income and maternal education are the most influential factors on the incidence of stunting in children.

The next research was conducted by Aridiyah et al., (2015), on Factors Influencing the Incidence of Stunting in Children Under Five in Rural and Urban Areas. The results of the analysis showed that the factors that affected the incidence of stunting in children under five in rural and urban areas included maternal education, family income, maternal knowledge about nutrition, exclusive breastfeeding, age of MP-ASI, adequacy of zinc and iron, history of infectious diseases, and genetic factors. However, maternal employment status, number of family members, immunization status, energy adequacy, and low birth weight status (BBLR) had no effect on stunting incidence. In rural areas, protein and calcium adequacy had a significant relationship with stunting incidence, while in urban areas there was no significant relationship. The most influential factor for stunting in toddlers, both in rural and urban areas, is the adequacy of zinc.

Another study conducted by (Tanzil & Hafriani, (2021), on factors that affect the occurrence of stunting in toddlers aged 24-59 months. The results of the analysis showed that lack of energy and protein intake, low maternal knowledge, low level of maternal education, and low family income were risk factors for stunting in toddlers aged 24-59 months in the work area of UPTD Simpang Ulim Health Center.

Furthermore, research conducted by Lehan et al., (2023), of factors related to the incidence of stunting in toddlers. The study showed that there was a significant relationship between maternal attitude (pvalue = 0.001), family income (p-value = 0.000), history of exclusive breastfeeding (p-value = 0.001), and history of MP-ASI (pvalue = 0.001) with the incidence of stunting in toddlers. In conclusion, maternal attitudes, exclusive breastfeeding, timely and quality MP-ASI feeding, and family income are related to the incidence of stunting in toddlers at the Oemasi Health Center, Kupang Regency.

Research conducted by Nasution, (2022), on Analysis of factors causing stunting in toddlers aged 0-59 months. The results of the study showed that several factors that cause stunting in toddlers aged 0-59 months include nutritional status, low birth weight, maternal education level, family income level, and food diversity. These causal factors are interconnected in influencing the incidence of stunting.

The next study was conducted by

Oktavia, (2021), on the relationship between family socioeconomic factors and stunting incidence. Family income and parental education are family socio-economic factors that can contribute to the occurrence of stunting in children.

Research conducted by Apriluana & Fikawati, (2018), on Risk Factors Analysis of Stunting Incidence in Toddlers (0-59 Months) in Developing Countries and Southeast Asia. The results showed that nutritional status with a birth weight of less than 2,500 grams significantly affected the incidence of stunting in children, with a 3.82 times higher risk of stunting. The low education of mothers also has a significant influence, with a 1.67 times higher risk of stunting. In addition, low household income is a significant predictor of stunting in children under five with a risk of 2.1 times. Poor sanitation conditions also have a significant impact on stunting, increasing the risk of stunting up to 5.0 times higher.

Another research conducted by Ulfah & Nugroho, (2020) Examining the Challenges of Health Development in Indonesia: Factors Causing Stunting in Jember Regency. The results of the study showed that the factors causing stunting included early marriage, low education levels, and employment and income problems. Early marriage and low education make parents less prepared to take care of children. Employment and income problems are related to the majority of informants who work as farm laborers. In addition, sanitation issues are also a concern, where some residents still do not have adequate access to clean water and proper sanitation. In addition to running programs from the central government, the district government also has special programs to improve public health, especially in an effort to reduce stunting rates. The role of midwives and posyandu, along with health cadres, is very important in reducing stunting. At the village level, several villages in Jember Regency have allocated village funds for health facilities,

such as the construction of Poskesdes.

Another study conducted by Azqinar & Himayani, (2020), on the Relationship between Maternal Education Level and Family Income with the Incidence of Stunting in Toddlers in the Work Area of the Way Urang Health Center, South Lampung Regency. The results of the analysis showed that there was a relationship between the level of maternal education and family income with the incidence of stunting in toddlers in the Working Area of the Way Urang Health Center, South Lampung Regency.

According to Asmoyo and Ratnasari (2022) in Indonesia, child nutrition is very crucial and is part of the government's commitment in the SDGs to overcome nutritional problems, including stunting (Warsidah et al., 2023). The number of stunting in the Indonesian Nutrition Status Survey (SSGI) decreased from 24.4 percent in 2021 to 21.6 percent in 2022. The prevalence of stunting in the Bangka Belitung Islands Province is 18.5 percent, down from 18.6 percent in 2021 and 19.9 percent in 2019 and the prevalence of stunting in Bangka Regency in 2022 is 16.2 percent (May 4, 2022).

Presidential Regulation of the Republic of Indonesia Number 72 of 2021 concerning the Acceleration of Stunting Reduction sets a target of 14 percent for the stunting rate in 2024. Based on the results of the 2022 Indonesian Nutrition Status Survey (SSGI), the prevalence of stunting in children under five is 21.6 percent, this figure shows that the stunting rate in children under five in Indonesia exceeds the set target of 7.6 percent. Furthermore, the prevalence in Bangka Belitung Province is 18.5 percent. There is still a difference of 4.85 percent against the national target. (Regional Development, 2023), This gap demonstrates the need for more intensive and strategic efforts to reduce the prevalence of stunting, both through more effective health program interventions, improved community nutrition, and more

supportive policies at the local level. This study will identify the factors that hinder the reduction of stunting and formulate appropriate intervention strategies to accelerate the achievement of national targets, especially in the Bangka Belitung Islands Province area.

This study has a gap that lies in the lack of specific research that identifies local socioeconomic factors that affect stunting in Merawang. The study contributed by providing a more in-depth analysis of factors such as parental education, employment, and family income, as well as their relationship to the incidence of stunting in the region. This research focuses on the unique characteristics of the Merawang region that have not been widely discussed in national-scale research, so that it can be the basis for the development of more effective local policies.

With this approach, it is hoped that it can provide useful insights in efforts to reduce stunting rates through improving education, economic stability, and nutritional interventions in the Merawang area.

Merawang Regency in Bangka Regency, as one of the regions in the Bangka Belitung Islands Province, also faces this challenge. Although various health programs have been launched, the prevalence of stunting rates is still high, namely 1.5 percent. Therefore, it is important to understand the factors that affect stunting in the Merawang District area to formulate more effective policies. The purpose of this study is to analyze factors that can affect the incidence of stunting in Merawang District, Bangka Regency.

#### **METHODOLOGY**

This study uses a qualitative approach with a case study design, which allows for an in-depth exploration of social and economic factors that affect the incidence of stunting in Merawang District. With this design, the research focuses on understanding the local context and community experiences related to stunting problems, especially in families with children with these conditions.

This research was conducted in 10 villages in Merawang District, Bangka Regency, namely Kimak Village, Jurung Village, Merawang Village, Riding Panjang Village, Jada Bahrin Village, Air Anyir Village, Batu Rusa Village, Pagarawan Village, Balunijuk Village and Dwi Makmur Village. This research was conducted from July 2024 to August 2024.

The population in this study is the entire family of toddlers affected by stunting in Merawang District, as many as 20 toddlers, while the sample used is the entire population of all families of toddlers affected by stunting in Merawang District, and the sample determination method used in this study is saturated sampling, which is a determination technique when all members of the population are used as samples. A total of 20 toddlers.

# Stages of the interview

# Interview Planning

Determining the Purpose of the Interview is to determine what information to obtain related to the factors that cause stunting.Compile a list of questions by making a list of relevant interview questions, such as related to educational indicators, parents' employment, parents' income, marriage age, home sanitation, home cleanliness, number of dependents, and brief biodata of children affected by stunting. Determine the informants to be interviewed, by meeting with Posyandu cadres specifically for Stunting and parents of toddlers affected by Stunting. Make sure interview equipment such as questionnaires, notes and so on are complete.

# Interview Implementation

Rapport Building, which is to start the interview with casual communication so that the respondent feels comfortable. Collect data by conducting interviews according to the list of roles. By ensuring that every answer obtained is well recorded. After ending the interview, the researcher thanked the respondents for their participation, then took a group photo with the respondents and made sure the respondents understood how the results of this interview would be used in the research or how the data would be processed.

# Data Processing and Analysis

Transcribe data by copying the results of interviews that have been recorded more neatly to facilitate analysis. Researchers perform data coding and categorization to break down interview data into specific categories or themes that are relevant to the research objectives. The researcher analyzes the data based on themes that emerge from the interviews or uses other qualitative analysis methods, depending on the research objectives and methods.

#### Report Results

The researcher interprets the results of the interview based on the analysis that has been conducted, and relates it to the theoretical framework or research objectives. The researcher then conducts the preparation of the results of the interviews compiled in the form of a research report, including the main findings and interpretations that explain the relevance of the data to the research. Based on the analysis. the researcher drew conclusions related to the factors affecting stunting in Merawang District, Bangka Regency. Develop recommendations based on findings, which may be beneficial for the government or local communities to address the problem of stunting.

#### Data Source

Primary data is data taken directly by researchers from the first source related to the variable of interest for a specific research purpose (Sari & Zefri, 2019). The primary data used in this study was obtained directly from the results of interviews with resource persons and field observations and continued with the provision of questionnaires to parents of children af-

# fected by stunting. *Source Triangulation*

Source triangulation is the process of verifying the credibility of data by examining data that has been obtained through various sources of information (Haryoko et al., 2020). In this study, the researcher conducted interviews with mothers of toddlers affected by stunting to find out indicators related to education, employment, income and marriage age. Furthermore, the observation was with posyandu cadres who handled stunting. Method triangulation is the process of verifying data using the same data source but through different techniques (Haryoko et al., 2020). In this study, the researcher used a questionnaire to obtain information from stunted toddler families and a Focus Group Discussion (FGD) with a group of parents in Merawang Tua District to share their views and experiences collectively, so that the general perception in the community regarding educational status, employment, and the influence of marriage age on child nutrition can be seen

**RESULTS AND DISCUSSION** 

on Stunting

The Effect of Parents' Education Level

# by elementary school graduates which is recorded at 40 percent. According to respondents in this region, continuing education to a higher level will require large costs, so they prefer to work rather than continue schooling. While the education level of wives in Merawang Regency is dominated by junior high school graduates recorded at 60 percent, local mothers argue that continuing education to a higher level, such as high school or college, often requires additional costs for tuition, books, transportation, and other needs. According to Fitri (2018), The level of maternal knowledge and education also affects the occurrence of growth retardation. Children whose parents are more educated are at risk stunting who are smaller than children whose parents are less educated. This can explain that in this study stunting affect the education of parents.

Based on research conducted by Nugroho et al., (2021) and Rachman et al., (2021), indicating that there is a relationship between risks stunting in toddlers and factors of parents' education level. Father's and mother's education levels are indirectly related to a healthy lifestyle and family income, which can increase the risk stunting for children underfive years old in Indonesia. Other research also explains that there



In the diagram above, it can be is a relationship between maternal educaseen that the level of husband's education in Merawang Regency is dominated the risk of toddlers experiencing stunting

above it car

increasing along with the low level of maternal education (Husnaniyah et al., 2020). Research conducted by Mastuti (2019)), also explained, the results of the statistical tests conducted showed that the education of fathers and mothers was significantly related to the occurrence of stunting in childhood. Research conducted by Wahyuni & Fithriyana, (2020), It was also found that in the stunting group, father's education was dominated by basic education. The results of statistical testing showed that there was a significant relationship between father's education and the incidence of stunting. This situation is in line with the theory that parents who have higher education will be more precaution-oriented, know more about health problems, understand nutrition and health knowledge. This is closely related to knowledge insights about nutritional sources and types of food that are good for family consumption. This condition causes parents to be less optimal in meeting their children's nutritional needs, thus causing children to experience stuntina.

#### The Effect of Parents' Work on Stunting

In this study, it was found that in the stunting group, father's education was dominated by basic education. The results of statistical testing showed that there was a significant relationship between father's education and the incidence of stunting. This situation is in line with the theory that parents who have higher education will be more oriented towards preventive measures, know more about health problems, understand nutrition and health knowledge.

From the results of the interviews conducted, it can be seen that most of the stunted toddlers' fathers work as freelancers, with a percentage of 50 percent. This condition is due to the fact that freelance day worker jobs usually provide low and unstable wages. This precarious income makes it difficult for families to meet the adequate nutritional needs of their children. As a result, these children are more susceptible to malnutrition, which can ultimately contribute to stunting problems. This income instability can also lead to more limited access to quality health services.

Based on research conducted Ngaisyah, (2015), fathers who earn below the Regional Minimum Wage (UMR) are at risk of having stunted children because low income can limit family access to nutritious food, health services, and the environment that supports child development.

# The Effect of Family Income on Stunting

Low economic status is suspected to have a major impact on the prevalence of thinness and short stature in children. Parents with sufficient household income can meet all the primary and secondary needs of their children. Families with better economic status also have better access



to health services. Children who come from families with low economic status tend to consume less food in terms of quantity, quality, and variety (Wicaksono et al., 2024). the research conducted by Ruri Maiseptya Sari & Mika Oktarina (2020), Family income has a significant influence on incidents stunting in toddlers. Research shows that families with incomes below the Regional



Source: Primary data Figure 4. Family Income

Figure 4 shows the results of a survey that shows that the average family income in Merawang District, Bangka Regency, is in the range of Rp 1,000,000 to Rp 2,000,000 every month. As many as 65 percent of families with employment status (husband and wife) are included in this category. This relatively low income poses various challenges in meeting basic needs, especially in terms of balanced nutrition for children. An income of Rp 1,000,000 to Rp 2,000,000 per month is often considered insufficient to meet adequate nutritional needs.

Balanced nutrition is very important for children's growth and development, especially those that include protein, vitamins, and mineral intake. With a limited budget, families find it difficult to provide nutritious meals such as meat, fish, vegetables, and fruits on a regular basis. The level of family income affects the level of family nutrition. Low-income households are at higher risk stunting due to its inadequate ability to meet nutritional needs (Wati & Ichsan, 2024). As a result, the risk of malnutrition or malnutrition in children increases, which can impact their physical and mental development. This research is in accordance with Minimum Wage (UMR) are up to six times more likely to experience stunting, Other research also shows a relationship between income levels and incidents stunting at the Gatak Health Center with a P value of 0.005 and an Odd Ratio of 6.927 (Wati & Ichsan, 2024).

Data from Basic Health Research shows that one of the causes of stunting is a lack of food in the household, which leads to inadequate nutritional intake, especially in young children. This situation requires the active role of health workers, especially nutrition officers at health centers. They are expected to provide education on how to make a healthy menu using locally available ingredients to help families overcome nutritional problems. In addition, they need to monitor young children who are at risk of stunting, especially in economically disadvantaged families.

#### The Effect of Early Marriage on Stunting

Early marriage is also a factor that hinders growth. Early marriage in adolescent girls who are not psychologically ready to become mothers can affect fetal growth and development, and parenting behavior during pregnancy (Taufikurrahman et al., 2023). Figure 5 shows that the highest marriage age ratio in Merawang District, Bangka Regency is at the age of 19 to 24 years, which is 60 percent. This suggests that there is no connection between young marriage and the occurrence of stunting in Merawang District. This is supported by data taken from respondents, namely most couples are married over the age of 19 and even found that some couples are married over the age of 30, which is as much as 20 percent. els of education, especially in mothers, are closely related to the high prevalence of stunting. Parents with low education tend to have less knowledge about nutrition and a healthy lifestyle that is important for a child's growth.

Parental Occupation: The majority of fathers work as freelancers with irregular incomes, which implies an inability to meet the nutritional needs of children consistently. This puts children at a higher risk of chronic



Figure 5.

Early Marriage

Early marriage was also associated with an increased risk of stunting, although in the case of Merawang District, no significant relationship was found between early marriage and stunting incidence. In general, early marriage can affect fetal development and parenting behavior during pregnancy, especially because young brides are often not psychologically and physically ready to take on the role of parents. Mothers who marry at a young age tend to have more limited knowledge and understanding of nutrition and health, which can affect the child's nutritional intake and parenting style.

# CONCLUSIONS

Based on the results of research conducted in Merawang District, Bangka Regency, it can be concluded that several significant factors affect the incidence of stunting in toddlers. These factors include: Parental Education Level: Low levmalnutrition. Family Income: Low family incomes, ranging from Rp 1,000,000 to Rp 2,000,000 per month, severely limit the ability of families to provide enough nutritious food and access adequate health services. This is the main factor that affects the incidence of stunting. Age of Marriage: There was no significant relationship between the age of early marriage and the incidence of stunting in Merawang Regency. Most respondents were married at the age of over 19, which suggests that other factors, such as education and the economy, play a greater role in influencing the prevalence of stunting.

From the results of this study, it can be recommended that improving parental education and improving family economic conditions, especially through the provision of stable jobs, is an important step in efforts to prevent and reduce stunting rates. Intervention programs that focus on nutrition education, and increasing income can stunting in Merawang Regency.

#### REFERENCE

- Apriluana, G., & Fikawati, S. (2018). Analisis Faktor-Faktor Risiko terhadap Kejadian Stunting pada Balita (0-59 Bulan) di Negara Berkembang dan Asia Tenggara. Media Penelitian dan Pengembangan Kesehatan, 28(4), 247-256. https://doi.org/10.22435/mpk.v28i4.472
- Aridiyah, F. O., Rohmawati, N., & Ririanty, M. (2015). Faktor-faktor yang Mempengaruhi Kejadian Stunting pada Anak Balita di Wilayah Pedesaan dan Perkotaan (The Factors Affecting Stunting on Toddlers in Rural and Urban Areas ). 3(1).
- Azqinar, T. C., & Himayani, R. (2020). Hubungan Tingkat Pendidikan Ibu. (Sutarto, Tiara Cornela Azqinar, Rani Himayani, Wardoyo ). 9(2).
- Bangda. (2023). Provinsi Kepulauan Bangka Belitung Laporan Semester 2.
- Damayanti, Y., Pracoyo, A., Abidin, M.R., Apriana, B.T., Robiah, H., Masrul, L.M., Atimah, N., Affandi, R.R., Asri, S.N., Wulandari, S. and Hadi, Y. (2024). Nuget 4 bintang sebagai makanan bergizi untuk mencegah stunting di desa belanting kecamatan sambelia. Jurnal Pendidikan dan Pengabdian Masyarakat, 7(1), 17–21.
- Dewi, A. P. S., Kusumastuti, K., & Astuti, D. P. (2022). Faktor-Faktor Yang Mempengaruhi Kejadian Stunting Pada Anak Balita. Jurnal Ilmu Keperawatan dan Kebidanan, 13(2), 549-555. https://doi. org/10.26751/jikk.v13i2.1340
- Febriani, L., Ikhlasiah, M., Studi Magister Kesehatan Masyarakat, P., & Ilmu Kesehatan, F. (2024). Faktor yang Mempengaruhi Kejadian Stunting pada Baduta. Faletehan Health Journal, 11(1), 23-32. www.journal. lppm-stikesfa.ac.id/ojs/index.php/FHJ

- help significantly reduce the prevalence of Firrahmawati. (2023). Analisis faktor penyebab yang mempengaruhi kejadian stunting. Jurnal Kebidanan, 12(1), 28-38.
  - Fitri, L. (2018). Hubungan Bblr Dan Asi Ekslusif Dengan Kejadian Stunting Di Puskesmas Lima Puluh Pekanbaru. Jurnal Endurance, 3(1), 131. https:// doi.org/10.22216/jen.v3i1.1767
  - Haryoko, S., Bahartiar, & Arwadi, F. (2020). Analisis Data Penelitian Kualitatif (Konsep, Teknik, & Prosedur Analisis).
  - Husnaniyah, D., Yulvanti, D., & Rudiansyah, R. (2020). Hubungan Tingkat Pendidikan Ibu dengan Kejadian Stunting. The Indonesian Journal of Health Science, 12(1), 57-64. https://doi.org/10.32528/ ijhs.v12i1.4857
  - Indriani, I., Mujahadatuljannah, M., & Rabiatunnisa, R. (2024). Faktor yang Mempengaruhi Kejadian Stunting pada Bayi dan Balita. Jurnal Surya Medika, 9(3), 131-136. https://doi.org/10.33084/ jsm.v9i3.6493
  - Kemenkes. (2022). Buku Saku Hasil Survey Status Gizi Indonesia (SSGI) Tahun 2022. Kemenkes. 1-7.
  - Lehan, A. V., Utami, T. A., & Ningsih, P. W. (2023). Faktor-Faktor yang Berhubungan dengan Kejadian Stunting pada Balita. Jurnal Keperawatan Silampari, 6(2), 961-972. https://doi.org/10.31539/ jks.v6i2.4856
  - Mastuti, S., Ulfa, L., & Nugraha, S. (2019). Jurnal Ilmu Kesehatan Masyarakat. Jurnal Ilmu Kesehatan, 14(01), 93-112.
  - Nasution, I. S. (2022). Jurnal Ilmiah Kesehatan Analisis faktor penyebab kejadian stunting pada balita usia 0-59 bulan. 1(2), 82-87.
  - Ngaisyah, R. D. (2015). Hubungan Sosial Ekonomi Dengan Kejadian Stunting pada Balita di Desa Kanigoro, Saptosari

Gunung Kidul. *Jurnal Medika Respati*, 10(4), 65–70.

- Nugroho, M. R., Sasongko, R. N., & Kristiawan, M. (2021). Faktor-faktor yang Mempengaruhi Kejadian Stunting pada Anak Usia Dini di Indonesia. *Jurnal Obsesi : Jurnal Pendidikan Anak Usia Dini*, 5(2), 2269–2276. https://doi. org/10.31004/obsesi.v5i2.1169
- Nurmalasari, Y., & Febriany, T. W. (2020). Hubungan Tingkat Pendidikan Ibu dan Pendapatan Keluarga Dengan Kejadian Stunting Pada Anak Usia 6-59 Bulan. 6(2), 205–211.
- Oktavia, R. (2021). Hubungan Faktor Sosial Ekonomi Keluarga Dengan Kejadian Stunting. *Jurnal Medika Hutama*, 03(01), 1616–1620. http:// jurnalmedikahutama.com
- Rachman, R. Y., Nanda, S. A., Larassasti, N. P. A., Rachsanzani, M., & Amalia, R. (2021). Hubungan Pendidikan Orang Tua Terhadap Risiko Stunting Pada Balita: a Systematic Review. *Jurnal Kesehatan Tambusai*, 2(2), 61–70. https://doi.org/10.31004/jkt.v2i2.1790
- Raisah Adilah, Maziaturrahmah, Nabila Hana, Ridmahsyah Widiya, Mifta Nurjannah, M. A. (2023). Faktor-Faktor yang Mempengaruhi Kejadian Stunting pada Balita Usia 0-59 Bulan di Desa Sei Tuan. 23(2), 2079–2083. https://doi. org/10.33087/jiubj.v23i2.2969
- Sari, M. S., & Zefri, M. (2019). Pengaruh Akuntabilitas, Pengetahuan, dan Pengalaman Pegawai Negeri Sipil Beserta Kelompok Masyarakat (Pokmas) Terhadap Kualitas Pengelola Dana Kelurahan Di Lingkungan Kecamatan Langkapura. Jurnal Ekonomi, 21(3), 311.
- Supariasa, I. D. N., & Purwaningsih, H. (2019). faktor-faktor yang mempengaruhi kejadian stunting pada balita di

Kabupaten Malang. Karta Rahardja, 1(2), 55–64.

- Susilawati, S., & Ginting, S. O. B. (2023). Faktor-Faktor Resiko Penyebab Terjadinya Stunting Pada Balita Usia 23-59 Bulan. *IJOH : Indonesian Journal of Public Health*, 1(1), 70–78. https://doi. org/10.61214/ijoh.v1i1.69
- Tanzil, L., & Hafriani, H. (2021). Faktor-Faktor Yang Mempengaruhi Terjadinya Stunting Pada Balita Usia 24-59 Bulan. *Jurnal Kebidanan Malahayati*, 7(1), 25–31. https://doi.org/10.33024/jkm. v7i1.3390
- Tarmizi, S. N. (2024). Membentengi anak dari stunting. 20.
- Taufikurrahman, T., Zulfi, A. N., Irmawati, E. F. F., Setiawan, W. P., Azizah, P. N., & Soeliyono, F. F. (2023). Sosialisasi Pernikahan Usia Dini dan Edukasi Kesehatan Reproduksi Remaja Sebagai Upaya Pencegahan Stunting di Desa Pabean, Kabupaten Probolinggo. *Scientia: Jurnal Hasil Penelitian*, 8(1), 73–88. https://doi.org/10.32923/sci. v8i1.3379
- Ulfah, I. F., & Nugroho, A. B. (2020). Menilik Tantangan Pembangunan Kesehatan di Indonesia : Faktor Penyebab Stunting di Kabupaten Jember Pendahuluan Pembangunan kesehatan merupakan bagian dari pembangunan nasional, yang bertujuan sektor baik secara vertikal maupun horizontal. Secara vertik. 8090, 201–213.
- UNICEF. (1990). Strategy For Improved Nutrition Of Children and Women in Developing Countries. In The Management of Multilateral Organizations (Number 01). https://doi. org/10.1163/9789004632974\_009
- Wahyuni, D., & Fithriyana, R. (2020). Pengaruh Sosial Ekonomi Dengan Kejadian Stunting Pada Balita Di Desa Kualu

Tambang Kampar. *PREPOTIF : Jurnal Kesehatan Masyarakat*, 4(1), 20–26. https://doi.org/10.31004/prepotif. v4i1.539

- Warsidah, W., Ayyash, M. Y., Priani, W., & Satyahadewi, N. (2023). Analisis Statistik Faktor-faktor yang Mempengaruhi Angka Stunting di Kalimantan Barat. *Empiricism Journal*, 4(2), 432–441. https://doi.org/10.36312/ej.v4i2.1563
- Wati, D. P., & Ichsan, B. (2024). Hubungan Tingkat Pendapatan dan Dukungan Keluarga terhadap Kejadian Stunting pada Balita. Jurnal Ilmiah Permas: Jurnal Ilmiah STIKES Kendal, 14(4), 75–82. https://journal2.stikeskendal.ac.id/index.php/PSKM/article/view/1979/1260
- Wicaksono, K. E., Purwanza, S. W., Nurmawati, I., & Universitari, P. S. (2024). Analisis Faktor Kejadian Stunting Pada Balita Politeknik Negeri Jember, Jember, Indonesia Sekolah Tinggi Ilmu Kesehatan Maharani, Malang, Indonesia 12, 6–12.