

Examining the Handling of Stunting in The Osing Tribe as An Effort to Banyuwangi Zero Stunting

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Abstract

Background: Handling stunting in the Gitik Community Health Center working area can reduce stunting rates significantly.

Objective: This research aims to examine the handling of stunting in the Osing tribe as an effort to create zero stunting in Banyuwangi. **Method:** The research design uses qualitative with a phenomenological approach. By using a purposive sampling technique, 9 participants were obtained, namely mothers who had stunted-free children and mothers who had stunted children.

Data collection was carried out using semi-structured interviews. Data analysis used the Colaizzi method with the help of Nvivo 12 software. **Result:** 5 themes and 13 subthemes were analyzed for the main participants in this research; 1) Grieving; 2) Information; 3) Individual Motivation; 4) Social motivation; 5) Behavioral skills. **Conclusion :** Handling stunting among the Osing tribe in the Gitik Health Behavior (IMB) theory. Handling stunting by providing information Center Working Area is by the Information Motivation Skills with health education to mothers, so that mothers have personal motivation, supported by social motivation in handling stunting and maternal behavioral skills in caring for and providing parenting to children

Keywords: Stunting, Handling Stunting, Purposive Sampling, collaboration, Information Motivation Behavioral (IMB).

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INTRODUCTION

Reducing stunting in children is the first of 6 goals Global Nutrition Targets by 2025 and is a key indicator in The second Sustainable Development Goals (SDG) goal is Zero Hunger (1). Stunting refers to a condition in which a child experiences a disorder growth and development that is not appropriate for age.

Causative factor Stunting can be found during pregnancy or the early stages of a child's growth (2). The short-term impacts of stunting include an increase morbidity and mortality, developmental disorders (cognitive, motor, language), and increased economic burden on the costs of caring for and treating sick children (3). Meanwhile, the long-term impact of stunting causes decreased reproductive health, study concentration, and work productivity low (4).

According to the World Health Organization (WHO), stunting measurements are appropriate with growth standards described by the height/age z-score value (TB/U) less than $-2SD$ /standard deviation and less than $-3SD$ (5). Prevention and acceleration of the stunting problem must be addressed immediately seriously by the government and society (6). It was due to the generation that grows optimally, aka not stunting, has a level better intelligence (7). It also provide power good competition in the fields of development and economics (8). If stunting growth can be prevented and reduced, then It is hoped that economic growth can be better, without being burdened by costs treatment of degenerative diseases (9).

Based on data from the World Health Organization (WHO), it is stated in 2019, the South-East Asia region became the region with the prevalence of stunting highest in the world (31.9%) after Africa (33.1%) (10). Based on Basic Health Research in 2018, prevalence stunting in toddlers aged 0 to 59 months in East Java Province reached 32.81% (11). Based on the results of the Indonesian Nutrition Status Study (SSGI) in 2022 there will be 23.5% (12).

The territory *Banyuwangi* Regency, the prevalence of stunting in toddlers in 2020 is 8.2% with a total of 7,909 children and in 2021 it will be 6.0% with a total of 3,051 toddlers (13). According to data obtained from the Health Service Banyuwangi in 2021, the prevalence of stunting in the six regions is highest, namely in

the Singojuruh area it was 197 toddlers, Wongsorejo was 161 toddlers, Sumberagung was 157 toddlers, Songgon was 153 toddlers, Jajag was 146 toddlers, and Bajulmati amounted to 139 toddlers. In the Osing tribe in the work area In Gitik Health Center in 2021, 53 toddlers experienced stunting. Ethnic group Osing in the Gitik Health Center work area is included in the number of stunting lowest in that year and experienced a significant decline from year to year to year.

Based on a preliminary study conducted in the Puskesmas work area Gitik on December 17 2022 found that the mother and child were enthusiastic There is a high level of stunting management, in terms of stunting rates found in 2021, namely 53 stunted clowns, then the following year in March 2022 it fell to 39 stunted toddlers, in June 2022 it became 20 stunted toddlers, in October 2022 will fall again to 17 toddlers stunting, and the latest data was obtained in 2023 on stunting rates in the region Gitik Community Health Center's work has currently decreased to 12 stunted children from Gitik Health Center, 2023.

Previous research that we found in research from (14) explained that increasing the capacity of Posyandu cadres in detecting and preventing stunting, there is also research from (15) which explains the relationship between midwives and stunting handlers, even though handling of stunting must have two sides, namely the psychological and physical sides. Therefore, our research provides an update on handling stunting in the Osing tribe from upstream to downstream starting from mothers, cadres, regional midwives and village officials in an effort to reduce the stunting rate in the Gitik health center working area.

Regarding the stunting phenomenon in 2023, the Osing tribe community in the work area The Gitik Health Center has high enthusiasm for handling stunting. Confirmed by the Head of the Gitik Banyuwangi Community Health Center, he stated that the presence of mothers and children increases every month who are excited to have their children checked for immunization at the community health center.

Public the Osing tribe is a tribe that still maintains its culture, traditions of mutual cooperation and have high enthusiasm for something. Gitik Village, Regency Banyuwangi

is a community health center that has the lowest stunting rate. Tradition mutual cooperation and high enthusiasm is what is believed to be able to make it happen zero stunting. Based on cases of reducing stunting in the Puskesmas working area It is hoped that Gitik can maintain the tradition of mutual cooperation and cooperation enthusiasm of mothers and children as a form of implementing Banyuwangi zero stunting. This research aims to examine the handling of stunting in tribal groups Osing as Banyuwangi's effort to zero stunting.

Methods and Design

This research design is qualitative with a phenomenological method carried out on mothers with toddlers in the work area of the Gitik District Health Center Banyuwangi. Interpretive phenomenology uses interpretative elements and descriptive to gain a deeper understanding about the essential nature of everyday life experiences (16).

Informant

The informants in this study were 5 stunted children and 4 participants without stunting. The sample can be sufficient if the researcher selects participants according to the research objectives based on predetermined criteria.

Data collection process

Data collection was carried out through semi-structured individual interviews during June 22 to August 22 on 2023 in the work area of the Gitik Community Health Center, Banyuwangi Regency.

Interviews were recorded later transcribed and validated by listening to the recording (17). The questions used in interviews lead to describes the informant's experience of parenting patterns of stunting and baduta mothers stunting-free clowns, as well as handling stunting. The interview guide in this research is in the form of a list questions to interview research subjects that cover everything related to the given problem. The selected research subjects were asked a number of questions regarding the reasons for the answers given.

Before the interview is conducted, the interview questions in the form of an interview

guide are validated with the supervisor so that the data obtained is in line with expectations. This validation is carried out by considering: (1) Accuracy in the use of words or language, (2) Conformity of objectives with questions, (3) Do not use language applicable in the local area, (4) Conformity of questions with basic competencies and indicators, and (5) Questions do not make a difference interpretation.

Data analysis

Data analysis used in this research uses methods Colaizzi, the colaizi method is carried out simultaneously with the process data collection (18). Analysis stages Colaizzi data namely; 1) Make data transcripts, formulate meaning and code; 2) Developing themes, at this stage is done by coding, create categories and organize subthemes and themes; 3) Describe phenomenon; 4) Preparation of structure; 5) Validate the findings with research informants (member checking). Analyze data using NVIVO 12 software was used to encode the data.

Ethical Approval

This research has been approved by the Health Research Ethics Committee (KEPK) Banyuwangi College of Health Sciences (STIKES) based Statement of Passing Ethical Review No.011/02/KEPK-STIKESBWI/IX/2023. Informants were informed and agreed that this research was voluntary. Para Researchers guarantee the confidentiality and anonymity of informant data.

RESULTS

The characteristics of the informants in this research consist of the main informant, namely the mother with stunting-free clowns and stunting clowns, key informants, namely; cadre, regional midwife and head of Pengatigan Village and additional research informants Nutrition Coordinator and Head of Gitik Community Health Center. Table 1 shows that informants aged 25-32 years with the majority of jobs as housewives' ladder. The majority of clowns are female. Family income from main informant < Rp.1,000,000, -.

Table 1. Data demographic

informant	Stunting status	Mother's age (years)	Mother's education	work	Child's age (month)	gender	Immunization history	Child's complaints
P1	Stunting free	32	Elementary School	entrepreneur	20	female	complete	No complaints
P2	Stunting free	27	Senior Highschool	Housewife	19	female	complete	No complaints
P3	Stunting free	30	Senior Highschool	Housewife	22	female	complete	No complaints
P4	Stunting free	27	Elementary School	entrepreneur	24	Female	complete	No complaints
P5	Stunting	29	Senior Highschool	Housewife	17	Male	complete	No complaints
P6	Stunting	27	Senior Highschool	Housewife	15	Female	complete	Cough and flu
P7	Stunting	25	Equivalent to a bachelor's degree	Entrepreneur	17	Female	complete	No complaint

Main Informants: Stunting-Free Mothers and Mothers with Stunting Children

The main informants in this study were mothers with stunting and mothers with stunting-free children. 5 themes were identified and 13 were identified subtheme. Themes identified were 1) Grief; 2) Information; 3) Personal Motivation; 4) Social Motivation; 5) Behavioral Skills. Overall theme and sub themes are presented below:

Theme 1 Grief

The informant felt sad when his child was declared stunted. Informant going through the stages of grief; denial, anger, bargaining, depression up to Finally the informant was able to accept this fact. Informants also felt the impact of grief is due to; psychological burden, financial burden, physical burden, burden thoughts, and social burdens.

Stages of grief

"I feed my child but you could say that his height is not enough, his offspring are small" (P1 Stunting Free) "I'm stressed, sis, my child can be said to be stunted, his own child eats pickily, he's bored" (P3 Stunting Free) "Finally sis, I follow the advice of the cadres and midwives so that the child will be healthy quickly and not weigh less" (P1 Stunting Free)

The impact of grief

"I'm annoyed that you're being called stunted, I'm small, my father is small and also hereditary" (P1 Free of Stunting) "I'm given what I can to eat, bro, my father is just a farmer,

bro, his income is uncertain" (P2 Free of Stunting) "I'm tired sometimes, sis, I don't want to eat this or that I don't want to" (P3 Stunting Free) "At first I was embarrassed, sis, I was told that my child was short and weighed less, so he never came to the posyandu, embarrassed sis" (P7 Stunting Free).

Theme 2 Information

The informant said he received health education. The health education provided is related to information (what) to fulfill intake child nutrition, keeping the environment and children clean, supplements children's appetite, stimulates children's development. This information is provided at posyandu, posyandu park, post dong (Posko stop stunting with odong-odong), and cadre visits to the house. Information provided by cadres and village area midwives, as well as the media in providing information through leaflets and manual brought by the regional midwife.

Health Education

"Plenty of eggs, fish and vegetables are good, the midwife said, sis, eggs and fish will make it fast" (P5 Child with Stunting) "You told me to drink vitamins and eat regularly and I was told to drink milk" (P3 Free of Stunting)

Theme 3 Personal Motivation

This theme explains an informant's encouragement that can trigger the emergence of a sense of enthusiasm so that their children are free from stunting. Very informant enthusiastic about caring for their children so

that they will soon be free from stunting, however obstacles were found when caring for and managing their children's diet.

Enthusiasm

"So that you don't feel embarrassed, sis, her mother works at a bank and her child is listed as short. I told the mother that her child had to eat lots of protein" (P1 Stunting Free) "I obeyed the midwife so the child was smart and healthy, she said" (P2 Stunting Free)

Perceived Obstacles

"I'm confused about managing the menu, sis, if I need protein, my child keeps getting bored with eggs" (P2 Free of Stunting) "I've tried to give him food, but sometimes the increase is only 2 ounces, sis, that feels sad" (P7 Child with stunting)

Home Visit from Cadre

"Hani's mother (cadre) came to the house to check and measure my child, sis" (P9 Child with Stunting) "My house was visited by the cadre's mother if I didn't come to the posyandu" (P4 Child with Stunting)

Integrated Healthcare Center

"I go to the posyandu every month, sis. I always come" (P8 Child with Stunting) "The mother of the cadre was told to come to the posyandu so that her child would be continuously monitored" (P5 Child with Stunting).

Theme 4 Social Motivation

Informants get motivation from the social environment to support them their children are free from stunting, the motivation received from social is existence cadre visits to homes as a form of monitoring and evaluating stunting posyandu, posyandu park, Naik odong-odong (Stop Stunting Posk with odong-odong (Postingdong) and help with milk, side dishes and vitamin enhancers appetite.

Posyandu Park

"Later at the end of the month the children are usually invited to play and be trained there" (P7 Stunting Free) "usually there is a posyandu park, sis, the children there are invited to exercise and play, their mothers are

given an explanation by the cadre's mother" (P1 Free stunting)

Climb Up

"Children who want to go to the post are picked up using an odong-odong, so the children are happy" (P1 Stunting Free) "they are picked up using an odong-odong and brought here (stop stunting post) (P7 Stunting Free) "in the middle of the month they are usually picked up using an odong -odong with village hall people" (P4 Children with Stunting)

Intake Assistance Nutrition & Vitamins

"Usually the village is given eggs, like fish, milk for my children, so I give it to the children" (P3 Stunting Free) "I am given vitamins every month from the posyandu" (P6 Children with Stunting)

Theme 5 Behavioral Skills

This theme explains the learned habits which include the informant's skills and abilities to overcome problems in child health. The informant fulfilled the nutrition given to him the baby and provide good appetite-enhancing vitamin supplements buy it yourself or someone gets it from the posyandu, then the informant actively participates in monitoring activities of their child's growth and development.

Fulfillment of Nutrition

"Madam cadre said you have to have protein and vegetables, whereas the only way I can afford it is to buy eggs, I give them extra, that's all the vegetables, sis" (P2 Stunting Free) "I invited my child to eat and snack, sis. In the morning I ate eggs, soup, and at 9 o'clock I ate milna biscuits, at noon I ate again, in the afternoon I ate them again, then at night I ate them again, and I gave them milk" (P1 Free of Stunting) "Usually the village is given eggs, fish and milk for cooking. give it to my child" (P3 Stunting Free)

Giving Multivitamins

"I was given vitamins every month from the posyandu" (P6 Child with Stunting) "I added vitamins bought at the pharmacy, sis, so I bought it myself from the posyandu" (P1 Free of Stunting)

Regularly Check Your Child's Growth and Development

"I go to the posyandu every month, sis..it's rare that I don't come" (P1 Stunting Free)
 "I've been there 3 times if I'm not mistaken, sis, like this (posyandu), if you pick me up in the middle of the month with routine odong-odong, sis never misses it because it's only the mother Households are happy to get together like this" (P3 Stunting Free).

Table 2. Theme and sub-theme

Themes	Subthemes
Grief	1. Stages of grief 2. The impact of grief
Information	1. Health Education
Personal Motivation	1. Enthusiasm 2. Perceived Obstacles 3. Home Visit from Cadre 4. Integrated Healthcare Center
Social Motivation	1. Posyandu Park 2. Climb Up 3. Intake Assistance Nutrition & Vitamins
Behavioral Skills	1. Fulfillment of Nutrition 2. Giving Multivitamins 3. Regularly Check Your Child's Growth and Development

DISCUSSION

In this study there were 3 groups of informants, namely the main informants (mothers with stunting-free children and mothers with stunting children). Key informants (cadres, Midwife, and Head of Pengatigan Village). As well as additional informants (Head of Community Health Center Gitik and Gitik Community Health Center Nutrition Coordinator). Five themes were analyzed from the main informants, namely 1) Stages of grief; 2) Information (Information); 3) Individual Motivation (Personal Motivation); 4) Motivation Social (Social Motivation); 5) Behavioral Skills.

The first theme felt by the main informant was grief. Mourn felt by the informant when his child was declared stunted. There are mothers who denial, anger, bargaining and even depression when their child is revealed stunting, but this has been

overcome until the mother finally accepts the situation and focus on caring for their children so they are free from stunting. This is appropriate According to the Kübler-Ross theory of grief, there are 5 stages of grief, namely denial, anger, bargaining, depression, and acceptance (19). Mourn (grieving) is an emotional reaction to loss (20). Consequence Grief that is not resolved will initially result in rejection within oneself. Rejection will turn into anger usually venting this emotion to yourself or those around you.

The next theme identified by the main informants was Information (Information); Individual Motivation (Personal Motivation); Social Motivation (Social Motivation); Behavioral Skills (Behavior Skills). Identify the theme in accordance with the theory of The Information Motivation Behavioral skills (IMB) Model of Adherence. The IMB model includes three main influencing constructs behavior change: Information barriers, motivation barriers (personal and social), and behavioral skill barriers (21).

Informants receive health education information related to nutritional intake and parenting patterns provided by cadres, midwives and nutritionists. Fulfillment Health-related information is very important in supporting daily life. Everyone cannot be separated from information in everyday life, because Conveying information has become an important part of human life (22). Health is something that needs to be paid attention to a housewife must be more enthusiastic about her family's health or his son.

Informants have personal motivation after receiving information, personal motivation with enthusiasm in caring for their children, even though they are mothers encounter obstacles. Personal motivation discusses self-motivation itself can trigger a feeling of enthusiasm and also be able to change human or individual behavior to lead to better things herself.

Personal motivation is the urge to take a series of actions the process of human behavior by considering direction, intensity, and persistence on achieving goals which include physical, mental and social aspects (23). So that the individual concerned is not too anxious at any time action can freely do with the things

one likes and responsible for all actions carried out, can accept and respect other people. So to be free from stunting Firstly, the mother's enthusiasm for her child is needed, such as regularly taking the child to school posyandu to monitor their health.

Social motivation is accepted by the mother, there is good social motivation received by the mother such as routine posyandu activities (to measure growth), posyandu park (growth monitoring), door to door visits from cadres to monitor and evaluate, cadres also listen to the mothers' complaints nurses for children with stunting, assistance with side dishes, nutritional intake, milk and vitamins Appetite enhancer is given to mothers with stunted children. Help The mother received the funds from Village funds for the Banyuwangi program Stunting Response (BTS).

There is an innovation post, please (stop stunting post using an odong-odong, where stunted mothers and children are picked up by odong-odong train to be delivered to the stop stunting post, at the children's post

A subsequent growth evaluation will be carried out based on the results of the mother's evaluation provided education by a nutritionist, and children were provided with puppet stage entertainment/wayang with a diet theme. The implementation of this post also uses Village funds which are the implementation of the BTS program.

Motivation This social activity is a response to stimulation, then cognitive output is generated the form of social motivation will be a fundamental influencing factor performance or someone's performance in carrying out their duties. Because as social creatures, humans cannot live without other people. That's why this motivation is related to fellow humans and will form expected individual behavior.

The final theme, namely behavioral skills, explains habits studied includes the skills and abilities of informants to overcome health problems in children. Behavioral skills such as clean living and Health is influenced by the knowledge and attitudes of school-aged children. Someone who have a good attitude, have good skills too. Skills Health is a person's

activities in order to maintain and improve health (24).

This behavior skills approach includes implementation of instructions, feedback, practice, and modeling (Maris, 2023). So, behavioral skills acquired by mothers include: the importance of regularly going to the posyandu, providing vitamin supplements, and compliance Children's nutritional needs are very important in treating stunting.

This research can dig deeper into the handling of stunting, especially in the work area of the Gitik Community Health Center, which is taken from the statements submitted by participants as well as the impact of the program for handling stunting. However, this research has limitations in terms of finding the homes of participants who will be used as research samples and requires more experience in understanding the transcript results to be translated into analysis of the findings in this research as well as the need to build relationships of mutual trust between mothers.

CONCLUSION

Handling stunting among the Osing tribe in the Gitik Community Health Center Working Area in accordance with the theory of The Information Motivation Behavioral skills (IMB), there are three main constructs that influence behavior change: Information barriers, motivation barriers (personal and social), and behavioral skill barriers. Handling stunting by providing information with health education to the mother, so that the mother has personal motivation, supported by motivation social issues in handling stunting and maternal behavioral skills in caring and providing parenting patterns for stunted children.

The impact of research on society can provide information related to the concept of stunting, such as preventing stunting and further handling of stunting in an effort to reduce stunting rates. Recommendations for further research can further deepen the community's perspective, especially mothers, in handling stunted children as well as mothers' perspective regarding stunting prevention. And it can encourage the community to work together in handling and preventing stunting in children.

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