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Determinants of Nutritional Status in Toddlers in the Meureubo Health Center Working Area, West Aceh Regency 2023

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ABSTRACT

The nutritional status of children under five is one of the world's concerns in the field of global public welfare in achieving the SDG's target. In the 2020-2024 National Medium-Term Development Plan (RPJMN), there are several main targets in efforts to improve the nutritional status of the community, namely reducing the prevalence of undernutrition (wasting) in children under five from 10.2% to 7% and the prevalence of stunting (short and very short) in children under five from 27.7% to 14%. This study aims to determine what factors are associated with the nutritional status of toddlers in the Meureubo West Aceh Health Center Working Area. This study is a quantitative study that is descriptive analytic with a cross-sectional design. This research was conducted at the Meureubo Health Center Work Area, West Aceh Regency. The population in this study were all mothers who had toddlers (1-5 years), namely 1,364 respondents. The sample was 93 respondents who were analyzed using univariate and bivariate analysis. The results of this study showed the level of maternal education (p-value = 0.298 > α 0.05), parental income (p-value = 0.922 > α 0.05), maternal employment (p-value = 0.672 > α 0.05), history of infectious disease (p-value = 0.010 < α 0.05), feeding (p-value = 0.668 > α 0.05). The associated variables were history of infectious diseases and the unresolved ones were mother's education level, parents' income, mother's occupation, and feeding. It is suggested that future researchers can make this research a scientific reference to conduct further research or conduct similar research in the future.

Keywords*: Determinants, Nutritional Status, Toddlers*

INTRODUCTION

According to 2018 data from the World Health Organization, nutritional issues in developing countries are still considered a major problem in the world population order. Therefore, this issue has become one of the important points, namely the second point or second *goal which has become a global agreement in the Sustainable Development Goals* (SDGs), where each country must gradually be able to reduce the number of children under five who are malnourished or malnourished until it reaches 15% by 2030. [1]

The National Medium Term Development Plan (RPJMN) 2020-2024, Efforts to improve social nutrition have several main goals, namely to reduce the prevalence of dehydration in children under 5 years of age from 10.2% to 7% and to reduce the prevalence of (short and very short) stunting in children under five from 27.7% to 14%. Indonesia is committed to implementing the 2030 Agenda by enacting Presidential Regulation No.59 of 2017 on the Implementation of the Sustainable Development Goals. The second SDG, the global goal for 2030 are to ending hunger, ensuring food security and good nutrition, and improving sustainable agriculture.[2]

Toddlerhood is a very fast stage in life so it requires proper nutrition to maintain growth and development.[3]. Toddlers are a golden period where the process of growth and development takes place in childhood so that small children who grow well as adults can also grow well. Nutritional problems, especially malnutrition, occur most often in children under the age of five.[4]

Adequate nutrition and nutrition is one of the most important factors to improve the quality of human resources and an indicator of the success of a country's development. In this case, nutrition affects the intelligence and labor productivity of human resources. Currently, Indonesia is still suffering from nutrition problems, which has significant impact on the quality of human resources. One of the nutritional problems still very high in Indonesia is waste *or* low nutritional status in toddlers .[5]

Nutritional problems are actually not a problem that is only caused by poverty. However, it is also influenced by socio-cultural aspects (beliefs, education and work) in society, resulting in actions that do not support the achievement of adequate nutrition for toddlers. The socio-economic situation of the family greatly influences the satisfaction of primary and secondary needs or not are met, as well as the attention and affection that children will receive. It is clear that a mother's behavior as a primary caregiver is an important factor in her child's health. Infant nutrition plays a very important role in the development of a toddler as food contains many nutrients. However, because mothers work, their behavior when caring for children often does not match the time they spend as parents. Working outside the home reduces the frequency with which mothers see their children and prevents mothers from directly controlling their children's daily eating habits.

Infectious diseases can also disrupt the growth and wholesome status of children beneath 5 a long time of age, as infections can reduce nutrient intake, impair nutrient absorption, and cause direct nutritional losses.[6] Infectious diseases have a direct inhibitory effect on metabolic processes, including the epiphyseal growth plate which can cause growth disorders in children through malnutrition. Infectious diseases are the dominant factor causing *stunting* in children under five. Infectious diseases can be caused by poor nutrition in children and mothers during pregnancy, and lack of access to sanitation and clean water.[7]

Based on the anthropometric index, nutritional status is grouped into *underweight* (WW/U), *stunting* (TB/U) and *wasting* (WW/TB).[8] Based on data from the integration of Susenas and the 2019 Indonesian Nutrition Status Survey (SSGI) , the prevalence *of stunting* in Indonesia is 27.7%, while the prevalence *of underweight* is 16.3%, while the prevalence of *wasting* is 7.4%. Meanwhile, in 2021, SSGI results show that the prevalence of nutritional status of *stunted toddlers* is 24.4%, *wasting toddlers* is 7.1% and *underweight toddlers* is 17%. And in 2022 *stunting will be* 21.6%, *wasting* 7.7%, *underweight* 17.1%. We can see that this is proven by the fact that cases of undernutrition, overnutrition and *stunting are still found.*[9]

Summary of the West Aceh Health Service in 2020. The percentage of malnutrition was 7.2%, *wasting* 5.8%, and *stunting* 12.4%. In 2021, children under five will be malnourished at 0.4%, *wasting* at 0.2%, *stunting* at 0.4%. And in 2022, 5.7% of children under five will be malnourished, 8.1% *wasted* and 9.1% *stunted.* Data from the Meureubo Community Health Center shows that the number of toddlers experiencing malnutrition/malnutrition problems in 2020 was 4.9%, while in 2021 the number was 3.94% of toddlers and in 2022 it was 3.81% of toddlers. The number of little children with malnutrition/malnutrition status, particularly within the Meureubo Community Wellbeing Center working region, in 2023 is 2.18% and is still being treated today. This shows that cases of malnutrition/malnutrition among toddlers in the Meureubo Community Health Center working area are still a problem that needs serious attention and treatment. Based on the information over, analysts are curious about conducting inquire about on "Determinants of Nutritional Status in Toddlers in the Meureubo Health Center Working Area, West Aceh Regency".

RESEARCH METHODS

This sort of ponder may be a quantitative think about with a cross-sectional approach, which points to discover out what components are related with the wholesome status of children beneath 5 a long time ancient within the working region of Mulebo Health Center, West Aceh in 2023. This ponder was conducted within the working zone of Meureubo Territorial Wellbeing Center, West Aceh. The subjects of this ponder were moms with youthful children matured 1 to 5 a long time ancient within the working zone of Meureubo Territorial Wellbeing Center., Meureubo Locale, West Aceh Rule, specifically 1,364 newborn children. The test in this inquire about was 93 respondents utilizing the Slovin equation.

There are two ways of collecting data, to be specific essential information and auxiliary information. Essential information gotten was coordinate perception by interviewing and distributing questionnaires which included the identity of the respondents, namely parents, the identity of children beneath five, the dietary status of children beneath five. Secondary data is data obtained from other parties and not collected directly by researchers. In this research, data was obtained from the Meureubo Community Health Center in the form of data on the number of children aged 1-5 years in the Meureubo

Community Health Center area who were recorded in the nutrition clinic and data from the children's clinic as well as the children's clinic service visit book.

There are three data collection techniques, namely using observations carried out directly by looking at data on the number of children aged 1-5 years in the working area of the Meureubo Health Center, children's polyclinic visit books, and looking at data records from monthly and annual summary reports of children's polyclinics and nutrition polyclinics. The second interview was conducted directly with the mother as the respondent by asking several questions contained in the questionnaire as a tool in collecting data. And thirdly, a survey is a data collection method in which respondents are presented with a set of questions or written responses.

RESEARCH RESULT

Description of Research Location

UPT Puskesmas Meureubo is a puskesmas located in the Meureubo District area. Founded in 1992, it is located to the west of Meulaboh City, approximately 6 km away, precisely in Gampong Paya Peunaga. The area is 112.87 Km2 with the percentage of sub-district to district area being 3.85%. The total working area includes 26 gampongs, 81 hamlets and two settlements, namely the Meureubo settlement and the Ranto Panjang settlement. Of the 26 villages, 23 are in the normal village category and 3 villages are in the very remote village category. There are 2 gampongs, namely Peunaga Baro and Pasir Putih, which are preparatory villages for definitive .

Toddler Characteristics

1. Gender

No.	Toddler Gender	Frequency (n)	Percentage (%)
1.	Man	41	44.1
2.	Woman	52	55.9
	Total	93	100

Based on the table above, it can be seen that the toddler is male there were 41 people (44.1%), and there were 52 women (55.9%).

2. Toddler Age

No.	Toddler Age	Frequency(n)	Percentage (%)
1.	12-24 Months	22	23.7
2.	25-36 Months	31	33.3
3.	37-48 Months	11	11.8
4.	49- 60 Months	29	31.2
	Total	93	100

Based on the table above, it can be seen that there are 22 toddlers aged 12-24 months (23.7%), 31 toddlers aged 25-36 months (33.3%), 11 toddlers aged 37-48 months. (11.8%), 29 children aged 49-60 months (31.2%).

Mother's Characteristics

1. Mother's age

No.	Age of Mother of Toddler	Frequency (n)	Percentage (%)
1.	25-32 Years	54	58.1
2.	33-42 Years	33	35.5
3.	43-50 Years	6	6.5
	Total	93	100

Based on the table above, it can be seen that there are 59 mothers of toddlers aged 25-32 years (58.1%), there are 33 mothers of toddlers aged 33-42 (35.5%), there are 6 mothers of toddlers aged 43-50. people (6.5%).

Univariate Analysis

1. Mother's Education Level

No.	Education of Mothers of Toddlers	Frequency (n)	Percentage (%)
1.	Low	20	21.5
2.	Tall	73	78.5
	Total	93	100

Based on the table above, it can be seen that 20 of the 93 toddlers had low maternal education (21.5%), and 73 (78.5%) had higher education.

2. Parents' income

No.	Parental Income	Frequency (n)	Percentage (%)
1.	Low	75	80.6
2.	Tall	18	19.4
	Total	93	100

Based on the table above, it is known that of the 93 children under five, 75 people (80.6%) had relatively low incomes of their parents, and 18 people (19.4%) had high incomes.

3. Mother's Occupation

No.	Mother's Job	Frequency (n)	Percentage (%)
1.	Doesn't work	81	87.1
2.	Work	12	12.9
	Total	93	100

Based on the table above, it can be seen that 81 of the 93 children under five had mothers who did not work (87.1%), and 12 of them had mothers who worked (12.9%).

4. History of infectious disease

No.	History of Infectious Diseases	Frequency (n)	Percentage (%)
1.	Act of Having a History of Infectious Diseases	26	28.0
2.	Have a history of infectious diseases	67	72.0
	Total	93	100

The table shows that of the 93 children under the age of 5 with no history of infectious diseases, 26 (28.0%) and 67 (72.0%) had a history of infectious diseases**.**

5. Providing food

No.	Feeding	Frequency (n)	Percentage (%)
1.	Less precise	42	45.2
2.	Appropriate	51	54.8
	Total	93	100

Based on the table above, it can be seen that of the 93 toddlers whose food was given inappropriately, there were 42 (28.0%), and 51 (54.8%) of the toddlers who had the right food were given.

6. Nutritional Status of Toddlers

No.	Nutritional Status of Toddlers	Frequency (n)	Percentage (%)
1.	Very Underweight	11	11.8
2.	Underweight	31	33.3
3.	Normal	48	51.6
4.	Risk of being overweight	3	3,2
	Total	93	100

Based on the table above, it can be seen that of the 93 toddlers who are very underweight, 11 are underweight (11.8%), 31 are underweight (33.3%), 48 are normal (51.6%), while they are at risk. 3 people (3.2%) were overweight.

Bivariate Analysis

1. The Relationship between Maternal Education Level and Nutritional Status of Toddlers in the Meureubo Community Health Center Working Area, West Aceh Regency

Mother's Education	Nutritional status										P -*Value*
	Very less		Not enough		Normal		More		Total		
	n	%	n	%	n	%	n	%	n	%	
Low	4	44.4	5	21.7	10	17.2	1	33.3	20	21.5	
Tall	5	55.6	18	78.3	48	82.8	2	66.7	73	78.5	0.298
Total	9	100	23	100	58	100	3	100	93	100	

Based on the table above, it shows that of the 20 toddlers who had low maternal education, the nutritional status was very low weight, 4 toddlers (44.4%), then the nutritional status was very low weight, 5 toddlers (21.7%), The normal nutritional status was 10 toddlers (17.2%), and the nutritional status at risk of being overweight was 1 toddler (33.3%). Meanwhile, for toddlers who have high maternal education, there are 73 people, namely with very low weight nutritional status, 5 toddlers (55.6%), 18 toddlers with very low weight nutritional status (78.3%), normal nutritional status. There are 48 toddlers (82.8%), and 2 toddlers (66.7%) have a nutritional status that is at risk of being overweight. From the research results it can be concluded that the majority of mothers who have a high level of education actually have a nutritional status. which is good and for mothers with a low level of education only a few or (21.5%) also have good nutritional status so that the researchers draw the conclusion There was no association between maternal educational factors and infant nutritional status, reaching a *P value* of 0.298 (>0.05), which means that H0 is accepted and H1 is rejected.

2. The Relationship between Parental Income and Nutritional Status of Toddlers in the Working Area of the Meureubo Health Center, West Aceh Regency.

Parental income	Nutritional status										P -*Value*
	Very less		Not enough		Normal		More		Total		
	n	%	n	%	n	%	n	%	n	%	
Low	7	77.8	19	82.6	47	81.0	2	66.7	75	80.6	
Tall	2	22.2	4	17.4	11	19.0	1	33.1	18	19.4	0.922
Total	9	100	23	100	58	100	3	100	93	100	

Based on the table above, it shows that of the 75 toddlers who have low parental income, that is, 7 toddlers (77.8%) have very low weight nutritional status, 19 toddlers (82.6%)

have very low weight nutritional status. Normal nutritional status was 47 toddlers (81.0%), nutritional status at risk of being overweight was 2 toddlers (66.7%). Meanwhile, there are 18 toddlers who have high parental income, namely with a very low weight nutritional status of 2 toddlers (22.2%), a nutritional status of underweight of 4 toddlers (17.4%), a normal nutritional status. 11 toddlers (19.0%), the nutritional status at risk of being overweight was 1 toddler (33.1%) and a p-value of 0.922 (>0.05) was obtained , which indicated that H0 was accepted/H1 was rejected.

3. The Relationship between Maternal Employment and Nutritional Status of Toddlers in the Working Area of the Meureubo Health Center, West Aceh Regency.

Mother's Job	Nutritional status										P -*Value*
	Very less		Not enough		Normal		More		Total		
	n	%	n	%	n	%	n	%	n	%	
Low	8	88.9	21	91.3	50	86.2	2	66.7	81	87.1	
Tall	1	11.1	2	8.7	8	13.8	1	33.3	12	12.9	0, 672
Total	9	100	23	100	58	100	3	100	93	100	

Based on the table above, it shows that of the 81 toddlers who have the status of mothers who do not work, that is, the nutritional status is very low weight, 8 toddlers (88.9%), the nutritional status is underweight, 21 toddlers (91.3%) , the nutritional status was normal for 50 toddlers (86.2%), the nutritional status at risk of being overweight was 2 toddlers (66.7%). Meanwhile, there are 12 toddlers who have the status of working mothers, namely with a very low weight nutritional status of 1 toddler (11.1%), a very low weight nutritional status of 2 toddlers (8.7%), a normal nutritional status of 8 toddlers (13.8%), the nutritional status at risk of being overweight was 1 toddler (33.3%) and a p-value of 0.672 (>0.05) was obtained which indicated that H0 was accepted/H1 was rejected.

4. Relationship between history of infectious disease and nutritional status among toddlers in the working area of Meureubo Health Center, West Aceh Regency.

History of Infectious Diseases	Nutritional status										P -*Value*
	Very less		Not enough		Normal		More		Total		
	n	%	n	%	n	%	n	%	n	%	
Do not have	0	0.0	7	30.4	16	27.6	3	100	26	28.0	
Own	9	100	16	69.6	42	72.4	0	0.0	67	72.0	0.010
Total	9	100	23	100	58	100	3	100	93	100	

Based on the table above, it shows that of the 26 toddlers who do not have a history of infectious disease, that is, the nutritional status is very low, the nutritional status is very low, the nutritional status is less than 7 toddlers (30.4%), the nutritional status is normal for 16 toddlers. (27.6%), nutritional status is at risk of being overweight for 3 children under five (100%). Meanwhile, 67 toddlers with a history of irresistible infection, to be specific with exceptionally moo weight dietary status, were 9 little children (100%), the dietary status of underweight little children was 16 little children (69.6%), the wholesome status of typical little children was For 42 little children (72.4%), the dietary status of little children was at risk of being overweight and there was a p -value of 0.010 (<0.05) which indicated that H0 was rejected/H1 was accepted.

5. The Relationship between Feeding and Nutritional Status of Toddlers in the Meureubo Community Health Center Working Area, West Aceh Regency.

Feeding	Nutritional status										P -*Value*
	Very less		Not enough		Normal		More		Total		
	n	%	n	%	n	%	n	%	n	%	
Less precise	3	33.3	9	39.1	29	50.0	1	33.3	42	45.2	0.668

Appropriate	6	66.7	14	60.9	29	50.0	2	66.7	51	54.8
Total	9	100	23	100	58	100	3	100	93	100

Based on the table above, it shows that of the 42 toddlers who were given inappropriate food, namely with very low weight nutritional status, 3 toddlers (33.3%), 9 toddlers (39.1%) had very low weight nutritional status. Normal nutrition was 29 toddlers (50.0%), nutritional status at risk of being overweight was 1 toddler (33.3%). Meanwhile, there are 51 toddlers who are given proper food, namely with very low weight nutritional status, 6 toddlers (66.7%), 14 toddlers with very low weight nutritional status (60.9%), normal toddler nutritional status. 29 children under five (50.0%), the nutritional status at risk of being overweight was 2 children under five (66.7%) and a p-value of 0.668 (>0.05) was obtained which indicated that H0 was accepted/H1 was rejected.

DISCUSSION

The Relationship between the Educational Level of Mothers of Toddlers and the Nutritional Status of Toddlers in the Working Area of the Meureubo Community Health Center, West Aceh Regency

Based on the comes about of the ponders conducted, as appeared in table abouve, the discoveries of the consider appear that maternal instruction isn't measurably related with newborn child dietary status. with a p- esteem (0.298) , of the full number of 58 little children who have ordinary nourishment, the lion's share of moms have a moo level of instruction break even with to 10 (17.2%) respondents whereas little children whose moms had a tall level of instruction were 48 (82.8%) respondents. These information appear that mother's instruction level has no relationship with newborn child dietary status as the p-value is more prominent than 0.05.

The discoveries of this consider are reliable with a think about (Lestari, Pakkan, & Surianto, 2019) that appeared no affiliation between maternal instruction level and newborn child dietary status, since moms of little children get data from each posyandu movement at the Mekar Kendari Community Wellbeing Center.[10] This can be moreover strengthened by investigate (Andini et al. , 2020) which uncovers that the nonattendance of a Relationship between maternal instruction level and dietary status of children beneath 5 years of age children (two year old babies) means that mothers with higher education have a tendency to be less able to implement their knowledge regarding nutrition. For children, information about nutritional status can also be obtained not only from formal education, but also health facilities such as Community Health Centers and Posyandu and via the internet.[11] And this is further strengthened by research (Casando, Hapis and Wuni, 2022) the report said there was no relationship between mothers' education level and infant nutritional status at Pearl Merah II Community Health Centre in Jambi city a p- *value* = 0.054, which is due to mothers being highly educated. or low does not affect nutritional status because the information obtained to improve the nutritional status of toddlers can be obtained from anywhere, especially in this era of technology.[12]

So it can be concluded that in this study, maternal education is not related to the dietary status of little children. This will happen since in this ponder the number of moms who have moo instruction overwhelmingly have normal wholesome status of little children, which suggests that the dietary status of little children is helped by providing appropriate food to toddlers. and some also do not have a history of infection, this can be influenced by the routine activities of community health centers and posyandu to convey health information and education about children's nutrition on a regular basis. Mothers can also get information from various media sources with advances in modern technology such as the internet, television, regarding good nutrition for their toddlers. And it can be seen during interviews that mothers within the working zone of the Meureubo Community Wellbeing Center, West Aceh Rule always come every month to bring their children to the Posyandu. Then, based on the answers of mothers of toddlers in the field, they said that they had looked for information about toddler nutrition on social media such as on *cellphones* .

The Relationship between the Income of Toddlers' Parents and the Nutritional Status of Toddlers in the Working Area of the Meureubo Community Health Center, West Aceh Regency

Based on the discoveries of the study conducted, the discoveries appear that parental pay isn't factually related with the wholesome status of youthful children as shown in table above with a p- *value* (0.922), of the total number of 58 toddlers who have normal nutrition, the majority have low parental income. amounted to 47 (81.0%) respondents, while toddlers who had high parental income amounted to 11 (19.0%) respondents.

This inquire about is in line with investigate conducted [12] , financial status does not appear a noteworthy relationship between financial status and wholesome status in little children (1,000>0.05), which clarifies that the lion's share of inquire about respondents, get help from the government through social administrations (PKH).[13] Additionally in line with inquire about (Wahyuningsih et al. , 2020) , explaining that there's no noteworthy relationship between family wage and the wholesome status of toddlers aged 6 to 59 months within the Bantimurung Community Wellbeing Center working zone. This may occur because the toddler's family actually has sufficient income, but because the family's spending arrangements are not good, for example too little food is provided, spending is more on purchasing other goods than on fulfilling the child's nutritional needs, as a result the child experiences problems. poor nutritional status. On the other hand, low income still prioritizes family food consumption so that the child's nutritional status is classified as normal. It is known that good nutrition does not have to come from expensive food, papaya and bananas, for example, are considered cheap food but have many health benefits. Likewise vegetables, especially those who live in rural areas.[14]

This is also supported by research [15] which states that the comes about of the Chi Square test appear that the comes about are not critical with a esteem of p = 0.49, meaning p> 0.05. This implies that there's no relationship between family pay and the dietary status of little children It is hoped that the income obtained will also meet the needs of his family, including food, clothing, shelter and other supporting needs. There are several factors that influence this condition, one of which is the lack of role of the family, especially mothers, in prioritizing nutritional intake for toddlers.[15]

From the results of this research we can see that toddlers who have low parental income are not related to the wholesome status of little children, based on the inquire about comes about of the full little children who have low parental income of 75 respondents with 45 toddlers who have normal nutrition while the toddlers who Those with high parental income out of a total of 18 respondents, 11 toddlers with normal nutritional status, it can be concluded in this study that toddlers who have low parental income predominantly have normal toddler nutritional status. This happens because the education of the toddler's parents is good and they are assisted by providing the toddler with appropriate food and also the toddler does not have a history of infection. Apart from that, seen from direct observation during the research, almost all toddlers who have low parental income receive assistance from the government through social services (PKH) which is marked with a sticker in front of their house, so economically it is not an obstacle for parents of toddlers to provide food. good nourishment so that the wholesome status of little children with moo financial status has ordinary wholesome status of little children. Concurring to analysts, the tall number of little children who have great wholesome status is because not all nutritious food is expensive, so it can be felt by anyone, especially mothers who understand about healthy food. However, low-income families can also consume food that has good nutritional value, by planting vegetables in their yard and can add a source of good nutrition. Likewise, for toddlers who have high parental income, it will be easier to obtain nutritious food intake according to the toddler's nutritional status.

The Relationship between the Work of Mothers of Toddlers and the Nutritional Status of Toddlers in the Working Area of the Meureubo Community Health Center, West Aceh Regency

Based on the results of the research that has been carried out, it can be seen in table above, the results of the research show that the employment status of mothers of toddlers is statistically not related to the nutritional status of toddlers with a p- *value* (0.672), of the total number of 58 toddlers who have normal nutrition, the majority have maternal employment status. 50 toddlers (86.2%) did not work, while 8 toddlers had mothers who worked (13.8%). We can see from the research results that the total number of mothers who do not work is 75 toddlers, the majority of which 50 have normal toddler nutritional status and the toddlers who have working mother status are 12 toddlers and 8 of them have normal nutritional status.

This inquire about is in line with investigate which states that the factual test comes about gotten a p.value of 0.394, meaning there's no noteworthy relationship between work and dietary status. Moms who work exterior the domestic will certainly discover it troublesome to screen and provide good nourishment that's healthfully fitting for the advancement and development of little children. Compared to moms who don't work, they have more openings to supply way better nourishment that suits their toddler's nourishment [16]. Additionally confirmed by investigate [17] clarifying It was found that there's no critical relationship between maternal business and newborn child dietary status within the working region of Naioni Wellbeing Center in Kupang City with p-value (0.138 ≥ 0.05). This is often because non-working moms have more time to go to posyandu within the morning to urge additional nourishment and wellbeing instruction than working moms. Indeed on the off chance that working moms don't have time to go to posyandu, Working moms can increment their family salary and back their children's improvement by empowering guardians to enough meet their children's wholesome needs. [18]

The comes about of this consider appear that the lion's share of moms of little children who don't work have great (typical) dietary status for little children. Typically since moms who don't work have free time to pay attention to nutritional needs so that appropriate food is given to toddlers, and mothers can also pay attention to health conditions. toddlers to avoid infectious diseases, as well as the ability to regulate nutritional intake, and ensure the availability of nutritious food at home. In this study, it was found that mothers who have jobs also have good (normal) nutritional status for toddlers. This is because working parents can increase family income, thus influencing the family in meeting food needs, especially the nutritional needs of children and their families because if the economy is good, it is easy to obtain sufficient and nutritious food. Apart from that, parents who work, children are cared for by their family or grandmother so that while the parents are working, their toddlers still get the right and balanced food intake. So it can be concluded that parental employment factors are not significantly related to the nutritional status of toddlers.

The Relationship between the History of Infectious Diseases in Toddlers and the Nutritional Status of Toddlers in the Working Area of the Meureubo Community Health Center, West Aceh Regency

Based on the comes about of the inquire about that has been carried out, it can be seen in table over, the comes about of the inquire about appear that the history of irresistible maladies in little children is related to the dietary status of little children with a p- esteem (0.010), of the whole number of 58 toddlers who have typical sustenance, the larger part don't have a history of irresistible infections. there were 16 little children (27.6%), whereas 42 little children had a history of irresistible maladies (72.4%).

This studies is in keeping with studies (Handayani, 2017) which states that the effects of statistical exams received a p- *value* of 0.001 (p<0.05). The results of the research show that many children under five have poor nutritional status. This is where the cause of the incident in children under five who experienced poor nutritional status was based on the background of children under five who had a history of infectious diseases that the toddler had experienced. So it shows that there is an influence from a history of infectious diseases on the incidence of malnutrition status in the mother's toddler.[18]

And it is also supported by research (Makanlehi and Redjeki, 2020) , which states That the consequences of the chi-rectangular statistical take a look at received p- *value* = 0.013 (<0.05), there's a large dating among infectious sicknesses skilled via way of means of younger youngsters and the dietary repute of village toddlers. Alimmebung Alor Regency, researchers believe there is a link between infectious diseases and the nutrition of children under five. Toddlers infected with infectious diseases lose their appetite, resulting in weight loss. When children are sick, toddlers need a wider variety of processed foods, but mothers ultimately encourage children to eat whatever food is available, which results in the food being eaten no longer being suitable for the nutrition needed by the body which results in weight loss.[19]

This is also supported by research [20] which states that infectious diseases are diseases that are often associated with malnutrition in developing countries. Infections that often occur in children are upper respiratory tract infections (ARI). Infections can be related to nutritional disorders in several ways, namely affects appetite, causes food loss due to vomiting/diarrhea, or affects food metabolism.

Statistical tests using the chi-square test gave a p-value of p = 0.019 (p-value ≤ 0.05), so H0 was rejected and there was a significant relationship between the machines history of infectious disease and the nutritional status of toddlers based on weight for age in toddlers in Naioni Health Center Working Area, Kupang City. The results of this study show that the reaction due to infection is a decrease in the toddler's appetite so that the toddler refuses the food given. This results in reduced nutritional intake in the body. Infections can disrupt metabolism, cause hormonal imbalances and impair immune function. Infectious diseases that affect nutrition in young children include diarrhea, fever and cough associated with influenza, bronchitis, parasites, measles and Singapore flu. There are also congenital diseases that affect young children, such as heart defects and congenital anomalies, as well as mental disorders. Infectious diseases that affect children lead to malnutrition in young children.[17]

It can be seen from the research results that the total number of toddlers who do not have a history of infectious disease is 26 toddlers, some 16 toddlers have good (normal) nutrition, while the total number who have a history of infectious disease is 67 toddlers, the majority of whom 42 have the status of good (normal) toddler nutrition. This happens because infection can cause a lack of appetite, resulting in low food intake which ultimately causes malnutrition in toddlers, infectious diseases can worsen nutritional conditions, and poor nutritional conditions can make it easier to get infections. Apart from that, it also causes children to eat irregularly or change eating patterns and result in weight loss and nutritional status in toddlers. Apart from that, it was seen during the research that many mothers were reluctant to take their children to the health center due to long waiting queues and also still liked to buy medicine at the pharmacy. without seeing a doctor and some are only treated with village medicine or traditional medicine, therefore the child's nutritional status will be disturbed without being checked by a specialist or expert.

The Relationship between Providing Food to Toddlers and the Nutritional Status of Toddlers in the Meureubo Community Health Center Working Area, West Aceh Regency

Based on the results of the research that has been carried out, it can be seen in table above, the results of the research show that giving food to toddlers has no relationship with the nutritional status of toddlers with a p- *value* (0.668), of the total number of 58 toddlers who have normal nutrition, most of them are not appropriate in giving food for 29 toddlers (50.0%), while appropriate food provision for toddlers was 29 toddlers (50.0%).

This study is in agreement with who stated that there may be no full-size dating among toddler nutrients and toddler dietary status. That is why: good or bad diet does not affect child nutritional status, because the child is used to the diet provided by the parents. With eating patterns (p- *value* = 0.668) with the nutritional status of toddlers in the North Singkawang District Health Center area, Singkawang City.[20]

And it is also confirmed by research (Oematan, Dion and Lette, 2021). Chi-square test results show p-value = 0.454, where p > α (0.454> 0.05), which way that there may be no extensive courting among weight-reduction plan and condition. child meals in Pustu Buraen. Ardi believes that there may be no extensive courting among the ingesting conduct of younger kids and their dietary status, this is because most of the parents of the respondents have implemented good feeding patterns in choosing the type of food and nutrition of their food.[21]

It can be seen from the results of the research that the total number of toddlers who were given inappropriate food was 42 toddlers, some 29 toddlers had good (normal) nutrition, while the total number who were given proper food was 51 toddlers, the majority of whom 29 had nutritional status. good (normal) toddler. From the explanation above, we can conclude that in this study, mothers who were not appropriate in giving food predominantly had normal nutritional status for their toddlers, this is because the food (diet pattern) provided by the toddler's parents even though they had a frequency of eating less than three times a day but the composition of food ingredients, the amount of food given to meet the nutritional status required by the body, namely sources of energy (rice, bread, sugar, etc.), sources of building substances, for example (fish, meat, eggs, etc.) and regulatory substances such as

(vegetables, fruits). As well as providing additional food such as bread, cereal, pudding, porridge and fruit consumed. This type of feeding pattern will ensure that children have good nutritional status. A good diet does not necessarily contain good nutritional intake. Many toddlers are given good food (feeding frequency) but do not meet the amount of nutritional composition that meets the requirements for balanced nutrition. This is because children do not consume vegetables, fish and milk, even though the method of feeding is correct and the frequency of meals is regular, not consuming vegetables and fruit can affect the nutritional status of toddlers. The food given to toddlers is not only satisfying, but must also contain the good nutrients needed by the body. Then we also helped with several toddlers who were given inappropriate food but had no history of infectious diseases.

CONCLUSION

Based on the results of research on the determinants of nutritional status in toddlers in the Meureubo Community Health Center Working Area, West Aceh Regency, it can be concluded:

1. There is no relationship between maternal education level and nutritional status of toddlers in the Meureubo Community Health Center working area, West Aceh Regency in 2023 (p-value = 0.298 > α 0.05).
2. There is no relationship between parental income and the nutritional status of toddlers in the Meureubo Health Center working area, West Aceh Regency in 2023 (p-value = 0.922 > α 0.05).
3. There is no relationship between the employment of mothers of toddlers and the nutritional status of toddlers in the working area of the Meureubo Community Health Center, West Aceh Regency in 2023 (p-value = 0.672 > α 0.05).
4. There's a relationship history of infectious diseases and nutritional status of toddlers in the Meureubo Health Center working area, West Aceh Regency in 2023 (p-value = 0.010 < α 0.05).
5. There is no relationship between food provision and the nutritional status of toddlers in the working area of the Meureubo Community Health Center, West Aceh Regency in 2023 (p-value = 0.668 > α 0.05).

SUGGESTIONS

It is recommended to parents and health workers to further improve the handling of nutritional status in toddlers, especially the prevention of infectious diseases and pay attention to the health of children under five by implementing preventive measures against infectious diseases through immunization, fulfilling nutrition and checking children's health at community health centers or health service locations. The results of this research can be a source of information and input for community health centers.

REFERENCE

1. World Health Organization. (2018). Prevalence of Nutritional Status of Children Under Five Worldwide in 2020.
2. Bappenas. (2021). National Medium Term Development Plan 2020-2024. 1, editors. Jakarta: Ministry of National Development Planning.
3. Chawla1, S. et al. (2020) 'Undernutrition and associated factors among children 1-5 years of age in rural areas of Haryana, India: A community based cross-sectional study', Journal of Family Medicine and Primary Care, 9(8), pp.4240–4246. Availableat: https://doi.org/10.4103/jfmpc.jfmpc .
4. Zeray, A., Kibret, G.D. and Leshargie, C.T. (2019). 'Prevalence and associated factors of undernutrition among under-five children from model and non-model households in east Gojjam zone, Northwest Ethiopia: A comparative cross-sectional study', BMC Nutrition, 5(1),pp.1–10. Available at: https://doi.org/10.1186/s40795-019-0290-y .
5. Chandra, A. (2020). Epidemiology of Stunting. 1st printing. Semarang: Diponegoro University.
6. Aridiyah1, FO, Rohmawati1, N. and Mury Ririanty2 (2015) 'Factors Affecting Stunting on Toddlers in Rural and Urban Areas', e-Jurnal Pustaka Kesehatan , 03(1), pp. 163–170. Available at: https://doi.org/10.1007/s11746-013-2339-4 .

7. Yulnefia and Sutia, M. (2022). 'Relationship between history of infectious disease and incidence of stunting in toddlers aged 24-36 months in the working area of the Tambang Health Center, Kampar Regency', Jambi Medical Journal, 10(1), pp. 154–163.
8. Indonesian Ministry of Health. (2020). Regulation of the Minister of Health of the Republic of Indonesia. https://yankes.kemkes.go.id/unduhan/fileunduhan1660187306961415.pdf . Accessed on November 8, 2023.
9. Susenas and Indonesian Nutrition Status Survey (SSGI). (2019). https://stunting.go.id/?sdmproc ess download=1&downloadid = 5219 .
10. Susenas and Indonesian Nutrition Status Survey (SSGI). (2019). https://stunting.go.id/?sdmpr ocess download=1&downloadid = 5219 .
11. Andini, EN et al. (2020) 'Factors Associated with Nutritional Status in Children Aged 0-23 Months Based on the Composite Index of Anthropometric Failure (CIAF) in the Karangayu Community Health Center Working Area, Semarang City', Journal of Community Health Epidemiology, 5(2), pp.104 –112. Available at: https://doi.org/10.14710/jekk.v5i2.5898 .
12. Casando, N.I., Hapis, A.A. and Wuni, C. (2022). 'The Relationship between Maternal Education, Knowledge, Attitudes and Parenting Patterns on Children's Nutritional Status', Jip, 2(8), pp. 2429–2432.
13. Ramadhani, F., Hatta, H. and Abidi, A. (2021). 'Determinants of Nutritional Status of Toddlers in Boilan Health Center, Buol Regency', Gorontalo Journal of Nutrition Die tetic,1(1),pp.1–6.Available at: https://jurnal.unigo.ac.id/index.php/gjnd /article/view/1401/642 .
14. Wahyuningsih, S. et al. (2020). 'Education, Income and Parenting Style with Nutritional Status of Toddlers', Journal of Professional Nursing, 1(1), pp.1–11. Available: https://doi.org/10.36590/kepo Http:ojs.yapenas21maros.ac.id /index.php/kepo .
15. Nurhayati, I. and Hidayat, AR (2019). 'Analysis of Factors Associated with the Nutritional Status of Toddlers in Sragen Regency', Interest: Journal of Health Sciences, 8(1), pp.1–8. Available at: https://doi.org/10.37341/interest.v8i1.110 .
16. Hidayah, N., Kasman, K. and Mayasari, M. (2018) 'Factors Associated with Nutritional Status in the Upt Work Area. Kertak Hanyar Community Health Center, Banjar Regency', An-Nadaa: Public Health Journal, 5(1). Available at: https://doi.org/10.31602/ann.v5i1.1645 .
17. Ch, G. et al. (2023) 'Factors Associated with the Nutritional Status of Toddlers (Under Five Years) in the Naioni Health Center Working Area, Kupang City', 2(4), pp.838–849. Available at: https://doi.org/10.55123/sehatmas.v2i4.2322 .
18. Handayani, R. (2017) 'Factors Associated with Nutritional Status in Children Under Five', Endurance Journal, 2(2), p.217. Available at: https://doi.org/10.22216/jen.v2i2.1742 .
19. Makanlehi, MST and Redjeki, GS (2020). 'Factors Associated with the Nutritional Status of Toddlers in Alor Regency', Carolus Journal of Nursing, 1(1), pp.36–46. Available: https://doi.org/10.37480/cjon.v1i1.28 .
20. Suzanna, S., Budiastutik, I. and Marlenywati, M. (2017). 'Analysis of Factors Associated with the Nutritional Status of Children Aged 6-59 Months', Health Vocational Journal, 3(1), p.35. Available at: https://doi.org/10.30602/jvk.v3i1.103 .
21. Oematan, A., Dion, Y. and Lette, AR (2021). 'Analysis of Factors Associated with Nutritional Status of Toddlers in Pustu Buraen, Sonraen Health Center Working Area, Kupang Regency', CHMK Health Journal, 5(1), pp.242–251.Available at: file:///C:/Users /axioo/Downloads/document(4).pdf .