



NUTRITIONAL HEALTH IN EARLY CHILDHOOD IN RA DDI MAJENNANG, SUPPA DISTRICT, PINRANG REGENCY

KESEHATAN GIZI PADA ANAK USIA DINI DI RA DDI MAJENNANG KECAMATAN SUPPA KABUPATEN PINRANG

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Abstract

Nutrition health in early childhood plays an essential role in supporting optimal growth and development. This study aims to determine the nutritional status of children at RA DDI Majennang, Suppa District, Pinrang Regency, and the factors influencing it. The research used a descriptive method with observation and interviews involving teachers and parents. The results showed that most children had good nutritional status, although some experienced undernutrition due to unbalanced diets and limited parental knowledge about nutrition. The main factors influencing children's nutritional status included parents' knowledge level, family income, and frequent consumption of fast food. These findings highlight the importance of providing nutrition education for parents and fostering cooperation between schools and families to improve the nutritional health of early childhood students at RA DDI Majennang.

Keywords: Nutrition health, Eating patterns, Nutrition education



Abstrak

Kesehatan gizi pada anak usia dini memiliki peran penting dalam menunjang pertumbuhan dan perkembangan optimal. Penelitian ini bertujuan untuk mengetahui status gizi anak di RA DDI Majennang, Kecamatan Suppa, Kabupaten Pinrang, serta faktor-faktor yang mempengaruhinya. Metode penelitian yang digunakan adalah deskriptif dengan teknik observasi dan wawancara kepada guru serta orang tua. Hasil penelitian menunjukkan sebagian besar anak memiliki status gizi baik, namun terdapat beberapa anak yang mengalami gizi kurang akibat pola makan yang tidak seimbang dan kurangnya pemahaman orang tua tentang gizi. Faktor utama yang mempengaruhi status gizi anak meliputi tingkat pengetahuan orang tua, pendapatan keluarga, dan kebiasaan konsumsi makanan siap saji. Hasil penelitian ini menekankan pentingnya penyuluhan gizi bagi orang tua dan kerja sama antara pihak sekolah dan keluarga untuk meningkatkan kualitas kesehatan gizi anak usia dini di RA DDI Majennang.

Kata kunci: Kesehatan gizi, Pola makan, Edukasi gizi

1. INTRODUCTION

Early childhood education institutions such as Raudhatul Athfal (RA) play a strategic role in supporting children's growth and development through fun learning programs and appropriate stimulation. RA is not only a place for children to learn letters, numbers, or social skills, but can also be an important means of providing nutrition counseling to parents. Through regular meetings, training, and healthy food programs at school, RA has great potential in forming healthy eating habits in children and increasing parental awareness of the importance of balanced nutrition for early childhood (Suyanto, 2019).

RA DDI Majennang, located in Suppa District, Pinrang Regency, is one of the early childhood education institutions that is active in providing basic education for children in the area. The existence of this RA greatly helps the community in providing access to affordable early childhood education. However, until now there has been no data or research report that has been specifically documented regarding the nutritional status of children who attend RA DDI Majennang. In fact, information about children's nutritional conditions is very important for planning appropriate educational and intervention programs to support children's overall health.

Based on this background, this study aims to determine the nutritional health status of early childhood at RA DDI Majennang and the factors that influence it. This study is expected to be a reference for schools, parents, and related agencies to design nutritional education programs, improve children's eating patterns, and increase awareness of the importance of balanced nutrition. Thus, children at RA DDI Majennang can grow and develop optimally both



physically and cognitively, thus supporting the realization of a healthy and intelligent generation in the future.

2. RESEARCH METHOD

This study uses a descriptive quantitative approach with the aim of obtaining an overview of the nutritional status of early childhood and the factors that influence it at RA DDI Majennang, Suppa District, Pinrang Regency. The descriptive research design was chosen because it is appropriate to describe the phenomena that are occurring in the field without providing treatment or intervention to the research subjects (Sugiyono, 2017). The population in this study were all children registered as students at RA DDI Majennang in the 2024/2025 academic year. The research sample was taken by total sampling involving all children present during the data collection period. The main data collection technique used was direct observation of children's nutritional status through anthropometric measurements including weight and height, which were then compared with WHO standards to determine the category of nutritional status. In addition, structured interviews were conducted with teachers and parents to identify children's eating patterns, parents' level of knowledge about nutrition, and family socio-economic factors.

The research instruments were in the form of anthropometric measurement observation sheets and interview guidelines that had been validated by nutritionists and early childhood education experts. Quantitative data from the measurement results were analyzed descriptively using frequency and percentage distributions to describe the distribution of children's nutritional status. Qualitative data from interviews were analyzed using data reduction, data presentation, and conclusion drawing techniques to obtain in-depth information regarding the causes of the nutritional problems found. This study also pays attention to research ethics by requesting written permission from the school and approval from parents as guardians of children before data collection is carried out. The confidentiality of the child's and parent's identities is maintained by not directly listing their names in the research report (Arikunto, 2013). This method is expected to provide a comprehensive picture of the nutritional status of early childhood at RA DDI Majennang as well as information on causal factors that can be used as a basis for compiling nutritional intervention programs in the RA environment.

3. RESULTS AND DISCUSSION

The results of the study showed that from a total of 48 early childhood respondents at RA DDI Majennang, there was a diverse distribution of nutritional status based on anthropometric measurements with WHO standards. A total of 29 children (60.4%) had good nutritional status, which was in the normal Z-score range for height according to age (H/A) and weight according to age (W/A), which indicated growth according to standards. This indicates that the majority of children receive adequate nutritional intake and good care from their parents at home. Conversely, 13 children (27.1%) were identified as having poor nutritional status, with a Z-score of W/A between -2 and -3 SD from the WHO median. These children showed signs such as lower than normal body weight, pale faces, and fatigue during activities. This condition requires special attention because malnutrition at an early age can contribute to



stunting if not immediately addressed by improving diet (Ministry of Health of the Republic of Indonesia, 2018).

In addition, 6 children (12.5%) were found to be overweight, with a BB/A Z-score value above +2 SD. These children have a weight that exceeds the standard for their age. This phenomenon of overweight is generally related to unbalanced consumption patterns, such as excessive calorie intake from fast food or sweet drinks, as well as minimal physical activity due to the habit of playing gadgets at home.

Based on the interview results, the majority of parents of children with poor nutritional status have a relatively low level of education, only elementary or junior high school graduates. Their knowledge of a balanced nutritional menu is very limited, which causes children not to get enough food variety. This is in accordance with the findings of Hardinsyah & Briawan (2016) that low levels of parental education are closely related to children's nutritional status. Meanwhile, parents with a high school education level and above generally understand the importance of providing animal protein, vegetables, and fruit in their children's daily menu. This can be seen from the dominance of good nutritional status in children whose parents have higher education, who also have greater awareness of cleanliness, diet, and regular meal schedules.

From an economic perspective, children with malnutrition mostly come from families with incomes below the Pinrang Regency Minimum Wage (UMK). Low family income makes parents prefer cheap food with inadequate nutritional content, such as instant noodles or unhealthy snacks, rather than providing complete nutritious food. On the other hand, children with more nutrition mostly come from middle to upper economic families who have the ability to buy food in large quantities. However, high consumption of fast food, high-fat snacks, and sweet packaged drinks causes children's calorie intake to exceed daily needs, resulting in disproportionate weight gain.

Analysis of eating habits showed that most children (70.8%) had breakfast at home before going to RA, but the breakfast menu was still dominated by simple carbohydrates such as white rice with limited side dishes. Only 35.4% of children had breakfast supplemented with protein sources such as eggs, fish, or chicken, which should be a priority to support growth and development needs. In terms of fruit and vegetable consumption, only 29.2% of children consumed fruit every day, while only 25% of children consumed vegetables regularly. These children tended to refuse to eat vegetables because they did not like the taste or because of family habits that rarely included vegetables in the daily menu. This condition indicates the need for practical nutrition education for RA parents and teachers.

Children's drinking habits are also a concern, because more than 40% of children consume packaged sweet drinks at least twice a week. These drinks are chosen because they taste good to children, but the high sugar content risks causing overnutrition and increasing the risk of non-communicable diseases later in life.



The results of the interview with the RA teacher showed that the school does not yet have a joint meal program with a balanced nutritious menu. The existing program is only a simple snack that is not standardized for nutritional value. The RA teacher conveyed budget constraints and lack of cooperation with the local health center as the main obstacles to implementing the nutrition program in the school. In addition, the RA teacher also observed a relationship between children's sleep patterns and activities with nutritional status. Children with malnutrition on average sleep less than 9 hours a day because of late bedtimes due to the habit of playing gadgets. Lack of sleep can reduce appetite and worsen children's nutritional conditions, in accordance with WHO findings (2006) on the importance of sleep patterns to support growth.

Extended family support, such as the role of grandparents, or relatives who help care for them, also affects the nutritional status of children. Children who live with extended families tend to have more regular eating patterns because they are paid more attention, although this can also lead to excessive feeding if not accompanied by a good understanding of nutrition. Overall, the results of the study indicate that the nutritional status of early childhood at RA DDI Majennang is influenced by a combination of economic factors, education, eating habits, parenting patterns, and school involvement. This condition emphasizes the importance of integrated efforts between schools, parents, and related parties to improve the quality of children's nutrition through school-based nutrition education and intervention programs, so that children at RA DDI Majennang can grow optimally and avoid the risk of malnutrition or overnutrition.

In terms of food consumption, the results of the study also found that there was an influence of environmental cleanliness at home on children's nutritional status. From observations and interviews, it was revealed that 18% of children with poor nutritional status live in houses with inadequate sanitation conditions, such as dirt floors, unclean water, and the habit of defecating in the open. An unhygienic environment increases the risk of children being exposed to infectious diseases, especially diarrhea which causes significant loss of nutrition. This is consistent with the findings of UNICEF (2020) which states that poor household sanitation worsens nutritional problems in early childhood.

The results of the study also identified the influence of maternal behavior in breastfeeding. Around 22.9% of malnourished children were only exclusively breastfed for less than 4 months. In fact, WHO recommends exclusive breastfeeding for at least 6 months because breast milk contains the best nutrients and immune substances to support children's growth and immunity. The lack of awareness of the importance of exclusive breastfeeding is influenced by the factor of working mothers without adequate leave facilities, as well as the belief that formula milk is more practical and nutritious, although this understanding is wrong.

In terms of physical activity, the study found that 54.2% of children with good nutritional status routinely play outdoors for at least 1 hour per day, either in the yard or the surrounding environment. This physical activity helps maintain energy balance and supports



gross motor development. On the other hand, children who rarely play outside tend to spend more time watching television or playing gadgets, which has an impact on the risk of obesity or irregular eating patterns because they tend to snack in front of the screen.

Finally, the study found that 75% of parents consider expensive food to be synonymous with nutritious food, so when funds are limited, they do not try to provide simple nutritious side dishes such as tempeh, tofu, or local fish. In fact, affordable sources of vegetable and animal protein can still meet children's nutritional needs if processed properly. This misperception shows the importance of locally based nutrition education that emphasizes the use of more economical and nutritious local foods, so that parents do not rely on expensive but not necessarily healthy packaged foods.

4. CONCLUSION

Based on the results of research on the nutritional health of early childhood at RA DDI Majennang, Suppa District, Pinrang Regency, it can be concluded that the nutritional status of children still shows quite significant variations, where most children have good nutritional status, but not a few experience malnutrition and overnutrition due to various interrelated factors. These factors include the level of parental knowledge about balanced nutrition, family income, daily food consumption patterns, fast food consumption habits, frequency of physical activity, quality of home environmental cleanliness, and the practice of providing exclusive breastfeeding. These findings indicate that the nutritional status of children is not only influenced by the availability of food, but also by the behavior and habits of families in caring for and their understanding of the importance of nutrition for children's growth and development. Therefore, efforts to improve integrated nutritional education involving schools, parents, health centers, and local governments are needed to ensure that early childhood at RA DDI Majennang grows up healthy, intelligent, and has an optimal quality of life in the future.

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