

Pemodelan faktor-faktor yang berkontribusi terhadap stunting pada baduta di wilayah proyek kesehatan dan gizi berbasis masyarakat Provinsi Kalimantan Barat tahun 2017 = Modelling factors that contribute to stunting among children age 6 to 23 months on community-based health and nutrition program in West Kalimantan, 2017 / Zakiah Dianah

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Abstrak

ABSTRAK

Stunting adalah gangguan pertumbuhan dan perkembangan anak yang berdampak pada fungsi kognitif jangka panjang dan dapat menyebabkan 20% kematian anak balita. Sanitasi menjadi salah satu faktor yang berhubungan dengan stunting. Provinsi Kalimantan Barat mempunyai capaian yang buruk untuk akses sanitasi dasar yaitu 55,55%. Tujuan penelitian: menganalisis faktor yang berkontribusi terhadap stunting pada baduta di wilayah PKGBM (Proyek Kesehatan dan Gizi Berbasis Masyarakat) Provinsi Kalimantan Barat. Desain penelitian: cross sectional menggunakan data sekunder dengan jumlah sampel 375 baduta dan dianalisis dengan regresi logistik multivariat. Hasil penelitian didapatkan hubungan signifikan antara kasus stunting dengan akses sanitasi dasar (2,24; 1,39-3,59) dan berat lahir anak (4,88; 2,51-9,51). Faktor lain yang berhubungan yaitu Cuci Tangan Pakai Sabun (CTPS) (1,66; 0,90-3,06), infeksi cacing (1,38; 0,74-2,58), diare (1,32; 0,83-2,10), ISPA (1,44; 0,86-2,43), dan kunjungan ke Posyandu (1,40; 0,75-2,59). Model akhir dari penelitian ini adalah akses sanitasi dasar, berat lahir anak, dan CTPS berkontribusi terhadap stunting.

ABSTRACT

Stunting is child growth and development disorder which has irreversible long-term impact and causing 20% of children mortality. Sanitation is one of many factors associated with stunting. West Kalimantan Province has poor achievement in basic sanitation access which is 55,55%. The objective of the study was to analyze factors that contribute in stunting in children aged 6-23 months on community health-based and nutrition program in West Kalimantan. The study design was cross sectional using secondary data of 375 toddler then analyzed in multivariate logistic regression. This study found the prevalence of stunting was 33,1%. There was significant association between stunting and basic sanitation access (2,24; 1,39-3,59) and birth weight (4,88; 2,51-9,51). Other factors associated with stunting were handwashing with soap (1,66; 0,90-3,06), worm infections (1,38; 0,74-2,58), diarrhea (1,32; 0,83-2,10), acute respiratory tract infection (1,44; 0,86-2,43), and Posyandu visit (1,40; 0,75-2,59). Our final model revealed that basic sanitation access, birth weight, and handwashing with soap had contribution in stunting.