Jurnal Kesehatan Manarang

Jurnal Kesehatan Manarang, Volume 11(2), August 2025, pp. 125– 134
ISSN 2528-5602 (Online), ISSN 2443-3861 (Print)
doi: https://doi.org/10.33490/jkm.v11i2.1896

ANALYSIS OF FAMILY FUNCTION AND TYPE IN RELATION TO THE NUTRITIONAL STATUS OF TODDLERS

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ARTICLE INFO

Article history

Submitted : 2025-01-22
Revised : 2025-04-21
Accepted : 2025-06-14

Keywords:

Family Function;
Family Type;
Nutritional Status of Toddlers

ABSTRACT

Nutritional status reflects the balance between nutrient intake and physiological needs, serving as a comprehensive indicator of an individual's nutritional condition. A well-functioning family influences maternal behavior in fulfilling children's nutritional needs, which can be affected by the number of family members living in the household. Assessing nutritional status is essential for supporting children's growth and development. This study aimed to identify the relationship between family function and family type with the nutritional status of toddlers in Seberang Ulu II Subdistrict. Anthropometric measurements were carried out on toddlers aged 12–60 months, and family-related data were collected using structured questionnaires. An observational analytic study with a cross-sectional approach was employed. A total sampling technique resulted in 75 participants. Data were analyzed using the Chi-square test and Fisher's exact test. The analysis revealed a significant relationship between family function and the nutritional status of toddlers (P=0.000). However, no significant relationship was found between family type and the nutritional status of toddlers (p=0.193). In conclusion, this study highlights a significant association between family function and toddler nutritional status in Seberang Ulu II Subdistrict, while family type showed no significant effect. These findings suggest that enhancing family functioning should be prioritized in efforts to improve toddler nutrition.

Kata Kunci:

Fungsi Keluarga;
Tipe Keluarga;
Status Gizi Balita

ABSTRAK

Status gizi adalah kondisi nutrisi yang menggambarkan keseimbangan antara asupan gizi dengan kebutuhan tubuh. Fungsi keluarga yang baik akan berdampak pada perilaku ibu dalam memenuhi status gizi di mana di pengaruhi oleh banyaknya jumlah anggota keluarga yang tinggal dalam satu rumah. Penilaian status gizi penting untuk tumbuh kembang anak. Penelitian ini bertujuan untuk mengetahui hubungan antara fungsi keluarga dan tipe keluarga terhadap status gizi balita di Kecamatan Seberang Ulu II, dengan melakukan pengukuran antropometri pada balita usia 12–60 bulan serta pengumpulan data melalui kuesioner yang diberikan kepada keluarga balita. Jenis penelitian yang digunakan adalah observasional analitik dengan desain cross-sectional. Teknik pengambilan sampel menggunakan total sampling, menghasilkan 75 sampel. Uji statistik menggunakan uji chi-square dan Fisher's exact test. Hasil analisis menunjukkan bahwa terdapat hubungan signifikan antara fungsi keluarga terhadap status gizi balita (p=0,000). Namun, tidak terdapat hubungan antara tipe keluarga terhadap status gizi balita (p= 0,193). Kesimpulan penelitian ini adalah terdapat hubungan antara fungsi keluarga terhadap status gizi balita dan tidak terdapat hubungan antara tipe keluarga terhadap status gizi balita di Kecamatan Seberang Ulu II. Hasil penelitian ini menunjukkan bahwa penguatan fungsi keluarga harus menjadi prioritas dalam upaya peningkatan status gizi balita.

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INTRODUCTION

UNICEF reports that there are approximately 45 million children under the age of five experiencing wasting globally (UNICEF et al., 2023). In Indonesia, the prevalence of wasting among children, based on the Indonesian Nutrition Status Survey (SSGI) 2022, stands at 7.7%. The provinces with the highest prevalence include Maluku (11.9%), West Papua (11.8%), Central Sulawesi (11.3%), Aceh (11.3%), North Maluku (11.1%), Papua (10.5%), West Kalimantan (10.1%), South Kalimantan (9.8%), Gorontalo (9.6%), and East Kalimantan (9.1%). In South Sumatra Province, the prevalence of wasting in

2022 was 6.9%, with Palembang City ranking fifth highest in the province, recording a prevalence of 7.8% (Kemenkes RI, 2023).

According to IDAI, nutritional status is a health condition that is closely related to food intake. Nutritional issues may arise at any stage of life and are considered complex problems that require immediate attention, as they may occur from the prenatal period to toddlerhood, adolescence, and older age (Muchtar et al., 2022). Previous studies have identified family function as a significant factor influencing the nutritional outcomes of toddlers. A well-functioning family can shape maternal behavior related to nutrition, such as food choices during pregnancy and feeding practices in early childhood (Kurniawati & Kulla, 2022; Meri et al., 2022; Noorsyarifa & Santoso, 2018). The study found a relationship between family function and the nutritional status of toddlers. Among 76 toddlers studied, 50 mothers (100%) who performed good family functions had 43 toddlers (86%) with good nutritional status. Conversely, among the 26 mothers (100%) with less optimal family function, only 5 toddlers (19.2%) had good nutritional status. The family's role in carrying out its functions is strongly influenced by the nutritional intake provided to toddlers. Therefore, a stronger family role can lead to improved toddler nutrition (Kurniawati & Kulla, 2022). Families that provide support and accurate nutritional information can enhance maternal knowledge about the importance of nutrition, thereby motivating mothers to provide nutritious foods and better care for their children. These behaviors are essential to ensure adequate nutritional intake for toddlers, ultimately supporting their healthy growth and development (Isnaini et al., 2020).

In addition, family type (e.g., nuclear or extended) has also been associated with toddler nutrition. Smaller families may more easily meet nutritional needs, while larger households may experience limited resources, impacting food distribution and quality (Jaya et al., 2022; Sumiaty et al., 2023). According to a previous study by (Isnaini et al., 2020), family function was related to the nutritional status of children in stepfamilies ($p = 0.012$). When family functions operate effectively, they support optimal nutritional status and positively impact children's growth and development.

Although numerous studies have explored the impact of family function and family type on toddler nutrition, few have examined both variables concurrently in urban settings with moderate levels of wasting, such as Palembang. Moreover, limited research has investigated how these family dynamics interact to influence the nutritional status of toddlers in the Indonesian context. This study aims to analyze the relationship between family function and family type and the nutritional status of toddlers, specifically in Seberang Ulu II Subdistrict, Palembang. The findings are expected to contribute to stunting prevention efforts by emphasizing the importance of functional family roles.

METHOD

Type of Research

This study was an observational analytic study using a cross-sectional design. The research was conducted in Seberang Ulu II Subdistrict, particularly in the working areas of Taman Bacaan Health Center and Nagaswidak Health Center, during the period of November to December 2024.

Population and Sample

The population in this study consisted of families with toddlers living in Seberang Ulu II Subdistrict, specifically within the coverage area of Taman Bacaan and Nagaswidak Health Centers. A total of 75 respondents were included, as the entire population met the inclusion criteria and was accessible to the researchers for data collection. Thus, the sample comprised 75 families with toddlers, selected using a total sampling technique. The inclusion criteria were: (1) families with toddlers aged 12–60 months, (2) families and children who agreed to participate in the study, and (3) toddlers cared for by family members. The exclusion criteria were families who did not complete the questionnaire and children suffering from chronic illnesses (Roflin et al., 2021; Sugiyono, 2022).

Data Collection

Data collection involved the use of questionnaires to assess family function and family type, as well as anthropometric measurements of toddlers using the weight-for-height (BB/TB) indicator based on WHO Z-score standards. These measurements aimed to determine the nutritional status of toddlers, categorized as wasted (z-score between -3 SD to < -2 SD), normal (z-score between -2 SD to +1 SD), and at risk of overweight (z-score > +1 SD to +2 SD). Body weight was measured using validated digital scales.

The family function assessment was conducted using the McMaster Family Assessment Device (FAD), which includes eight family functions: religious, socio-cultural, affection, protection, reproduction, socialization and education, and environmental development. This questionnaire, previously validated and tested for reliability, consisted of three answer options: 0 (never), 1 (sometimes), and 2 (always). The total score of each respondent was calculated and compared with the mean value of 13.57. Family function was classified as "good" if the total score was >13.57 and "poor" if the total score was <13.57. A good family function indicated that the family actively applied all eight functional indicators. The family type questionnaire inquired about household composition and structure. The family was classified as an extended family if it included parents, children, and other relatives (e.g., grandparents, uncles, aunts), and as a nuclear family if it consisted only of parents and children living together.

Prior to implementation, the questionnaire underwent validity and reliability testing. The validity test was conducted with 30 families with toddlers aged 12–60 months. The r-table value used for reference was 0.3061 (df = N-2). All eight items in the family function questionnaire had r-count values > 0.3061, indicating valid items. The reliability test showed a Cronbach's Alpha value of 0.612, which meets the criteria for reliability (Cronbach's Alpha > 0.6), demonstrating that the instrument was consistent and dependable for data collection (Sugiyono, 2022). The high validity and reliability of this questionnaire ensure that the data collected is accurate and consistent.

Data Analysis and Processing

Data were analyzed using SPSS version 26.0 and Microsoft Excel. The statistical tests applied were the Chi-square test and, when appropriate, Fisher's Exact test. The independent variables in this study were family function and family type, while the dependent variable was the nutritional status of toddlers.

RESULT

This study obtained data from 75 toddlers and their families, selected from two health centers in Seberang Ulu II Subdistrict.

Tabel 1. Frequency Distribution of Family Characteristics

Family Characteristics	n	Percentage (%)
Gender		
Male	4	5.3
Female	71	94.7
Age		
17-25 years	9	12.0
26-35 years	47	62.7
36-45 years	19	25.3
Education		
Elementary school	7	9.3
Junior high school	18	24.0
Senior high school	47	62.7
Bachelor's Degree /D4	3	4.0
Marital Status		
Married	75	100
Occupation		
Housewife	57	76.0
Employee	3	4.0
Laborer	11	14.7
Trader	4	5.3
Total	**75**	**100**

Based on Table 1, the majority of family respondents were female (94.7%). Most were in the early adulthood age group (26–35 years) with 62.7%, followed by 25.3% in the late adulthood group (36–45 years), and 12% in the 17–25 age group. In terms of educational attainment, the majority had senior high

school education (62.7%), while a few had bachelor's degrees (4%). All participants were married. Regarding occupation, the majority were housewives (76%), followed by laborers (14.7%), traders (5.3%), and employees (4%).

Characteristic of Toddlers

Tabel 2. Frequency Distribution of Toddlers Characteristics

Toddler	N	Percentage (%)
Gender		
Boy	37	49.3
Girl	38	50.7
Age		
12-24 months	27	36.0
25-36 months	19	25.3
37-48 months	17	22.7
49-60 months	12	16.0
Birth history		
Normal Delivery	59	78,7
Caesarean Sectio (SC)	16	21,3
Birthweight		
2.500-4.000 grams	75	100
Total	**75**	**100**

According to Table 2, the gender distribution of toddlers was nearly equal, with a slight majority being girls (50.7%). The most represented age group was 12–24 months (36%), followed by 25–36 months (25.3%), 37–48 months (22.7%), and 49–60 months (16%). Regarding birth history, most children were born through normal delivery (78.7%), while 21.3% were born via Caesarean Section. All toddlers had normal birth weight (2,500–4,000 grams), with no cases of low birth weight observed.

Family Function and Family Type

This study obtained the results of the univariate test of the frequency distribution of family functions in Seberang Ulu II District, as shown below:

Tabel 3. Frequency distribution of Family Function Behavior

No.	Indicator	Never		Sometimes		Always		Total	
		n	%	n	%	n	%	n	%
1.	Religious Function	16	21.3	26	34.7	33	44	75	100
2.	Socio-cultural Function	21	28	22	29.3	32	42.7	75	100
3.	Love Function	0	0	2	2.7	73	97.3	75	100
4.	Proctection Function	0	0	3	4	72	96	75	100
5.	Reproductive Function	5	6.7	8	10.7	62	82.7	75	100
6.	Socialization & Education Function	5	6.7	20	26.7	50	66.7	75	100
7.	Economic Function	0	0	6	8	69	92	75	100
8.	Enviromental Development Function	0	0	1	1.3	74	98.7	75	100

Based on Table 3, the majority of families reported always performing the environmental development function (98.7%). Other highly practiced functions included love (97.3%), protection (96%), and economic (92%). However, some families reported never implementing the socio-cultural function

(28%) and the religious function (21.3%). The study also assessed the frequency distribution of family types among respondents in the Seberang Ulu II District, as shown in Table 4:

Tabel 4. Frequency Distribution of Family Type

Family Type	N	Percentage (%)
Extended Family	8	10.7
Nuclear Family	67	89.3
Total	**75**	**100**

As presented in Table 4, the vast majority of respondents lived in nuclear family settings (89.3%), while only 10.7% lived in extended family arrangements.

Nutritional Status of Toddlers

This study conducted a univariate analysis to assess the nutritional status distribution of toddlers in the Seberang Ulu II District, as presented in Table 5:

Tabel 5. Frequency Distribution of Nutritional Status of Toddlers

Nutritional Status of Toddlers	N	Percentage (%)
Wasted	15	20
Good Nutrition (Normal)	60	80
Risk of overweight	0	0
Total	**75**	**100**

Based on Table 5, the findings indicate that the majority of toddlers had good or normal nutritional status, with 60 respondents (80%). Meanwhile, 15 toddlers (20%) were categorized as wasted, indicating undernutrition. Notably, none of the toddlers were identified as being at risk of overweight (0%). These results suggest that while most children were within the normal nutritional range, a significant proportion still experienced undernutrition and require attention for further nutritional intervention.

Bivariate Analysis

This study conducted bivariate analyses using the Chi-square test to examine the association between family function and family type with the nutritional status of toddlers in Seberang Ulu II District. The results are presented in Tables 6 and 7.

Tabel 6. Association between Family Function and Nutritional Status of Toddlers

Family Function	Nutritional Status						*p*-Value	PR
	Good Nutrition/ Normal		Malnutrition		Total			
	n	%	n	%	n	%		
Good	43	57.3	2	2.7	30	60	0.000	1.686
Poor	17	22.7	13	17.3	45	40		
Total	**60**	**80**	**15**	**20**	**75**	**100**		

The results in Table 6 indicate a significant relationship between family function and the nutritional status of toddlers (p= 0.000, p<0.05). Among the 75 respondents, 43 toddlers (57.3%) from families with good family function had good nutritional status, while only 2 toddlers (2.7%) from this group were malnourished. Conversely, 13 toddlers (17.3%) from families with poor function were malnourished.

The Prevalence Ratio (PR) of 1.686 suggests that toddlers from families with good functional roles are 1.686 times more likely to have good nutritional status than those from families with poor functional roles. The results of bivariate chi-square testing to see the association of family function with the nutritional status of toddlers in Seberang Ulu II District are as follows:

Tabel 7. Results of the Association between Family Type and Toddler Nutrition Status

Family Type	Nutritional Status						P-Value
	Good Nutrition/ Normal		Malnutrition		Total		
	n	%	n	%	n	%	
Extended Family	5	6.7	3	4	8	10.7	0.193
Nuclear Family	55	73.3	12	16	67	89.3	
Total	**15**	**80**	**60**	**20**	**75**	**100**	

As shown in Table 7, most toddlers with good nutritional status came from nuclear families (55 toddlers or 73.3%). However, the association between family type and toddler nutritional status was found to be not statistically significant ($p = 0.193$, $p > 0.05$). This result was obtained using Fisher's Exact Test, since some cells had expected counts below 5. These findings suggest that family function, rather than family structure (type), plays a more crucial role in influencing the nutritional status of toddlers in the Seberang Ulu II District.

DISCUSSION

The Association of Family Function on The Nutrional Status of Toddlers

Good family function influences maternal behavior, especially in caring for toddlers and fulfilling their nutritional needs. Changes in maternal behavior can affect the mother's ability to select nutritious foods during pregnancy, at the time of birth, and throughout the toddler years. When a family carries out its functions properly, the nutritional status of toddlers tends to be good.

This study found a significant correlation between family function and the nutritional status of toddlers, with a p-value of 0.000. This finding highlights the essential role of the family in supporting toddler health and nutrition, ensuring that growth and development progress in accordance with age (Munawaroh et al., 2022). Families with poor function—as well as other influencing factors such as lack of dietary attention, poor communication among family members, and limited knowledge about nutrition—are at high risk of having toddlers with poor nutritional status (Andayani & Afnuhazi, 2022; Nuradhiani, 2023).

These findings are consistent with previous research by Kurniawati and Kulla in Banda Aceh, which showed a significant relationship between family function and the nutritional status of children under five (Kurniawati & Kulla, 2022). Similar results were reported by Insaini et al (2020) in Jember, indicating that poor nutritional status in toddlers may result from inadequate implementation of family functions. The poor execution of these functions is likely due to limited family knowledge. Respondents with good knowledge generally exhibit higher awareness and are more capable of applying what they know. This aligns with research by Herawati et al (2020) which found that knowledge positively influences family function (Herawati, Pranaji, et al., 2020). Hence, efforts are needed to improve the implementation of family functions, especially to meet the nutritional needs of toddlers. Families play a key role in managing children's nutritional status, as they provide the environment in which children grow, develop, and receive their nutritional intake. Well-functioning families can better support these processes.

In this study, most respondents with good family function also had toddlers with good nutritional status (43 respondents or 57.3%). According to BKKBN (2017), good family function is a basic role that every family must uphold, as it enables each member to perform their role effectively in society and attain overall family welfare. However, some respondents with good family function still had toddlers with poor nutritional status, likely due to insufficient family knowledge. Knowledge of values, eating habits, and food traditions is essential in assessing the effectiveness of family functions. Food culture within a family can influence children's food choices and dietary patterns (Nurbaya et al., 2023). This is evident in the 21 respondents (28%) who never properly implemented their socio-cultural functions, negatively affecting toddler nutrition.

Based on these findings, the researchers assume that poor nutritional status may be influenced by parental ignorance regarding proper nutrition and dietary practices, even when family functions are otherwise adequate. Parents with limited knowledge of nutritious food may pay less attention to the quality of food served to their children (Andayani & Afnuhazi, 2022; Nurbaya et al., 2023). Cultural eating habits also influence food choices and toddler nutrition, highlighting the need to improve parental awareness and

knowledge. The study also showed that some respondents did not properly implement their socio-cultural functions, thereby impacting toddler nutritional status (Hapzah et al., 2023).

Regarding respondent characteristics, the majority were female (71 respondents or 94.7%), reflecting entrenched gender norms that place the caregiving burden primarily on mothers. This aligns with a study who stated that women's high involvement in child care is shaped by societal constructs assigning familial responsibility to women. These gendered expectations significantly influence family function and the allocation of resources, such as time and attention, toward children's nutrition. However, while mothers typically lead in childcare, this concentration of responsibility may lead to overburden and potentially compromise consistent, high-quality nutritional care. The societal view of women as default caregivers often underestimates the potential contributions of fathers, even though studies show that paternal involvement positively affects children's health and development (Zimmert, 2023). Therefore, enhancing family function should include encouraging greater paternal participation in children's nutrition and health.

In terms of age, the majority of respondents were early adults (26–35 years) with 47 respondents, followed by late adults (36–46 years) with 19 respondents, and late adolescents (17–25 years) with 10 respondents. This is in line with studies by (Herawati, Krisnatuti, et al., 2020; Pamungkas et al., 2018), which suggest that age affects family function. The current findings suggest that as respondents age, their family function improves. Early adults, who dominated this study, are likely to be more emotionally mature and responsible in their family roles. Age influences parenting styles and how attentively a family meets the nutritional needs of toddlers.

All respondents (100%) were from complete families. According to Herawati et al (2020), family function operates more effectively when the roles of all members—particularly both parents—are performed in balance (Herawati, Krisnatuti, et al., 2020). Single-parent households, especially those headed by mothers alone, may find it more difficult to perform all family functions effectively. The involvement of both parents supports synergistic cooperation, helping families fulfill their functions optimally.

In terms of education, the majority of respondents were senior high school graduates (47 respondents or 62.7%), followed by junior high (24%), elementary school (9.3%), and university graduates (4%). Education plays a vital role in shaping decision-making, parenting, and fulfilling family members' needs, including the nutritional needs of toddlers. Those with senior high school education tend to have a better understanding of a healthy lifestyle.

Parental education affects the ability to manage resources to support children's nutrition. Lower-educated parents are less likely to understand the importance of balanced diets, whereas higher education contributes to better comprehension of child development and nutrition (Dungga et al., 2022). Children of mothers with low educational attainment are more vulnerable to malnutrition than those with highly educated mothers (Putri et al., 2015). In addition, lower education levels often correlate with lower income. Financial instability can hinder proper family functioning and reduce close family relationships (Herawati, Krisnatuti, et al., 2020). A limited income may constrain mothers' time and energy to care for their toddlers and meet their basic needs (food, clothing, and shelter).

Regarding occupation, most respondents were housewives (57 or 76%), followed by laborers (11 or 14.7%), traders (4 or 5.3%), and employees (3 or 4%). Housewives generally have more time to care for their children and manage the family's dietary intake, which supports good nutrition. In contrast, working mothers may have limited time, increasing the risk of malnutrition in children. Therefore, the role of housewives is crucial for maintaining children's well-being and nutritional status (Fauzia et al., 2019). Nutrition plays a critical role in toddlers' growth and development. Meeting their nutritional needs during this period is essential, as it directly affects physical development, immune system formation, and brain development (Hamann et al., 2023; Mantu et al., 2023). This study supports existing theory emphasizing the vital role of nutrition in early childhood development. Malnutrition can reduce brain cell count and alter brain structure and function, impairing growth and development. Early nutrition has a direct impact on cognitive development, especially in the first two years of life, which is the most critical period for brain development. The frontal lobe continues significant development until age five (Zhamaroh et al., 2018).

Regarding birth history, the majority of toddlers were delivered through normal labor (59 respondents or 78.7%). All respondents (100%) had toddlers with normal birth weight. These findings are in accordance with who reported that toddlers with low birth weight are three times more likely to experience malnutrition than those born with normal weight. Although toddlers with normal weight are less vulnerable, they may still face nutritional challenges. The family plays a crucial role in managing toddlers'

nutritional status. Within the family, children receive the support needed for proper growth, development, and nutrition. A well-functioning family with strong emotional ties significantly contributes to children's well-being. Therefore, understanding and effectively implementing family functions is essential to ensure each member, especially children, can grow and thrive (Wahyudi, 2023).

The Association Between Family Type and the Nutrional Status of Children Five Years Old

Based on the results, the majority of respondents had a nuclear family type, with 67 respondents (89.3%), while only 8 respondents (10.7%) had an extended family type. The nutritional status of children under five is influenced by various factors, one of which is the condition of being raised in large families. In such families, the food supply for each child is often limited due to the need to share among more family members. Furthermore, many parents may not realize that younger children require a higher nutritional intake than older ones. As a result, toddlers often do not receive adequate food to meet their nutritional needs (Hapzah et al., 2023; Yudianti et al., 2024).

Based on the Fisher's exact test presented in Table 9, there was no statistically significant association between family type and the nutritional status of children under five in this study, with a p-value of 0.193>0.05. Therefore, the alternative hypothesis (Ha) is rejected. Several other studies have reported different findings. For instance, research conducted by Jaya et al., (2022) in Gowa, Makassar, found a significant relationship between family type and the nutritional status of children under five (Jaya et al., 2022).

In this study, the majority of respondents from nuclear families had good nutritional status. However, several other factors may influence nutritional status, such as short birth intervals. Closely spaced births may lead to nutritional disturbances because maternal attention is divided between a new pregnancy or a newborn. Yet, toddlers require special attention from their mothers for both nutrition and healthcare. Economic factors also play a critical role; large family size without adequate income may hinder the fulfillment of children's nutritional needs. Thus, many factors—such as income, birth spacing, and others—must be considered when addressing the nutritional status of young children (Syukri et al., 2022; Yudianti et al., 2024).

Interestingly, this study also found that some toddlers from nuclear families still experienced poor nutritional status, possibly due to unmet family roles. More than half of the respondents lived in nuclear family units consisting of a father, mother, and children, consistent with findings from (Purwanti et al., 2016). However, variations in findings may stem from other influencing factors such as parental education, household income, and access to healthcare facilities, all of which are crucial determinants of children's nutritional status. While family type may reflect certain parenting and nutrition patterns, socioeconomic factors might have a more substantial impact (Andayani & Afnuhazi, 2022). On the other hand, most respondents in extended families were reported to utilize health services well, which may help mitigate the risks of undernutrition or overnutrition in children under five (Purwanti et al., 2016).

In this study, the authors assumed that the nuclear family structure is more dominant in Seberang Ulu II Sub-district. The nuclear family—consisting of a father, mother, and children—tends to have a simpler structure, allowing parents to better focus on their children's nutritional and health needs. In contrast, extended families, which include grandparents, uncles, aunts, and other relatives, may offer greater support in caregiving but often face challenges in effectively managing nutritional and health requirements.

One limitation of this study is that it did not explore family function and type comprehensively. The research only considered one side of the family structure without analyzing the broader role of all family members. Efforts to improve toddlers' nutrition should therefore emphasize strengthening family function and parental knowledge through the implementation of community-based nutrition education programs.

CONCLUSION AND SUGGESTION

Based on the results of the analysis, a significant association was found between family function and the nutritional status of children under five, with a *p*-value of 0.000. However, there was no significant association between family type and under-five nutritional status, as indicated by a p-value of 0.193. It can be concluded that family function has a greater influence on the nutritional status of children under five compared to family type. Toddlers with good family functioning tend to have better nutritional status than those with poor family functioning. These findings also emphasize that the quality of family interactions and support plays a more influential role than the structural type of the family itself.

To address this challenge, efforts to improve toddlers' nutrition should prioritize the strengthening of family functioning, including parenting support, improved communication, and role clarity within the household, to promote better nutritional outcomes in early childhood. For practitioners and policymakers, this study highlights the importance of empowering families to function more effectively regardless of their type. Community-based programs that integrate nutrition education with family dynamics training could lead to more sustainable improvements in toddler health. Future research is encouraged to explore additional influencing factors, such as parental education, family income, and access to nutritious food, to guide more targeted and effective intervention strategies.

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