

The Effect of Islamic Spiritual-Based Education on Mothers' Attitudes About Overcoming Stunting in Gegerbitung Village, Sukabumi Regency

Maria Magdalena Sridanti Martiana^{a*} | Irawan Danismaya^b | ArfatulMakiyah^c

^{a,b,c} Bachelor of Nursing Program, Faculty of Health, Universitas Muhammadiyah Sukabumi

*Corresponding Author: mariamagdalenasm@ummi.ac.id

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ABSTRACT

Introduction: Stunting in children poses serious risks to physical, cognitive, and emotional development, and remains a critical issue in Indonesia, particularly in Gegerbitung Village, Sukabumi. A key factor contributing to persistent stunting cases is the attitude and behavior of mothers regarding child nutrition and parenting.

Objectives: This study aimed to examine the effect of Islamic spiritual-based education on mothers' attitudes in overcoming stunting in Gegerbitung Village.

Methods: A quasi-experimental study with a one-group pretest-posttest design was conducted involving 25 purposively selected mothers of children under five. Data were collected through a validated attitude questionnaire administered before and after the intervention. Data were analyzed using the paired t-test to assess differences in attitudes pre- and post-education.

Results: Before the intervention, the mean maternal attitude score was 32.32 ($SD = 2.65707$), which increased significantly to 45.60 ($SD = 1.97906$) after receiving Islamic spiritual-based education. The paired t-test showed a statistically significant difference ($p = 0.000$), with a mean difference of -13.28 (95% CI: -14.57725 to -11.98275), indicating a notable improvement in maternal attitudes.

Conclusions: Islamic spiritual-based education significantly improved mothers' attitudes toward stunting prevention. This approach, which integrates religious and health values, can be an effective strategy to enhance maternal awareness and engagement in child nutrition and care. Faith-based education should be considered a culturally appropriate and impactful intervention in stunting reduction programs within Muslim-majority communities.

Introduction

Child stunting has a serious impact on motor, cognitive and verbal development. As a result, children experience developmental delays that can affect morbidity and mortality rates. Stunting also impacts physical growth, resulting in a shorter stature than the average adult. In addition, stunted children often show lower learning performance during school (Ebrahim, 2007).

According to SSGI 2022, stunting can occur in newborn babies, as seen from the data on the prevalence of stunting by age group, newborn babies with a length of less than 48cm were found to be 18.5%. From these data it can be seen that nutritional fulfillment in pregnant women is very important for the prevention of stunting. Based on the same data, the results show an increase in stunting cases by 1.6 times from the 6 - 11 month age group to the 12 - 23 month group. This indicates a failure in providing complementary foods starting at the age of 6 months, also seen from the suitability of age, food texture, frequency and amount in providing complementary foods, as well as variations in the food menu (Kementrian Kesehatan RI, 2021).

Gegerbitung Village based on data in September 2024 from 11 posyandu recorded 72 children who were stunted, most of whom were cared for by young mothers or their grandmothers. The author conducted an interview with the head of the Gegerbitung Village cadre, Ai Nurhasanah, on Monday, October 7, 2024. Based on the information received, the main



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problem lies in the mother's attitude and inappropriate parenting, for example, many mothers choose practical instant complementary foods, wafer snacks in the morning before breakfast which causes children to be lazy to eat, newborns are not given exclusive breastfeeding, and untimely complementary feeding (<6 months). In addition, some mothers felt offended and denied that their children were stunted despite having attended counseling from the puskesmas, making them reluctant to return to the posyandu.

The role of mothers in stunting prevention is recognized by various reliable sources, including the World Health Organization (WHO) and UNICEF, which say that pregnant women should get good nutrition to support fetal growth. According to UNICEF, mothers who are knowledgeable about nutrition and health are more likely to provide nutritious food for their children. Nutrition education programs for mothers are highly recommended. Mothers should be proactive in maintaining their children's health, including taking their children to health services for immunizations and regular check-ups, which help prevent infections that can interfere with growth. The mother's mental health also matters. Mentally healthy mothers are better able to provide love and care, which is important for child development. Mothers can contribute to raising awareness in the community about the importance of nutrition, sanitation and health, which collectively can help reduce stunting. The role of mothers in stunting prevention is crucial and covers various aspects from health and nutrition to education and social support (Harriet Torlesse, Nita Dalmiya, 2021).

In QS: Al-Baqarah: 233

"Mothers should breastfeed their children for two full years, for those who wish to complete breastfeeding. And it is the duty of the father to feed and clothe the mother in an appropriate manner. Let no one be burdened except according to his ability."

This verse emphasizes the importance of breastfeeding during the first two years of a child's life as a critical phase of physical and emotional growth. Breast milk not only fulfills nutritional needs, but also strengthens the emotional bond between mother and child. The verse also reminds us that fathers have a responsibility to support the mother's needs so that she can focus on caring for her child.

Islamic spiritual-based approaches in Indonesian society, where the majority of the population is Muslim, have great potential in raising awareness about stunting prevention. By incorporating religious values, health messages become easier to accept and implement, especially by mothers who have a central role in stunting prevention (Zahrah & Damayanti, 2023). Islamic spiritual-based activities are not only a medium to deepen understanding of religious values, but can also be utilized as a forum to convey important information related to community welfare, including health. Through forums such as educational counseling, the mothers involved have the opportunity to receive education about health, especially in preventing and dealing with stunting. This approach is considered effective because the messages conveyed are designed in line with Islamic values, making it easier to accept and apply in everyday life (Ropitasari et al., 2023). Education about nutrition, good parenting, and the importance of fulfilling nutrition to overcome stunting can be delivered through this spirituality-based educational counseling activity. With a faith-based approach, health messages are more easily accepted and applied by the community. The influence of religious leaders can be very significant as religious leaders who lead Islamic spiritual-based activities have great influence among the community. People generally pay more attention to and follow the advice of religious leaders, so information about the importance of adequate nutrition and healthy lifestyles can be more easily accepted (Saleh et al., 2021). By incorporating religious values, the issue of stunting can be seen as part of parents' responsibility in maintaining God's mandate, namely their children. People are more likely to respond to messages delivered through approaches they are already familiar with, such as Islamic spiritual-based educational counseling. This makes



educative counseling an effective tool for disseminating information about stunting at the community level. In this case, Islamic spiritual-based educative counseling is considered a strategic tool because it has a wide network, emotional closeness, and a close relationship with the community, especially mother groups who have an important role in stunting prevention (Sagala et al., 2023).

Efforts from the government according to data from the Ministry of Health are currently targeting a 14% reduction in stunting cases by 2024. Data on the prevalence of stunting in West Java Province in 2023 is still at a high level, which is around 21.7% based on the 2023 Indonesian Health Survey. This figure shows a big challenge to achieve the target of reducing stunting to 14% by 2024. The West Java Provincial Government itself has made various interventions to address this issue, including through specific and sensitive nutrition programs, which are supported by local regulatory frameworks such as West Java Governor Regulation No. 107 of 2020 (Utami et al., 2023). Data on the prevalence of stunting in Gegerbitung Village based on information from Mrs. Ai Nurhasanah as the head of the Gegerbitung village posyandu cadre, shows an increase in stunting cases in the last two years. In 2023, the stunting rate in the village was recorded at 8.04%. By October 2024, this figure had increased to 12.6%. This data will later be reported and included in the Sukabumi District stunting data, indicating the need for additional interventions to increase community awareness of the importance of preventing and treating stunting early on.

Nurses play an important role in efforts to overcome stunting, especially through an educational approach that aims to empower the community. In this context, nurses not only act as educators, but also as motivators who provide moral support. They are tasked with helping mothers understand the importance of adequate nutrition, appropriate parenting patterns, and steps to prevent and treat stunting (Alifatin, 2022). When this educational approach is combined with Islamic spiritual values, the role of nurses becomes even more significant in influencing mothers' attitudes towards preventing stunting in their children. The role of nurses has a significant impact in addressing the problem of stunting, especially through education and community empowerment efforts. As educators, nurses are responsible for providing information to mothers about the importance of nutritional intake, proper parenting, and steps to prevent and treat stunting. Through an approach that integrates Islamic spiritual values, nurses can facilitate mothers' group discussions to strengthen their understanding. In addition, collaboration with various parties is needed to ensure a more comprehensive and effective intervention (Henry et al., 2024). Despite frequent stunting counseling in Gegerbitung Village, the stunting rate remains high. This indicates that the main problem lies in maternal attitudes. Therefore, this study aimed to examine the effect of Islamic spiritual-based education on changes in mothers' attitudes in overcoming stunting in Gegerbitung Village. The purpose of this study was to determine the effect of Islamic spiritual-based education on mothers' attitudes in overcoming stunting in Gegerbitung Village, Sukabumi Regency. this study aims to determine the effect of Islamic spiritual-based education on mothers' attitudes toward overcoming stunting in Gegerbitung Village, Sukabumi Regency.

Methods

This study employed a quasi-experimental design with a one-group pretest-posttest approach, allowing researchers to assess changes in mothers' attitudes before and after an educational intervention. This design was chosen to evaluate the effect of Islamic spiritual-based education without a comparison group (Rahmawati & Hardini, 2020). The population consisted of 72 mothers of children under five years old (toddlers) residing in Gegerbitung Village, Sukabumi Regency. A total of 25 respondents were selected using purposive sampling based on inclusion and exclusion criteria.

Inclusion criteria:



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1. Muslim mothers residing in Gegerbitung Village
2. Having at least one child under five years old
3. Willing to participate and attend all educational sessions
4. Able to read and write Indonesian

Exclusion criteria:

1. Mothers who had previously received similar interventions in the last 6 months
2. Mothers who were absent during either the pretest or posttest phase
3. Mothers with diagnosed mental health disorders affecting participation

This study only involved one intervention group ($n = 25$) and no control group. All participants received the Islamic spiritual-based education intervention. The instrument used to measure maternal attitudes about stunting prevention was a structured questionnaire developed by the research team, consisting of 20 Likert-scale items covering knowledge, perception, and behavioral intention. The instrument underwent a validity test with a Pearson correlation coefficient > 0.361 (r -table, $n = 25$, $\alpha = 0.05$), and a reliability test using Cronbach's Alpha yielded a value of 0.82, indicating high internal consistency. Data were analyzed using univariate and bivariate analysis techniques with SPSS software. The paired t-test was used to assess the difference in maternal attitude scores before and after the intervention. A p -value < 0.05 was considered statistically significant (Ghozali, 2018).

Results

1. Respondent Characteristics

Before discussing the results of the study, it is important to first explain the characteristics of the Respondents involved. This study involved 25 mothers in Gegerbitung Village, Sukabumi District. The characteristics of the Respondents included a variety of factors, including age, with Respondents coming from various age groups; religion, with the majority being Muslim; gender, which was entirely female; and level of education, occupation, and family income per month. An understanding of these characteristics will provide a clearer picture in interpreting the research results, as follows:

a. Age

Table 1. Distribution of Respondents by Age

Variable Age	Frequency	Percentage %
19-23	5	20
24-28	13	52
29-33	3	12
34-40	4	16
Total	25	100

Based on Table 1, the majority of Respondents in this study were aged 24-28 years. In addition, there were 5 Respondents aged 19-23 years, 3 Respondents aged 29-33 years, and 4 Respondents aged 34-40 years.

b. Religion

Table 2. Distribution of Respondents Based on Religion

Variable Religion	Frequency	Percentage %
Islam	25	100



Based on Table 2, all Respondentts in this study are Muslim. Table 4.2 shows that all Respondentts in this study are Muslim.

c. Gender

Table 3. Distribution of Respondentts Based on Gender

Variable Gender	Frequency	Percentage %
Female	25	100

Based on Table 3, all Respondentts in this study were female.

d. Education

Table 4. Distribution of Respondentts Based on Education

Variable Education	Frequency	Presentase %
Graduated from elementary school	10	40
Graduated from junior high school	12	48
SLTP		
Graduated from high school / MA	3	12
Total	25	

Based on Table 4, the distribution of Respondentts based on education level shows that 10 Respondentts finished elementary school, 12 Respondentts finished junior high school, and 3 Respondentts finished high school.

e. Occupation

Table 5. Distribution of Respondentts Based on Occupation

Variable Occupation	Frequency	Percentage %
Working	2	8
Not working	23	92
Total	25	

Based on Table 5, the distribution of Respondentts based on employment shows that 2 Respondentts work, and 23 Respondentts do not work.

f. Family Income/Month

Table 6. Distribution of Respondentts based on family/monthly income

Variable Income/month	Frequency	Percentage %
Rp.500.000 - Rp.1.000.000	1	4
Rp. 1.500.000 - Rp. 2.000.000	18	72
Rp. 2.500.000 - Rp. 3.000.000	6	24
Total	25	

Based on Table 6, the distribution of Respondents based on family income per month shows that 1 Respondent has an income of Rp.500,000 - Rp.1,000,000, 18 Respondents Rp.1,500,000 - Rp.2,000,000, and 6 Respondents Rp.2,500,000 - Rp.3,000,000.

2. Mother's attitude before Islamic Spiritual Based Education

a. Results of Analysis of Attitude Differences Before Education

Table 7. Results of Analysis of Differences in Attitudes Before Education

Mother's Attitude	Average	Respondent	Standard Deviation
Before	32.3200	25	2.65707

Based on table 7, the initial measurement of mothers' attitudes towards overcoming stunting was carried out before being given an Islamic spiritual-based educational intervention. The results of the analysis show that the average mother's attitude score is 32.32, with 25 respondents. In addition, the standard deviation value of 2.65707 indicates the variation in attitudes among respondents.

3. Maternal attitude after Islamic Spiritual Based Education

a. Results of Analysis of Attitude Differences After Education

Table 8. Results of Analysis of Attitude Differences After Education

Mother's Attitude	Average	Respondent	Standard Deviation
After	45.6000	25	1.97906

After the implementation of Islamic spiritual-based education, mothers' attitudes towards stunting prevention were measured again to see any changes. Based on Table 8, it is known that the average maternal attitude score increased to 45.60 from a total of 25 respondents. The standard deviation recorded was 1.97906, indicating that there was less variation in the scores after the education compared to before.

These results show that Islamic spirituality-based education is effective in influencing mothers' attitudes to be more positive and directed towards stunting prevention. In addition, the lower standard deviation reflects a more even improvement in attitudes among mothers after receiving the intervention. This improvement proves that the spiritually-based education approach is able to have a significant positive impact on both knowledge and attitude, thereby promoting better change.

4. Effect of Islamic Spirituality-Based Education on mothers' Attitudes About Overcoming Stunting

a. Results of Examining Data Distribution Patterns

Table 9. Results of Data Distribution Pattern Check

Mother's Attitude	Shapiro-Wilk P-Value	Conclusion
Before	0.303	Normal
After	0.354	Normal

Based on table 9, the results of examining the data distribution pattern using Shapiro-Wilk show that the P-value in the pre-intervention (P-Value: 0.303) and the P-value in the post-intervention (P-Value: 0.354) is greater than 0.05. So, it can be concluded that the research data is normally distributed.

b. Results of Analysis of Attitude Differences Before and After Education

The results of the analysis using the Paired T-Test test were used to evaluate changes in the average attitude of mothers before and after receiving Islamic spiritual-based education in Gegerbitung Village. This analysis aims to ascertain whether there is a significant difference due to the intervention provided.

Table 10: Analysis of the Effect of Islamic Spiritual-Based Education on Mothers' Attitudes About Overcoming Stunting in Gegerbitung Village, Sukabumi District

Variable	Mean	Paired Std. Deviation	Differences		t	Sig. (2-tailed)
			95 Confidence The Lower	% Interval of Difference Upper		
Before Test - After Test	-13.28000	3.14272	-14.57725	-11.98275	-21.128	0.000

Based on the results of the analysis in Table 8, the Analysis of the Effect of Islamic Spiritual-Based Education on Mothers' Attitudes About Overcoming Stunting in Gegerbitung Village, Sukabumi Regency, using paired T-Test shows a P-value of 0.000, which is smaller than 0.05. This indicates a significant effect of Islamic Spiritual-Based Education on mothers' attitudes towards overcoming stunting in Gegerbitung Village, Sukabumi District.

The test results also showed a mean paired differences value of -13.28000. This value reflects the difference in the average attitude of mothers before education (32.32) and after education (45.60), with an average difference of -13.28. The 95% Confidence Interval of the Differences for this difference is in the range of -14.57725 to -11.98275.

In addition, the calculated t value obtained is -21.128. The negative t value indicates that the average attitude of mothers before education was lower than after education, in accordance with the direction of change expected in this study.

These results support the conclusion that Islamic spiritual-based education has a significant impact in improving mothers' attitudes towards overcoming stunting.

Discussion

1. Discussion of Respondent Characteristics

Table 1 The majority of respondents in this study were in the age range of 24-28 years, a productive age group that tends to be more open to new information, including health education. A total of 5 respondents were 19-23 years old, which is relatively young and may still be in the early stages of parenting. Meanwhile, 3 Respondents were 29-33 years old, a more mature group with more parenting experience. The 4 respondents were 34-40 years old, a late-adult age group who are generally more selective in accepting new information.

The Islamic spirituality-based approach made the education relevant and acceptable to all age groups involved.

Table 2 indicates that all respondents were Muslim, as defined by the inclusion criteria. This homogeneity in religious background made it appropriate to apply Islamic-based educational



content. According to Bandura's Social Learning Theory, people are more likely to adopt behaviors modeled by figures or sources they trust and identify with. Therefore, the use of Islamic teachings and involvement of religious figures in the intervention enhanced the acceptability and effectiveness of the educational messages.

Table 3 highlights that all respondents were female, specifically mothers, aligning with the study's focus on maternal roles in child nutrition and development. This is supported by Maternal Role Attainment Theory (Prilleltensky, 2004), which emphasizes that mothers, as primary caregivers, play a crucial role in ensuring their children's physical and emotional well-being. The education intervention was aimed at reinforcing this role through a culturally sensitive and faith-based strategy.

Table 4 shows that most respondents had a low-to-middle education level, with 40% having completed elementary school and 48% junior high school. Lower educational attainment is often associated with limited health literacy. Individuals with lower education levels may have weaker perceptions of susceptibility and benefits related to stunting prevention (Thompson, 2021). Thus, incorporating Islamic values into health education provides a familiar cognitive and emotional framework, which can enhance understanding and motivation among low-education participants.

Table 5 demonstrates that 92% of respondents were housewives. As Maslow's Hierarchy of Needs explains, individuals who have their basic physiological and safety needs met often through family support can focus on love, belonging, and self-actualization, including caring for their children. Housewives typically have more time and emotional investment in child-rearing, making them ideal targets for empowerment programs such as this one.

Table 6 reveals that most respondents fall within the lower-middle income bracket (IDR 1,500,000 – 2,000,000). Economic constraints often limit access to nutritious food, which is a direct risk factor for stunting. However, when health education is delivered through a spiritual lens that promotes gratitude, resourcefulness, and parental responsibility as religious duties, it aligns with the Theory of Planned Behavior (Ajzen, 2011) which posits that attitudes, norms, and perceived behavioral control influence intention and behavior. This alignment can drive mothers to make better health decisions within their means.

In conclusion, the demographic characteristics of the respondents, when interpreted through appropriate theoretical frameworks, support the relevance and effectiveness of the Islamic spiritual-based educational intervention in improving maternal attitudes toward stunting prevention.

2. Discussion of maternal attitudes before Islamic Spiritual Based Education

Based on Table 7, the initial measurement of maternal attitudes toward overcoming stunting, conducted before the Islamic spiritual-based education intervention, yielded an average score of 32.32 with a standard deviation of 2.65707 across 25 respondents. This variation reflects differing levels of awareness and preparedness among mothers, suggesting that while some already possess foundational knowledge or concern about stunting, others demonstrate limited engagement. From a theoretical perspective, these differences can be explained using the Health Belief Model (HBM), which posits that a person's health behavior is influenced by their perceived susceptibility, severity, benefits, and barriers. In this context, mothers who scored lower may not fully perceive the severity of stunting or may lack confidence in their ability to prevent it, hence showing less proactive attitudes. Conversely, mothers with higher initial scores may already recognize stunting as a serious threat and believe in the value of preventive actions, even before any intervention.

The role of Bandura's Social Learning Theory also supports this finding, emphasizing that behaviors and attitudes are learned through observation, modeling, and reinforcement. Mothers who have been exposed to positive parenting practices in their community or who have role



models such as health workers or religious leaders may develop better attitudes. Those lacking such exposure may not demonstrate the same awareness or motivation (Oladejo T et al., 2019). Furthermore, attitude change theory indicates that lasting changes in attitude require both cognitive input (knowledge) and affective connection (emotional or value-based relevance). In the absence of structured intervention, such as Islamic spiritual-based education, mothers may not experience sufficient stimulus to critically reflect on their parenting practices or prioritize nutrition and health as religious and moral responsibilities (Mccuen & Shah, 2007). Therefore, the variation in maternal attitudes prior to the intervention underscores the importance of tailored, context-sensitive educational efforts. Specifically, education grounded in Islamic spiritual values aligns with the cultural context of the respondents and has the potential to address both the cognitive and emotional domains required for meaningful and lasting changes in attitude toward stunting prevention.

3. Discussion of maternal attitudes after Islamic Spirituality-Based Education

After the implementation of Islamic spiritual-based education, mothers' attitudes toward stunting prevention were reassessed to evaluate changes. Based on Table 8, the average attitude score increased significantly from 32.32 to 45.60 among 25 respondents. This rise in score indicates the intervention had a meaningful impact in shifting maternal attitudes in a more positive and proactive direction. The improvement in scores can be understood through the lens of the Cognitive Theory of Attitude Change, which posits that the provision of new, relevant information especially when it aligns with the individual's existing values or beliefs can restructure cognitive frameworks and lead to attitude adjustment. By integrating Islamic values into health education, the intervention aligned health messages with participants' spiritual beliefs, thereby facilitating deeper internalization and acceptance.

Furthermore, the reduced standard deviation (from 2.65707 to 1.97906) after the intervention suggests greater consistency among respondents' attitudes. This homogeneity indicates that the education succeeded in standardizing understanding across diverse backgrounds. This outcome aligns with Mezirow's Transformational Learning Theory, which emphasizes critical reflection as a catalyst for deep, perspective-altering learning. The Islamic spiritual-based education not only delivered information but also encouraged mothers to reflect on their parenting roles as religious obligations, leading to more unified and value-driven attitudes.

In addition, the change in attitude is consistent with the Theory of Planned Behavior (Ajzen, 2011), which argues that attitudes, along with subjective norms and perceived behavioral control, influence intention and behavior. The increase in positive maternal attitudes observed here may contribute to stronger intentions and future actions related to stunting prevention, especially when reinforced by religious teachings and community norms. From a practical standpoint, the success of this approach demonstrates that educational strategies must be culturally and spiritually relevant to resonate with the target audience. The intervention did not merely transfer knowledge but recontextualized health behavior as an act of faith and responsibility, which significantly influenced maternal perspectives and motivation. Therefore, Islamic spiritual-based education is a potentially transformative tool for public health, particularly in communities where religion plays a central role in daily life and decision-making (Stenhammar et al., 2012).

4. Analysis of the Effect of Islamic Spiritual-Based Education on Mothers' Attitudes about Overcoming Stunting

a. Analysis of Data Distribution Pattern Examination Results

As shown in Table 9, the Shapiro-Wilk normality test was used to assess whether the pretest and posttest data were normally distributed. The resulting p-values were 0.303 for the pre-intervention data and 0.354 for the post-intervention data, both of which exceed the 0.05 threshold. According to the principles of inferential statistics, this



confirms that the data distribution does not significantly deviate from normality, thus justifying the use of parametric tests, particularly the paired t-test, to compare pre- and post-intervention scores.

The normal distribution of data suggests that any observed differences in attitudes are likely due to the intervention rather than anomalies in measurement or sampling, supporting the validity and reliability of subsequent findings. This forms the statistical foundation for evaluating the actual impact of the Islamic spiritual-based education.

b. Results of Analysis of the Effect of Islamic Spiritual-based Education on Mothers' Attitudes about Overcoming Stunting in Gegerbitung Village, Sukabumi District

The paired t-test results, as presented in Table 10, demonstrate a highly significant difference in maternal attitudes before and after the intervention ($p = 0.000$). The average increase in attitude scores from 32.32 to 45.60 resulted in a mean difference of -13.28, with a 95% confidence interval ranging from -14.57725 to -11.98275. The t-value of -21.128 further confirms a substantial shift in attitudes following the educational program. This significant change aligns with the Theory of Reasoned Action (Ajzen & Fishbein, 1975), which states that individuals' behavior is driven by their intentions, which are in turn shaped by attitudes and normative beliefs. The Islamic spiritual-based education appears to have influenced not only cognitive understanding but also subjective norms by framing stunting prevention as a religious and moral duty. This aligns the behavior (seeking proper nutrition and parenting) with the participants' core values, thereby strengthening the intention to act.

Additionally, this intervention can be analyzed through Kirkpatrick's Four-Level Evaluation Model, particularly Level 2 (Learning) and Level 3 (Behavior). The significant increase in attitude scores demonstrates that learning occurred (Level 2), and the reduced standard deviation implies more consistent behavioral intent among participants, suggesting early effects at Level 3, where behavior begins to change in real life settings (Kirkpatrick & Kirkpatrick, 2016). The positive impact also reflects the value of culturally tailored health promotion, especially in communities where religious values influence everyday decision-making. By presenting stunting prevention as both a health necessity and a spiritual responsibility, the intervention leveraged intrinsic motivation, thereby increasing not only awareness but also commitment to behavioral change (Sudargo et al., 2015).

In conclusion, the data analysis, grounded in both statistical evidence and behavioral theory, supports the assertion that Islamic spiritual-based education significantly improves mothers' attitudes. This suggests that such an approach is not only effective but also sustainable when designed to resonate with the target population's values and belief systems.

Conclusion

This study aims to assess the effect of Islamic spiritual-based education on mothers' attitudes in overcoming stunting in Gegerbitung Village, Sukabumi District. Based on the results of data analysis, it can be concluded that:

1. Mothers' attitudes towards stunting prevention before education showed that the majority of respondents had a less than optimal attitude, with an average score of 32.32. This indicates the need for intervention to increase mothers' understanding and awareness of the importance of stunting prevention.
2. After being given Islamic spiritual-based education, there was a significant increase in mothers' attitudes towards stunting prevention efforts, with the average score



increasing to 45.60. This change indicates that Islamic spiritual-based education has a positive influence on improving mothers' attitudes in dealing with stunting issues.

3. Based on the results of the paired t-test statistical test, a p-value of 0.000 was obtained which is smaller than 0.05, indicating that changes in maternal attitudes after Islamic spiritual-based education are significant. This strengthens the argument that Islamic spirituality-based educational interventions can be an effective strategy to improve mothers' awareness and attitudes in addressing stunting.

Overall, this study shows that Islamic spirituality-based education can play an important role in improving mothers' attitudes towards stunting prevention in Gegerbitung Village, Sukabumi District.

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