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Health Belief, Psychological Conditions, and Treatment-Seeking Behavior in Caregivers of Stunting Toddlers in Rural Areas

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ABSTRACT

Stunting in toddlers is still a global problem that has a serious impact on the social and economic aspects of society. The increase in the number of stunting cases that are not treated causes the condition of toddlers to worsen. This is caused by the health beliefs and psychological condition of the caregiver. This research aims to analyze the relationship between health beliefs psychological conditions and treatment-seeking behavior. This research design uses correlational analytics with a cross-sectional approach. The independent variables are health beliefs and psychological conditions, while the dependent variable is treatment-seeking behavior. This research was conducted in the Keling II Community Health Center Working Area, Jepara Regency in January 2025. A sample of 100 caregivers of stunted toddlers was taken using a purposive sampling technique according to certain criteria. The research instruments used the Brief Illness Perception Questionnaire (BIPQ-8), Perceived Stress Scale (PSS-10), and General Help-Seeking Questionnaire (GHSQ). Data analysis used the chi-square test. The research results show that there is a significant relationship between health beliefs and treatment-seeking behavior in caregivers of stunting toddlers with a value of p = 0.000 (p < 0.05) and a correlation coefficient value (r = 0.417), and there is a significant relationship between psychological conditions and treatment seeking behavior with a value of p < 0.001 (p < 0.05) with a moderate correlation coefficient (r = 0.420). Health beliefs and psychological conditions of care givers shape treatment-seeking behavior. There is a need for intervention to improve treatment-seeking behavior by increasing health beliefs and the psychological condition of caregivers.

KEYWORDS
Health Beliefs, psychology conditions, stunting, treatment seeking-behavior

INTRODUCTION

We still often encounter the problem of stunting in the world in children under five. Toddlers who experience stunting will have a lower brain capacity compared to their peers, resulting in reduced productivity of thinking abilities which can affect the learning level of children with developmental delays which will of course decrease, causing disruption to the country's education standards and risking the quality of Indonesia's human resources. So that ongoing stunting incidents could become a threat to Indonesia (Nugroho et al., 2021). Apart from that, according to Apriluana & Fikawati (2019), Decreased cognitive abilities of toddlers with developmental delays can result in increased poverty and hinder economic development. Based on literature studies, toddlers with stunting tend to experience discrimination from peers, society, and even their own families. This causes stress for parents (Widiastuti et al., 2022). Stunting itself is a condition where a child experiences growth failure which occurs due to chronic nutritional problems characterized by a lack of adequate nutritional intake over a long period so that the physical condition is characterized by the child being shorter (stunted) than children age. Stunting often occurs in children under 5 years of age. Malnutrition in children can be seen in the womb or when the baby is born, but stunting can only be seen when the child turns 2 years old (Madhe et al., 2021).

According to data *World Health Organization* WHO (2024), Globally, children under 5 years of age

are affected by stunting, with an estimated incidence of 148 million with a prevalence of 22.3% in 2022. Meanwhile, the Southeast Asia Region / *South-East Asia Regional* (SEAR) found cases of stunting under five with a prevalence of 30.1%. Meanwhile, there are also many incidents in Indonesia according to data obtained from the Republic of Indonesia Ministry of Health (2024), in 2023, the incidence of stunting was found with a prevalence of 21.5% which can be categorized as occupying the 3rd highest place with stunting incidence in Southeast Asia and in 2023 Indonesia will be in 5th position among countries in Asia (WHO, 2024) Stunting cases in Central Java Province in 2023 from Central Java Province Health Profile data were 20.8%. The incidence of stunting among toddlers is still relatively high in this province, Jepara Regency itself ranks 25th in stunting cases in Central Java Province with a prevalence of 6.78% (Central Java Health Office, 2023). According to data from the Jepara District Health Service in 2022, it was found that stunting cases in toddlers aged 0-59 months were 11.87%, with the highest cases being at the Keling II Health Center with a percentage of 19.64%, while the lowest cases were at the Batu Alit Health Center with a percentage of 4.30%. (Jepara District Health Office, 2022). From the data provided by the Keling II Health Center, the incidence of stunting among toddlers aged 0-59 months in 2024 was found to be 133 children.

Stunting can occur due to factors such as malnutrition experienced by mothers during pregnancy and toddlers, lack of health knowledge, inadequate nutrition before and during pregnancy, limited health services, and access to nutritious food is not optimal. (Indanah et al., 2022) Apart from that, according to Nugroho et al. (2021), several factors can influence the incidence of stunting in toddlers, including nutritional factors, LBW, exclusive breastfeeding, parental income, parental knowledge, parental education level, environmental conditions, and parental health. Parents' health belief behavior can also be one of the reasons for the increasing incidence of stunting because there are still many parents who underestimate their children's health and normalize children eating unhealthy food. Apart from that, the incidence of stunting has increased due to the unstable psychological condition of parents resulting from mothers often being compared with other mothers, experiencing pressure from society, as well as a lack of support from their partners and the surrounding environment, which can result in the child not getting full attention from his parents and resulting in parents being embarrassed to take their child to health services because of shame and fear of being increasingly blamed. (Putri et al., 2024)

If the problem of stunting in toddlers is not addressed properly, it can result in hampered physical growth, mental development, and the child's health status, requiring special attention. Recent studies regarding the incidence of stunting illustrate that this situation can affect thinking abilities (Nugroho et al., 2021). Stunting affects brain development and overall growth, because malnutrition causes insufficient nutrition for the nervous system, thereby inhibiting optimal brain cell production. As a result, this disorder damages cognitive abilities and intelligence due to inadequate brain cell development. Apart from that, when they enter adulthood, children with stunting

experience delays in their reproductive system and are susceptible to degenerative diseases (Anwar et al., 2022)

Based on the results of a preliminary study conducted through interviews with health workers at the Keling II health center, it was found that the incidence of stunting among toddlers at the Keling II health center was quite high, amounting to 133 out of 424 toddlers experiencing stunting. The increasing incidence of stunting there is due to poor nutrition in mothers during pregnancy. The mothers of toddlers there have a low level of knowledge so their confidence in health is relatively low. Apart from that, parents' desire to take their children to posyandu or puskesmas is relatively low because the residents there still adhere to and believe in traditional medicine. Programs that have been implemented to deal with stunting include providing PMT for toddlers and pregnant women, HB checks for teenage girls, and re-weighing.

Treatment-seeking behavior is the behavior of individuals and society in finding treatment to solve their health problems until they recover (Putri et al., 2024). Treatment-seeking behavior itself is influenced by several factors including availability, experience, acceptance of treatment, attitude, level of knowledge, trust in treatment facilities, stigma, and community beliefs. (Bukan et al., 2020) Meanwhile, according to Doll et al. (2021), stated that the factors of treatment-seeking behavior were stigma and beliefs. Health beliefs are concepts resulting from individual perceptions or beliefs to describe and estimate someone's actions in preventing, early detection, or controlling acute or chronic diseases. (Nurhidayati et al., 2019). Beliefs that often exist in society are usually like still believing in mystical things so more often people do not immediately seek treatment from medical experts but instead seek traditional treatment such as religious leaders or shamans. (Bukan et al., 2020). Parents' healthy belief behavior is quite important in overcoming the incidence of stunting. However, there are still many parents who underestimate this due to a lack of knowledge due to inadequate education. Apart from that, there is a perception by parents who think that the decline in children's growth is not due to stunting but because of mystical or traditional things. Apart from that, parents are also reluctant to take their toddlers for immunization due to limited knowledge and facilities (Laila et al., 2023).

Apart from that, the low awareness of seeking treatment is caused by stigma or negative views from society, such as public stigma towards mothers with stunted toddlers, which results in psychological instability in mothers so that mothers feel embarrassed, afraid, close themselves off and are reluctant to take their children to posyandu or other health facilities. A psychological condition is a condition related to an individual's psychology that is not visible and is based on actions to achieve certain goals which are carried out in a conscious state. (Wulandari et al., 2019). In society, the view of toddlers with stunting tends to be that they often blame and compare their mothers, sometimes they are also under pressure and do not receive support from their families, which results in the mothers experiencing psychological instability such as anxiety and excessive stress. The impact of society's views results in mothers tending to close themselves off, not wanting to interact,

keeping to themselves, and not wanting to discuss their child's growth (Utami et al., 2024) Apart from that, the negative view of society towards toddlers with stunting shows a lack of public understanding. If this attitude continues, it can trigger mental health burdens and have a major impact on the mother's psychological condition (Putri et al., 2024).

This research is supported by previous research conducted by Masita et al. (2019), with 124 respondents who used a questionnaire, it was found that there was a relationship between beliefs and treatment-seeking behavior in families of people with mental disorders. Supported research conducted by Novitasari et al. (2023), with 110 respondents with an approach *Cross-Sectional*, shows a link between beliefs and health-seeking behavior. This research emphasizes that most still have confidence in traditional medicine and smart people. Meanwhile, research conducted by Syafitri (2021), involving 692 respondents selected using the method *cluster proportionate sampling,* using a questionnaire with the criteria for student respondents from the class of 2018 and processing it with descriptive data analysis, shows that there is a relationship between psychological conditions and treatment-seeking behavior. Meanwhile, research conducted by Mustafa et al. (2020), which was conducted at the Sheikh Zayed Rahim Yar Khan Hospital Pakistan with a total of 116 respondents with *Non-Probability Consecutive sampling technique* age criteria 18-65 years using the approach *Cross-sectional*, shows that there is a relationship between treatment-seeking behavior and psychological problems. Both studies emphasized that respondents still trusted healers and kept to themselves because they felt embarrassed by the views around them.

It is hoped that this research will be useful for all fields, especially in the field of nursing, and it is hoped that this research can increase nurses' insight and knowledge regarding the phenomena raised. So, we can develop early prevention of stunting in pregnant women and can see the connection between *health belief*s and psychological conditions with help-seeking behavior among caregivers of stunted toddlers. This research aims to analyze the relationship between health beliefs psychological conditions and treatment-seeking behavior in caregivers of stunted toddlers.

METHODS

This research design uses a correlational analytical approach *cross-sectional*. The independent variable in this research is *health belief*s and psychological conditions, while the dependent variable is *treatment-seeking behavior*. This research was conducted in the Keling II Community Health Center Working Area, Jepara Regency on January 10, 2025. The sample for this research was 100 respondents selected through technical *purposive sampling.* The inclusion criteria in this study were caregivers of stunted toddlers, caregivers who could read and write, and caregivers who could communicate well. The exclusion criteria in this study were caregivers who were not present during data collection. This research instrument uses a demographic questionnaire including the name of the caregiver and toddler, age, gender, occupation, and education. Health belief variable using a questionnaire *Brief Illness Perception Questionnaire* (BIPQ-8) proposed by Elizabeth Broadbent in 2006. In 2019 the BIPQ-8 was tested for

validity and reliability by Tariq, with results using *Chornbach's alpha* 0.929. The health perception questionnaire has 8 question items with answer choices on a scale from 0-10 where respondents can circle the number to choose.

Psychological condition variables use a questionnaire *Perceived Stress Scale* (PSS-10) which was first proposed by Sheldon Colen in 1983. The reliability value of the PSS-10 for the full scale is 0.75 and 0.81 for the subscale. PSS-10 has 10 question items with answer options never (0), rarely (1), sometimes (2), quite often (3), and very often (4). Variable *treatment-seeking behavior* using a questionnaire *General Help-Seeking Questionaire* (GHSQ) with reliability values *of 0,911.* GHSQ uses 7 *points Likert scale* with 10 questions with answer

choices very unlikely (1), almost impossible (2), impossible (3), neutral (4), possible (5), almost very likely (6), and very likely (7).

The researcher explains that the research consists of titles, objectives, benefits, procedures, rights, and obligations to potential respondents. Then prospective respondents fill out a consent form if they are willing to participate in the research. Respondents filled out the questionnaire and then the researcher checked all the answers to the questionnaire. Data analysis used the Chi-Square test. This research has been declared to have passed ethical review from the Health Research Ethics Commission (KEPK) Muhammadiyah University of Kudus with Number: 85/Z-7/KEPK/UMKU/XII/2024 on December 6, 2024.

RESULTS AND DISCUSSION

Respondent Characteristics

Table 1. Frequency distribution of respondents according to age (n=100)

Variable	Mean	Median	SD	Min-Max
Age (years)	34,21	34	6,458	23-56

Based on Table 1, it can be concluded that the average age of respondents is 34.21 years. The mean age of respondents is 34 years with a standard deviation of respondent ages of 6.458. The youngest respondent was 23 years old and the oldest was 56 years old. Based on the results of research conducted on caregivers of stunted toddlers at the Keling II Community Health Center, data showed that the average age of caregivers of stunted toddlers was in the adult age group. This is in line with research conducted by (Paramitha et al., 2024), which revealed that most of the toddlers who experienced stunting were mothers aged 31-35 years (43%). Apart from that, this is in line with research conducted by Kuwa et al. (2024), which revealed that the majority of mothers with stunted toddlers were >20 years old. This is because age can influence the mother's readiness and knowledge regarding providing nutrition to children. However, the mother's age is not a determinant of stunting but depends on the knowledge the mother has and how she is willing to manage food that is good for the child (Paramitha et al., 2024).

Table 2. Frequency distribution of respondents according to gender, education, employment, and income (n=100)

Characteristics	f	%
Gender		
Man	17	17
Woman	83	83
Education		
Elementary school/equivalent	23	23
Middle school/equivalent	39	39
High school/equivalent	31	25
College	7	7
Work		
Teacher	3	3
Government employees	1	1
self-employed	8	8
Housewife	52	52
Factory Worker	25	25
Private sector employee	4	4
Other	7	7
Income		
Have no income	51	51
< UMR (Rp. 2.640.000)	11	11
≥ UMR (Rp. 2.640.000)	38	38
Amount	**100**	**100**

Based on table 2, shows that the majority of caregivers of stunted toddlers are female, 83 respondents (83%), have a junior high school/equivalent educational background, 39 people (39%), work as housewives, 52 respondents (52%), and 51 people (51%) have no income. Based on the results of research conducted on caregivers of stunted toddlers at the Keling II Community Health Center, the majority are female. This is in line with research conducted by Syahida et al. (2022), which revealed that caring for toddlers is more common among women, especially mothers of these toddlers. This is also supported by research conducted by Komalasari et al. (2020), which revealed that the majority of stunted toddlers are cared for by their parents, especially mothers.

Based on the results of research on caregivers of stunted toddlers at the Keling II Community Health Center, it was found that the majority of caregivers of stunted toddlers had at least junior high school education. This is in line with research conducted by Adri et al. (2024), which revealed that the majority of mothers of stunted toddlers had at least a junior high school education. This is in line with research conducted by Aryati et al., (2023) which revealed that mothers who have stunted toddlers have low education. Parents' education and experience in caring for children will influence their preparation for caring for children. Meanwhile, parents/caregivers with low levels of education have less knowledge and less information about children's nutritional patterns. (Vigawati, 2022 in Kuwa et al., (2024)).

Based on the results of research conducted on caregivers of stunted toddlers at the Keling II Community Health Center, it was found that the majority of caregivers of stunted toddlers were housewives. This is in line with research conducted by Kuwa et al., (2024), which states that the majority of parents/caregivers of stunted toddlers work as housewives. This is also in line with the research conducted by Syahida et al., (2022) which revealed that the majority of mothers with stunted toddlers were housewives. Mother's work is not something that can interfere with providing optimal nutrition for toddlers. Mothers who work or do not have the same opportunity to provide optimal nutrition. If the mother's knowledge about nutrition is good, supported by the will, she can certainly prepare simple food that is rich in nutrition (Paramitha et al., 2024)

Based on the results of research conducted on caregivers of stunted toddlers at the Keling II Community Health Center, it was found that the majority of caregivers of stunted toddlers had no income. This is in line with research conducted by Kuwa et al., (2024) which revealed that the majority of stunting toddlers' economic status had low income. Apart from that, this is also in line with research conducted by Paramitha et al., (2024), which states that the majority of parents with stunted toddlers have low incomes, namely below the minimum wage and have no income. Low economic status is considered to have a significant impact on the incidence of stunting. The family's low economic status can be influenced by the mother's level of education in choosing the food she consumes so that it usually becomes less varied and nutritious in foodstuffs that function for children's growth, such as sources of protein, vitamins, and minerals (Pakpahan, 2021 in Paramitha et al., 2024).

Table 3. Health beliefs, psychological conditions, and treatment-seeking behavior among caregivers of stunted toddlers (n=100)

Characteristics	f	%
Health belief		
Low	19	19
Currently	55	55
High	26	26
Psychological Conditions		
High stress	35	35
Moderate stress	51	51
Low stress	14	14
Treatment seeking behavior		
Didn't seek help	17	17
Depends on the situation	26	26
Seek help	57	57

Table 3 shows that half of the respondents had health beliefs in the moderate category, amounting to 55 respondents (55%), moderate stress levels, amounting to 51 respondents (51%), and had help-seeking behavior of 57 (57%). Based on the results of research in the Keling II Community Health Center working area, Jepara Regency, caregivers of stunted toddlers found that the majority of respondents had moderate health beliefs. This research is in line with research conducted by Novitasari et al. (2023), which revealed that the majority of respondents had health beliefs at a moderate level and tended to pay more attention to the health of themselves and their families. Apart from that, this research is also in line with research conducted by Utami & Rahmadhena (2020), which revealed that mothers' health perceptions regarding stunting toddlers tended to be at a medium to high level. This belief in medium-scale health can be risky in affecting the health of families and individuals, and can also influence delays in treatment of stunted toddlers. When parents' belief in health on a moderate scale continues and does not increase, the condition of stunted toddlers can worsen and vice versa.

Health belief is a concept resulting from an individual's perception or belief to describe and estimate someone's actions in preventing, early detection, or controlling acute or chronic diseases. Whereas *Health belief* is a condition where a person has the confidence to behave healthily or not to behave healthily (Utami & Rahmadhena, 2020). *Health belief* is used to show changes in health behavior in society, in this theory it refers more to attitudes and behavior, especially in the health sector which emphasizes individual perceptions and beliefs. The existence of an individual's perception of being good or bad can refer to the occurrence of actions in behavior (Wardani & Harumi, 2022). Most of the caregivers of stunted

toddlers in the Keling II Community Health Center work area have moderate health beliefs. This is influenced by the individual's desire to prevent and treat if they feel unwell. This is in line with research conducted by Laili & Tanoto (2021), that factors that influence individuals in having health beliefs include having the motivation to prevent disease or to cure if they are already unhealthy, and having the belief that certain health actions can prevent or treat disease.

Based on the results of research conducted in the Keling II Community Health Center working area, Jepara Regency, among caregivers of stunted toddlers, the results showed that the majority of respondents had psychological conditions with moderate levels of stress. This research is in line with research conducted by Utami, 2024 which revealed that the majority of mother respondents experienced stress and this could affect the toddlers they were caring for. Apart from that, this research is also in line with research conducted by Saripah et al., (2021) which revealed that mothers with stunted toddlers tend to have high levels of stress due to lack of support from the family. This shows that the majority of caregivers of stunted toddlers have psychological problems which are indicated by the level of stress experienced by the respondents.

A psychological condition is a condition related to an individual's psychology that is not visible and is based on actions to achieve certain goals which are carried out in a conscious state. (Wulandari et al., 2019). Caregivers of stunted toddlers in the Keling II Community Health Center work area found that the majority of respondents had a psychological condition with a moderate level of stress. Apart from that, this is in line with research conducted by Febristi & Antoni (2023), which revealed that psychological conditions have several disorders including anxiety disorders, mood disorders, perception disorders, eating disorders, and stress disorders. In this study, psychological conditions were measured by the respondent's stress level. From the results of research conducted using a stress scale, this psychological condition can be influenced by family or local community pressure. This statement is supported by research conducted by (Saripah et al., 2021) which revealed that the factor that influences stress levels is a lack of support from the family.

Based on the results of research conducted in the working area of the Keling II Community Health Center, Jepara Regency, on caregivers of stunted toddlers, the results showed that the majority of caregivers of stunted toddlers had the behavior to seek medical assistance. So, in these results, the majority of caregivers of stunted toddlers chose to seek medical assistance if a family member was sick, such as going to the orderlies, midwives, or relatives or going straight to the nearest health service. This is in line with the statement expressed by Sidik et al. (2022), that an individual's behavior when they feel sick is to seek out medical treatment, both traditional and modern. Apart from that, this is in line with research conducted by Nurlena et al., (2021) which revealed that when an individual has carried out treatment independently but has not recovered, the next behavior is to seek treatment which is influenced by the individual's belief in healing.

Treatment-seeking behavior is an activity carried out by individuals who feel they are sick or have

a health problem with the intention of getting appropriate treatment (Bukan et al., 2020). The results obtained in this study were that the majority of respondents chose to seek treatment, 57 respondents (57.0%). This is influenced by health belief factors and the level of knowledge of caregivers of stunted toddlers. So this is in line with the statement expressed by Not et al. (2020), that the factors that influence individuals in carrying out treatment-seeking behavior in society are influenced by their knowledge, attitudes, and beliefs. Apart from that, low awareness of seeking treatment can be caused by stigma or negative views from society, such as public stigma towards mothers with stunted toddlers, which results in psychological instability in the mother so that the mother feels embarrassed, afraid, closes herself off and is reluctant to take her child to the posyandu or other health facilities. (Putri et al., 2024).

Table 4. Relationship health belief with treatment-seeking behavior in caregivers of stunted toddlers

Health Belief	Treatment Seeking Behavior								
	Not looking		Depends on the situation		Seek help		Total		p-value
	n	%	n	%	n	%	n	%	0,000
Low	8	42,1	6	31,6	5	26,3	19	100	
Currently	8	14,5	17	30,9	30	54,5	55	100	
High	1	3,8	3	11,5	22	84,6	26	100	
Total	**17**	**17**	**26**	**26**	**57**	**57**	**100**	**100**	
Mark Correlation Coefficient = 0,417									

In Table 4 it is known that the majority of respondents who had the behavior of seeking medical help, 30 respondents (54.5%) had moderate health beliefs. Based on the results of analysis using statistical tests *Chi-Square* with a computer program, a p-value <0.001 (p <0.05) was obtained, which means that there is a relationship between *health belief* And *treatment seeking behavior* among caregivers of stunted toddlers at the Keling II Community Health Center. Test results *Chi-Square* shows that the correlation coefficient (r=0.417) has a moderate strength of relationship so that it shows a positive correlation direction, meaning that the higher the health belief, the higher the behavior of seeking treatment, and vice versa.

This research is supported by research that has been conducted by Novitasari et al. (2023), which shows that there is a relationship between beliefs and health-seeking behavior with a significant p<a value of 0.000 <0.05. This research states that most respondents have low education. This research was conducted in coastal areas so coastal area income is uncertain due to nature and weather. In this research, it was explained that most people there think that the disease they suffer from is not dangerous and choose to self-medicate and use traditional medicine so that they do not have the desire to seek medical help from health services.

Apart from that, this research is also supported by research conducted by Masita et al. (2019), It was found that there was a relationship between beliefs and

treatment-seeking behavior in families of people with mental disorders with a significant value of 0.000 (p<0.05). In this study, it was found that on average respondents believed that the mental disorders experienced by their families were the result of witchcraft, so they trusted smart people (shamans) more to treat mental disorders than going to health services. As a result of strong cultural beliefs, the people of Ternate are reluctant to seek treatment at the nearest hospital or health center and choose to seek help from smart people (shamans) to cure their family's psychological problems.

So, the research carried out by Novitasari et al. (2023) And Masita et al. (2019), indicates that having confidence in being healthy is very important because individuals can have the awareness to seek medical help to find out earlier about health problems themselves and their families. Having confidence in health can make parents or caregivers of toddlers raise awareness in improving the health of toddlers and their families, such as awareness of parents in searching for the nearest health services.

Table 5. Relationship between psychological conditions and treatment-seeking behavior in caregivers of stunted toddlers

Psychological condition	Treatment Seeking Behavior								
	Not looking		Depends on the situation		Seek help		Total		p-value
	n	%	n	%	n	%	n	%	0,000
High Stress	12	34,3	14	40,0	9	25,7	35	100	
Moderate Stress	4	7,8	10	19,6	37	72,5	51	100	
Low Stress	1	7,1	2	14,3	11	78,6	14	100	
Total	**17**	**17**	**26**	**26**	**57**	**57**	**100**	**100**	
Mark Correlation Coefficient = 0,449									

In Table 5 it is known that 37 respondents (72.5%) had the behavior of seeking medical help with moderate stress psychological conditions. Statistical test results using the test *Chi-square* with a computer program to get a correlation coefficient value of (r=0.449) and a p-value <0.001 (p <0.05) which means that there is a relationship between psychological conditions and *treatment-seeking behavior* among caregivers of stunted toddlers at the Keling II Community Health Center. This relationship has medium strength and has a positive relationship direction, which means that the more stable the psychological condition, the more treatment-seeking behavior will increase.

So this research found that the more psychological conditions with low levels of stress, the more awareness they have in seeking treatment. Meanwhile, those with more psychological conditions with high levels of stress tend to be more thoughtful about seeking treatment. This is supported by research conducted by Syafitri (2021), which shows that there is a relationship between psychological conditions and treatment-seeking behavior. This research shows that a low number of respondents who have mental stress are reluctant to seek health help,

prefer to try to solve it themselves and pray, ask friends/relatives for help, have more trust, and choose to pray to God to cure their illness, also the majority of respondents do not know and do not want to look for where to find psychological services and are also reluctant to talk about their mental health problems to health workers because they feel embarrassed and afraid of the problems they face.

Apart from that, it is also supported by research conducted by Mustafa et al. (2020), conducted in Pakistan showed that more than half of respondents with psychological problems chose to seek a spiritual healer as the first choice to overcome health problems. This research showed that 36.2% of respondents had low education and 33% of respondents were illiterate. In this study, 56.9 respondents chose to seek a spiritual healer, and 20.7% of respondents went to a psychiatrist.

This research has several limitations, namely When filling out the questionnaire, sometimes the answers given by respondents do not show the actual situation. Besides that At the time of data collection, there were external factors, namely quite high rainfall, which resulted in several respondents not coming to the posyandu and researchers having difficulty reaching the respondents' homes, thus hampering data collection. This research is only limited to knowing the factors *of health belief* and psychological conditions and did not examine further other unobserved factors of treatment-seeking behavior that might interfere with the research results.

RESEARCH LIMITATION

1. There are limitations when filling out the questionnaire, namely that sometimes the answers given by respondents do not show the actual situation
2. Susceptible to temporary bias, where at the time of data collection there were external factors, namely quite high rainfall, which resulted in some respondents not coming to the integrated health post and researchers having difficulty reaching respondents' homes, thus hampering data collection.
3. This study only examined health belief factors and psychological conditions, did not further examine other unobserved treatment-seeking behavioral factors that could potentially interfere with the research results.

CONCLUSION AND RECOMMENDATION

There is a significant relationship between *health belief* with *treatment behavio*r in caregivers of stunted toddlers at the Keling II Community Health Center with a p-value <0.001 (p <0.05) with a moderate correlation coefficient value (r=0.417) which has a positive correlation direction, meaning that the higher the health belief, the higher the behavior of seeking treatment, and vice versa. There is a significant relationship between psychological conditions and *treatment-seeking behavior* in caregivers of stunted toddlers at the Keling II Community Health Center with a value of p<0.001 (p <0.05) with a moderate correlation coefficient (r=0.420) which has a positive direction, which means that the more stable the psychological condition, the more treatment seeking behavior will increase, and vice versa.

It is hoped that we can examine a larger number of samples, use research with a combination of

quantitative and qualitative methods to dig up more in-depth information, and measure other factors that can influence *treatment-seeking behavior* apart from *health belief*s and psychological conditions such as experience, social support, level of knowledge, stigma, and social culture. Apart from that, it can also involve posyandu cadres as additional subjects to find out their role.

ETHICS APPROVAL AND CONSENT TO PARTICIPATE

This research has been declared to have passed ethical review from the Health Research Ethics Commission (KEPK) Muhammadiyah University of Kudus with Number: 85/Z-7/KEPK/UMKU/XII/2024 on December 6, 2024. This research ethics also regulates how researchers behave during report preparation and research implementation.

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