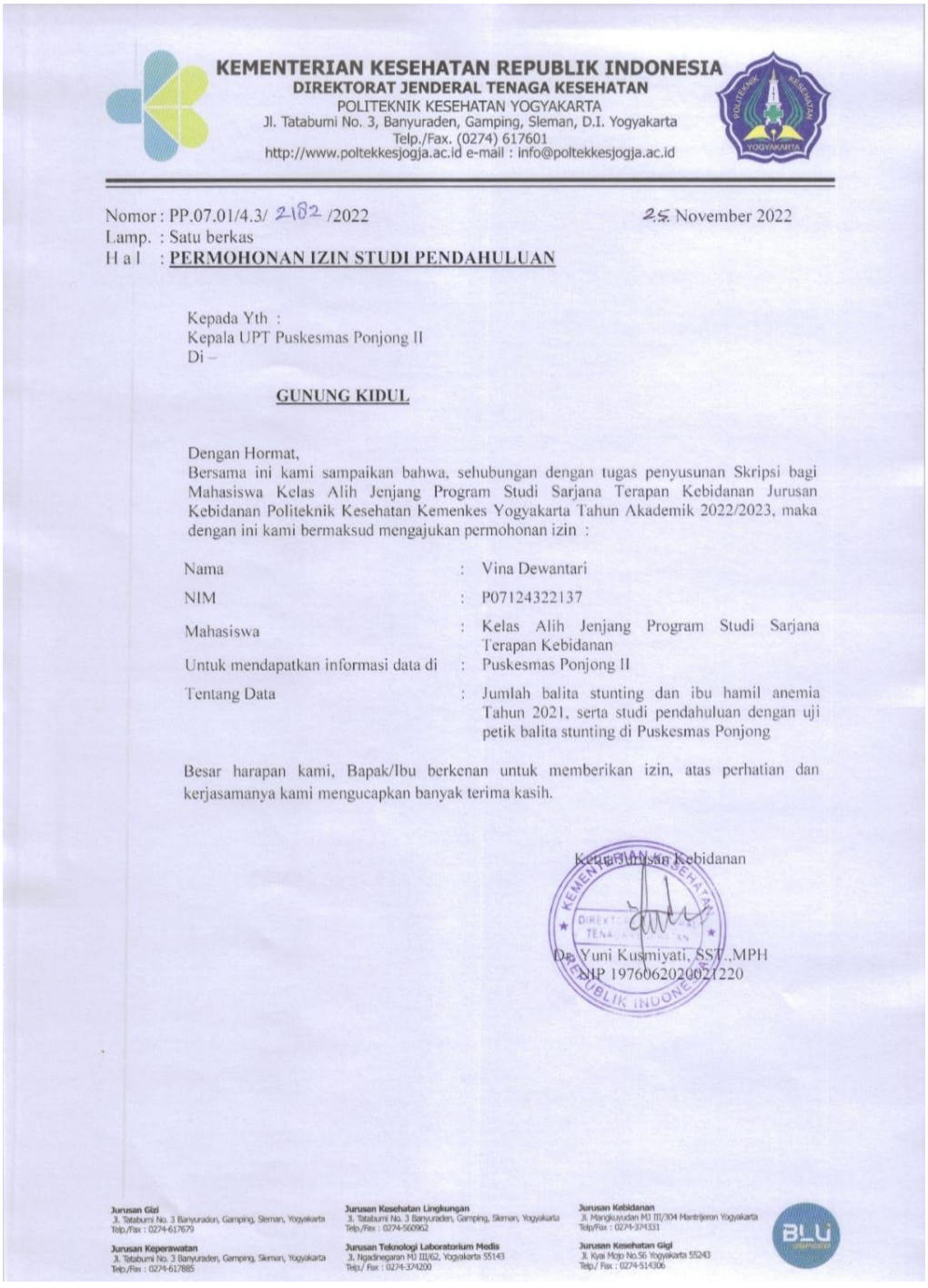
LAMPIRAN

Lampiran.1. Permohonan Izin Studi Pendahuluan



KEMENTERIAN KESEHATAN REPUBLIK INDONESIA
DIREKTORAT JENDERAL TENAGA KESEHATAN
POLITEKNIK KESEHATAN YOGYAKARTA
Jl. Tatabumi No. 3, Banyuraden, Gamping, Sleman, D.I. Yogyakarta
Telp./Fax. (0274) 617601
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Nomor : PP.07.01/4.3/ 2182 /2022 — 25 November 2022
Lamp. : Satu berkas
H a l : **PERMOHONAN IZIN STUDI PENDAHULUAN**

Kepada Yth :
Kepala UPT Puskesmas Ponjong II
Di –

GUNUNG KIDUL

Dengan Hormat,
Bersama ini kami sampaikan bahwa, sehubungan dengan tugas penyusunan Skripsi bagi Mahasiswa Kelas Alih Jenjang Program Studi Sarjana Terapan Kebidanan Jurusan Kebidanan Politeknik Kesehatan Kemenkes Yogyakarta Tahun Akademik 2022/2023, maka dengan ini kami bermaksud mengajukan permohonan izin :

Nama	:	Vina Dewantari
NIM	:	P07124322137
Mahasiswa	:	Kelas Alih Jenjang Program Studi Sarjana Terapan Kebidanan
Untuk mendapatkan informasi data di	:	Puskesmas Ponjong II
Tentang Data	:	Jumlah balita stunting dan ibu hamil anemia Tahun 2021, serta studi pendahuluan dengan uji petik balita stunting di Puskesmas Ponjong

Besar harapan kami, Bapak/Ibu berkenan untuk memberikan izin, atas perhatian dan kerjasamanya kami mengucapkan banyak terima kasih.

Ketua Jurusan Kebidanan

Dr. Yuni Kusmiyati, SST..MPH
NIP 197606202002122O

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Jurusan Keperawatan
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Jurusan Kesehatan Lingkungan
Jl. Tatabumi No. 3 Banyuraden, Gamping, Sleman, Yogyakarta
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Jurusan Teknologi Laboratorium Medis
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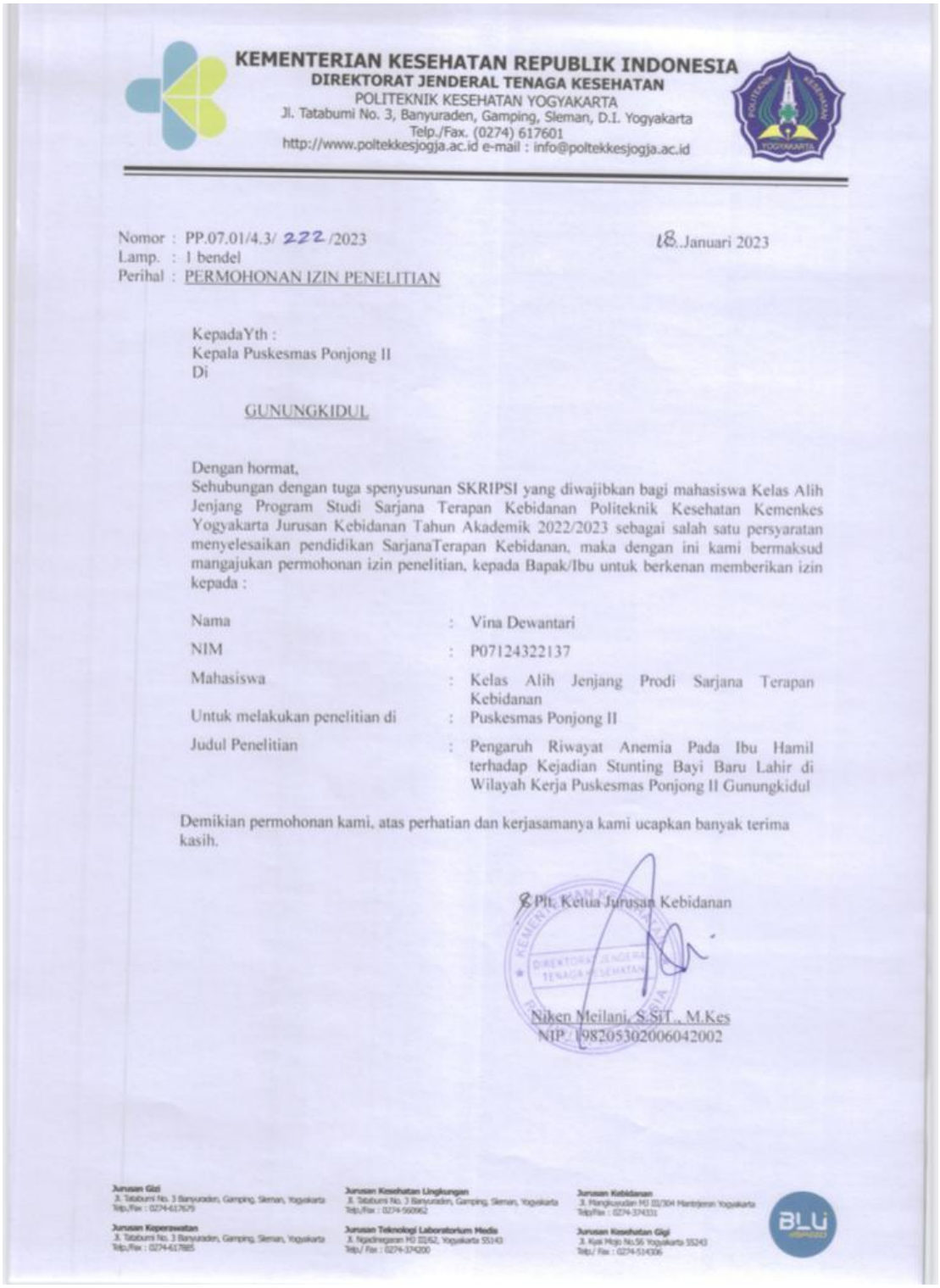
Telp./ Fax : 0274-374200

Jurusan Kebidanan
Jl. Mangkuyudan MJ III/304 Mantrijeron Yogyakarta
Telp/Fax : 0274-374331

Jurusan Kesehatan Gigi
Jl. Kyai Mojo No.56 Yogyakarta 55243
Telp./ Fax : 0274-514306

Lampiran 2. Surat Ijin Penelitian



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Nomor : PP.07.01/4.3/ 222 /2023 18 Januari 2023
Lamp. : 1 bendel
Perihal : PERMOHONAN IZIN PENELITIAN

KepadaYth :
Kepala Puskesmas Ponjong II
Di

GUNUNGKIDUL

Dengan hormat,
Sehubungan dengan tuga spenyusunan SKRIPSI yang diwajibkan bagi mahasiswa Kelas Alih Jenjang Program Studi Sarjana Terapan Kebidanan Politeknik Kesehatan Kemenkes Yogyakarta Jurusan Kebidanan Tahun Akademik 2022/2023 sebagai salah satu persyaratan menyelesaikan pendidikan SarjanaTerapan Kebidanan, maka dengan ini kami bermaksud mangajukan permohonan izin penelitian, kepada Bapak/Ibu untuk berkenan memberikan izin kepada :

Nama	:	Vina Dewantari
NIM	:	P07124322137
Mahasiswa	:	Kelas Alih Jenjang Prodi Sarjana Terapan Kebidanan
Untuk melakukan penelitian di	:	Puskesmas Ponjong II
Judul Penelitian	:	Pengaruh Riwayat Anemia Pada Ibu Hamil terhadap Kejadian Stunting Bayi Baru Lahir di Wilayah Kerja Puskesmas Ponjong II Gunungkidul

Demikian permohonan kami, atas perhatian dan kerjasamanya kami ucapkan banyak terima kasih.

a.n. Plt. Ketua Jurusan Kebidanan

Niken Meilani, S.SiT., M.Kes
NIP. 198205302006042002

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Jurusan Kesehatan Gigi
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Telp./ Fax : 0274-514306

Lampiran 3. *Ethical Clearance*

KOMITE ETIK PENELITIAN KESEHATAN
POLITEKNIK KESEHATAN KEMENKES YOGYAKARTA
Jl. Tatabumi No. 3, Banyuraden, Gamping, Sleman, D.I. Yogyakarta
Telp./Fax. (0274) 617601
Email : kepk@poltekkesjogja.ac.id

KETERANGAN LAYAK ETIK
DESCRIPTION OF ETHICAL EXEMPTION
"ETHICAL EXEMPTION"

No.DP.04.03/e-KEPK.1/060/2023

Protokol penelitian versi 1 yang diusulkan oleh :
The research protocol proposed by

Peneliti utama : VINA DEWANTARI
Principal In Investigator

Nama Institusi : POLTEKKES KEMENKES YOGYAKARTA
Name of the Institution

Dengan judul:
Title
"PENGARUH RIWAYAT ANEMIA PADA IBU HAMIL TERHADAP KEJADIAN STUNTING BAYI BARU LAHIR DI WILAYAH KERJA PUSKESMAS PONJONG II GUNUNGKIDUL"

"THE EFFECT OF PREGNANT WOMEN'S ANEMIA HISTORY ON THE INCREASE IN RISK OF NEWBORN STUNTED GROWTH IN PUSKESMAS PONJONG II GUNUNGKIDUL'S WORKING AREA"

Dinyatakan layak etik sesuai 7 (tujuh) Standar WHO 2011, yaitu 1) Nilai Sosial, 2) Nilai Ilmiah, 3) Pemerataan Beban dan Manfaat, 4) Risiko, 5) Bujukan/Eksploitasi, 6) Kerahasiaan dan Privacy, dan 7) Persetujuan Setelah Penjelasan, yang merujuk pada Pedoman CIOMS 2016. Hal ini seperti yang ditunjukkan oleh terpenuhinya indikator setiap standar.

Declared to be ethically appropriate in accordance to 7 (seven) WHO 2011 Standards, 1) Social Values, 2) Scientific Values, 3) Equitable Assessment and Benefits, 4) Risks, 5) Persuasion/Exploitation, 6) Confidentiality and Privacy, and 7) Informed Concent, referring to the 2016 CIOMS Guidelines. This is as indicated by the fulfillment of the indicators of each standard.

Pernyataan Laik Etik ini berlaku selama kurun waktu tanggal 09 Februari 2023 sampai dengan tanggal 09 Februari 2024.

This declaration of ethics applies during the period February 09, 2023 until February 09, 2024.

February 09, 2023
Professor and Chairperson,

Dr. drg. Wiworo Haryani, M.Kes.

Lampiran 4. Anggaran Penelitian

ANGGARAN PENELITIAN

No	Kegiatan	Volume	Satuan	Unit cost	Jumlah
1.	ATK dan pengadaan bahan				
	a. Kertas	2	Paket	Rp 50.000,00	Rp 100.000,00
	b. Tinta printer	2	Botol	Rp 50.000,00	Rp 100.000,00
	c. Fotocopy dan jilid	5	Paket	Rp 35.000,00	Rp 175.000,00
2.	Studi Pendahuluan penelitian	1	Kali	Rp 25.000,00	Rp 25.000,00
3.	Biaya penelitian	1	Kali	Rp 100.000,00	Rp 100.000,00
4.	Transportasi penelitian	10	Kali	Rp 15.000,00	Rp 150.000,00
5.	Bingkisan	1	Paket	Rp 100.000,00	Rp 100.000,00
6.	Ethical Clearance	1	Kali	Rp 135.000,00	Rp 135.000,00
Total					Rp 885.000,00

Lampiran 5. Jadwal Penelitian

Kegiatan	Juli 2022				Agustus 2022				September 2022				Oktober 2022				November 2022				Desember 2022				Januari 2023				Februari 2023				Maret 2023				April 2023				Mei 2023			
	1	2	3	4	1	2	3	1	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Pengajuan Judul																																												
Penyusunan Proposal Penelitian																																												
Konsultasi dan Revisi																																												
Ujian Proposal																																												
Revisi Proposal																																												
Perijinan Penelitian																																												
Pengumpulan Data																																												
Pengolahan Data																																												
Penyusunan Laporan Penelitian																																												
Penyajian / Ujian Skripsi																																												
Revisi Penyelesaian																																												

Lampiran 6. Tabel Hasil Pengumpulan Data Penelitian

No	HB			PENDIDIKAN	PEKERJAAN	TB	USIA	LILA	PB	KLP
	1	2	3							
1		10.2		SMP	KARY	147	19	25	45	Kasus
2	13.1			SMA	IRT	156	32	26	39	Kasus
3	11.8			SMP	IRT	152	28	26	43	Kasus
4		13.4		SMA	PEDAGANG	149	36	25	46	Kasus
5		10.4		SMP	IRT	155	40	24	46	Kasus
6	11.1			SMP	IRT	154	28	24	46	Kasus
7			11.4	SMP	IRT	152	25	27	45	Kasus
8	12.8			SMA	IRT	157	25	25	46	Kasus
9	11.6			SMA	IRT	147	41	25.5	46	Kasus
10		9.5		SD	IRT	159	27	24	46	Kasus
11	10.8			SMA	IRT	160	26	26	46	Kasus
12	10.7			SMA	IRT	159	23	25.5	43	Kasus
13	11.3			SMP	IRT	140	37	27	46	Kasus
14	10.4			SMA	IRT	154	24	35	46	Kasus
15			12.1	SMP	IRT	153	37	28	46	Kasus
16		10.4		SMA	KARY	158	23	26	42	Kasus
17	11.4			SMP	IRT	150	28	25	46	Kasus
18	11.7			SMA	IRT	150	22	30	44	Kasus
19	12			SMP	IRT	151	23	28	45	Kasus
20	11.2			SMA	IRT	171	27	28	46	Kasus
21	11.6			SMP	IRT	155	20	26	46	Kasus
22		10.2		SMA	SWASTA	150	38	32	43	Kasus
23		10.1		SMP	IRT	156	24	25	44	Kasus
24	9.2			SMA	KARY	153	22	24	46	Kasus
25	10.4			SMA	SWASTA	152	22	25.5	46	Kasus
26			10.7	SMP	IRT	150	31	24	46	Kasus
27	10.1			SMP	IRT	157	25	24	41	Kasus

28			12.3	SMA	IRT	153	24	24	41	Kasus
29	13.2			SMA	IRT	153	24	34	46	Kasus
30	10.2			sd	irt	159	27	28	46	Kasus
31		10.4		SMP	IRT	155	40	24	45	Kasus
32	12.4			SMA	IRT	153	19	30	48	Kontrol
33	12.1			SMA	IRT	154	30	24	49	Kontrol
34	12.2			SMP	IRT	154	30	25	49	Kontrol
35		11.8		SMP	IRT	152	28	26	48	Kontrol
36	12.2			SMP	IRT	144	24	34	48	Kontrol
37	12.8			SMA	KARY	151	41	30	49	Kontrol
38	11.2			SMA	KARY	153	22	24	48	Kontrol
39	13.5			SMP	IRT	150	32	24	49	Kontrol
40		12.1		SMA	IRT	150	25	27	50	Kontrol
41	13.9			SMA	IRT	160	32	24	48	Kontrol
42	12.1			SMP	IRT	154	31	34	48	Kontrol
43	13.5			SMA	SWASTA	152	22	25.5	49	Kontrol
44	13.2			SMA	IRT	156	35	35	48	Kontrol
45	11.5			SMP	IRT	147.5	32	27	50	Kontrol
46	10.7			SMA	IRT	159	23	25.5	48	Kontrol
47	13.1			SMA	IRT	149	31	25	48	Kontrol
48	12.7			SMP	IRT	150	30	25	48	Kontrol
49			12.8	SMP	IRT	151	43	28	48	Kontrol
50			13.5	SMP	KARY	153	32	25.5	48	Kontrol
51	13.2			SD	IRT	151	25	28	48	Kontrol
52	13.2			SMA	IRT	156	35	35	48	Kontrol
53		12.9		SMA	IRT	150	25	27	48	Kontrol
54	12.9			SD	IRT	150	36	26	48	Kontrol

55	14.1			SMA	IRT	156	35	35	48	Kontrol
56	12.8			SMA	IRT	157	25	25	47	Kontrol
57		12.6		SMA	IRT	152	21	26	48	Kontrol
58		13.2		SMA	IRT	146	25	28	48	Kontrol
59	13.4			SMP	IRT	150	31	26.5	48	Kontrol
60	12.1			SD	IRT	160	24	25	48	Kontrol
61	12.4			SMP	IRT	155	24	23.4	48	Kontrol
62	13.4			SMA	IRT	148	22	26	49	Kontrol

Lampiran 7. Hasil Analisis

Analisis Univariat

Anemia

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Anemia	16	25.8	**25.8**	25.8

	Tidak anemia	46	74.2	**74.2**	100.0
	Total	62	100.0	**100.0**	

Stunting

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	stunting	31	50.0	**50.0**	50.0
	Tidak stunting	31	50.0	**50.0**	100.0
	Total	62	100.0	**100.0**	

Pendidikan

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	SD	5	8.1	**8.1**	8.1
	SMP	25	40.3	**40.3**	48.4
	SMA	32	51.6	**51.6**	100.0
	Total	62	100.0	**100.0**	

Umur Ibu

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Berisiko	13	21.0	**21.0**	21.0
	Tidak berisiko	49	79.0	**79.0**	100.0
	Total	62	100.0	**100.0**	

Tinggi Badan

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Berisiko	2	3.2	**3.2**	3.2
	Tidak berisiko	60	96.8	**96.8**	100.0
	Total	62	100.0	**100.0**	

Pekerjaan

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Bekerja formal	9	14.5	**14.5**	14.5
	Bekerja non formal	53	85.5	**85.5**	100.0
	Total	62	100.0	**100.0**	

Status Gizi

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	KEK	3	4.8	**4.8**	4.8
	Tidak KEK	59	95.2	**95.2**	100.0
	Total	62	100.0	**100.0**	

Test of Homogeneity of Variances

	Levene Statistic	df1	df2	Sig.
Anemia	207.774	1	60	**.000**
Pendidikan	.344	1	60	**.560**
Umur Ibu	3.544	1	60	**.065**
Tinggi Badan	.000	1	60	**1.000**
Pekerjaan	.507	1	60	**.479**
Status Gizi	1.394	1	60	**.242**

Anemia * Stunting Crosstabulation

			Stunting		
			stunting	Tidak stunting	Total
Anemia	Anemia	Count	15	1	16
		% within Stunting	48.4%	3.2%	25.8%
		% of Total	24.2%	1.6%	25.8%
	Tidak anemia	Count	16	30	46
		% within Stunting	51.6%	96.8%	74.2%
		% of Total	25.8%	48.4%	74.2%
Total		Count	31	31	62

	% within Stunting	100.0%	100.0%	100.0%
	% of Total	50.0%	50.0%	100.0%

Pendidikan * Stunting Crosstabulation

			Stunting		
			stunting	Tidak stunting	Total
Pendidikan	SD	Count	2	3	5
		% within Stunting	6.5%	9.7%	8.1%
		% of Total	3.2%	4.8%	8.1%
	SMP	Count	14	11	25
		% within Stunting	45.2%	35.5%	40.3%
		% of Total	22.6%	17.7%	40.3%
	SMA	Count	15	17	32
		% within Stunting	48.4%	54.8%	51.6%
		% of Total	24.2%	27.4%	51.6%
Total		Count	31	31	62
		% within Stunting	100.0%	100.0%	100.0%
		% of Total	50.0%	50.0%	100.0%

Umur Ibu * Stunting Crosstabulation

			Stunting		
			stunting	Tidak stunting	Total
Umur Ibu	Berisiko	Count	8	5	13
		% within Stunting	25.8%	16.1%	21.0%
		% of Total	12.9%	8.1%	21.0%
	Tidak berisiko	Count	23	26	49
		% within Stunting	74.2%	83.9%	79.0%
		% of Total	37.1%	41.9%	79.0%
Total		Count	31	31	62
		% within Stunting	100.0%	100.0%	100.0%
		% of Total	50.0%	50.0%	100.0%

Tinggi Badan * Stunting Crosstabulation

			Stunting		
			stunting	Tidak stunting	Total
Tinggi Badan	Berisiko	Count	1	1	2
		% within Stunting	3.2%	3.2%	3.2%
		% of Total	1.6%	1.6%	3.2%
	Tidak berisiko	Count	30	30	60
		% within Stunting	96.8%	96.8%	96.8%
		% of Total	48.4%	48.4%	96.8%
Total		Count	31	31	62
		% within Stunting	100.0%	100.0%	100.0%
		% of Total	50.0%	50.0%	100.0%

Pekerjaan * Stunting Crosstabulation

			Stunting		
			stunting	Tidak stunting	Total
Pekerjaan	Bekerja formal	Count	5	4	9
		% within Stunting	16.1%	12.9%	14.5%
		% of Total	8.1%	6.5%	14.5%
	Bekerja non formal	Count	26	27	53
		% within Stunting	83.9%	87.1%	85.5%
		% of Total	41.9%	43.5%	85.5%
Total		Count	31	31	62
		% within Stunting	100.0%	100.0%	100.0%
		% of Total	50.0%	50.0%	100.0%

Status Gizi * Stunting Crosstabulation

			Stunting		
			stunting	Tidak stunting	Total
Status Gizi	KEK	Count	2	1	3
		% within Stunting	6.5%	3.2%	4.8%
		% of Total	3.2%	1.6%	4.8%
	Tidak KEK	Count	29	30	59
		% within Stunting	93.5%	96.8%	95.2%

	% of Total	46.8%	48.4%	95.2%
Total	Count	31	31	62
	% within Stunting	100.0%	100.0%	100.0%
	% of Total	50.0%	50.0%	100.0%

Analisis Bivariat

1. Hubungan Anemia dan stunting

Anemia * Stunting Crosstabulation

			Stunting		
			stunting	Tidak stunting	Total
Anemia	Anemia	Count	15	1	16
		Expected Count	8.0	8.0	16.0
		% within Anemia	93.8%	6.3%	100.0%
		% of Total	24.2%	1.6%	25.8%
	Tidak anemia	Count	16	30	46
		Expected Count	23.0	23.0	46.0
		% within Anemia	34.8%	65.2%	100.0%
		% of Total	25.8%	48.4%	74.2%
Total		Count	31	31	62
		Expected Count	31.0	31.0	62.0
		% within Anemia	50.0%	50.0%	100.0%
		% of Total	50.0%	50.0%	100.0%

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Anemia (Anemia / Tidak anemia)	28.125	3.399	232.730
For cohort Stunting = stunting	2.695	1.779	4.083
For cohort Stunting = Tidak stunting	.096	.014	.647
N of Valid Cases	62		

Tests of Homogeneity of the Odds Ratio

	Chi-Squared	df	Asymptotic Significance (2-sided)
Breslow-Day	.000	0	.
Tarone's	.000	0	.

Tests of Conditional Independence

	Chi-Squared	df	Asymptotic Significance (2-sided)
Cochran's	16.511	1	.000
Mantel-Haenszel	14.007	1	.000

Under the conditional independence assumption, Cochran's statistic is asymptotically distributed as a 1 df chi-squared distribution, only if the number of strata is fixed, while the Mantel-Haenszel statistic is always asymptotically distributed as a 1 df chi-squared distribution. Note that the continuity correction is removed from the Mantel-Haenszel statistic when the sum of the differences between the observed and the expected is 0.

Mantel-Haenszel Common Odds Ratio Estimate

Estimate	**28.125**
ln(Estimate)	3.337

Standardized Error of ln(Estimate)			1.078
Asymptotic Significance (2-sided)			.002
Asymptotic 95% Confidence Interval	Common Odds Ratio	Lower Bound	**3.399**
		Upper Bound	**232.730**
	ln(Common Odds Ratio)	Lower Bound	1.223
		Upper Bound	5.450

The Mantel-Haenszel common odds ratio estimate is asymptotically normally distributed under the common odds ratio of 1,000 assumption. So is the natural log of the estimate.

2. Anemia dengan Stunting berdasarkan Pendidikan

Anemia * Stunting * Pendidikan Crosstabulation

Pendidikan				Stunting		Total
				stunting	Tidak stunting	
SD	Anemia	Anemia	Count	2	0	2
			Expected Count	.8	1.2	2.0
			% within Anemia	100.0%	0.0%	100.0%
			% of Total	40.0%	0.0%	40.0%
		Tidak anemia	Count	0	3	3
			Expected Count	1.2	1.8	3.0
			% within Anemia	0.0%	100.0%	100.0%
			% of Total	0.0%	60.0%	60.0%
	Total		Count	2	3	5
			Expected Count	2.0	3.0	5.0
			% within Anemia	40.0%	60.0%	100.0%
			% of Total	40.0%	60.0%	100.0%
SMP	Anemia	Anemia	Count	6	0	6
			Expected Count	3.4	2.6	6.0
			% within Anemia	100.0%	0.0%	100.0%
			% of Total	24.0%	0.0%	24.0%
		Tidak anemia	Count	8	11	19
			Expected Count	10.6	8.4	19.0
			% within Anemia	42.1%	57.9%	100.0%
			% of Total	32.0%	44.0%	76.0%
	Total		Count	14	11	25
			Expected Count	14.0	11.0	25.0

			% within Anemia	56.0%	44.0%	100.0%
			% of Total	56.0%	44.0%	100.0%
SMA	Anemia	Anemia	Count	7	1	8
			Expected Count	3.8	4.3	8.0
			% within Anemia	87.5%	12.5%	100.0%
			% of Total	21.9%	3.1%	25.0%
		Tidak anemia	Count	8	16	24
			Expected Count	11.3	12.8	24.0
			% within Anemia	33.3%	66.7%	100.0%
			% of Total	25.0%	50.0%	75.0%
	Total		Count	15	17	32
			Expected Count	15.0	17.0	32.0
			% within Anemia	46.9%	53.1%	100.0%
			% of Total	46.9%	53.1%	100.0%
Total	Anemia	Anemia	Count	15	1	16
			Expected Count	8.0	8.0	16.0
			% within Anemia	93.8%	6.3%	100.0%
			% of Total	24.2%	1.6%	25.8%
		Tidak anemia	Count	16	30	46
			Expected Count	23.0	23.0	46.0
			% within Anemia	34.8%	65.2%	100.0%
			% of Total	25.8%	48.4%	74.2%
	Total		Count	31	31	62
			Expected Count	31.0	31.0	62.0
			% within Anemia	50.0%	50.0%	100.0%
			% of Total	50.0%	50.0%	100.0%

Risk Estimate

Pendidikan		Value	95% Confidence Interval	
			Lower	Upper
SD	Odds Ratio for Anemia (Anemia / Tidak anemia)	[a]		
SMP	For cohort Stunting = stunting	2.375	1.402	4.024
	N of Valid Cases	25		

SMA	Odds Ratio for Anemia (Anemia / Tidak anemia)	14.000	1.460	134.250
	For cohort Stunting = stunting	2.625	1.407	4.897
	For cohort Stunting = Tidak stunting	.188	.029	1.199
	N of Valid Cases	32		
Total	Odds Ratio for Anemia (Anemia / Tidak anemia)	28.125	3.399	232.730
	For cohort Stunting = stunting	2.695	1.779	4.083
	For cohort Stunting = Tidak stunting	.096	.014	.647
	N of Valid Cases	62		

a. Risk Estimate statistics cannot be computed. They are only computed for a 2*2 table without empty cells.

Tests of Homogeneity of the Odds Ratio

	Chi-Squared	df	Asymptotic Significance (2-sided)
Breslow-Day	1.613	2	.446
Tarone's	1.572	2	.456

Tests of Conditional Independence

	Chi-Squared	df	Asymptotic Significance (2-sided)
Cochran's	17.300	1	.000
Mantel-Haenszel	14.133	1	.000

Under the conditional independence assumption, Cochran's statistic is asymptotically distributed as a 1 df chi-squared distribution, only if the number of strata is fixed, while the Mantel-Haenszel statistic is always asymptotically distributed as a 1 df chi-squared distribution. Note that the continuity correction is removed from the Mantel-Haenszel statistic when the sum of the differences between the observed and the expected is 0.

Mantel-Haenszel Common Odds Ratio Estimate

Estimate			**29.360**
ln(Estimate)			3.380
Standardized Error of ln(Estimate)			1.078
Asymptotic Significance (2-sided)			.002
Asymptotic 95% Confidence Interval	Common Odds Ratio	Lower Bound	**3.553**
		Upper Bound	**242.622**
	ln(Common Odds Ratio)	Lower Bound	1.268
		Upper Bound	5.492

The Mantel-Haenszel common odds ratio estimate is asymptotically normally distributed under the common odds ratio of 1,000 assumption. So is the natural log of the estimate.

3. Anemia dengan Stunting berdasarkan Umur Ibu

Anemia * Stunting * Umur Ibu Crosstabulation

Umur Ibu				Stunting		Total
				stunting	Tidak stunting	
Berisiko	Anemia	Anemia	Count	4	0	4
			Expected Count	2.5	1.5	4.0
			% within Anemia	100.0%	0.0%	100.0%
			% of Total	30.8%	0.0%	30.8%
		Tidak anemia	Count	4	5	9
			Expected Count	5.5	3.5	9.0
			% within Anemia	44.4%	55.6%	100.0%
			% of Total	30.8%	38.5%	69.2%
	Total		Count	8	5	13
			Expected Count	8.0	5.0	13.0
			% within Anemia	61.5%	38.5%	100.0%
			% of Total	61.5%	38.5%	100.0%
Tidak berisiko	Anemia	Anemia	Count	11	1	12
			Expected Count	5.6	6.4	12.0
			% within Anemia	91.7%	8.3%	100.0%
			% of Total	22.4%	2.0%	24.5%
		Tidak anemia	Count	12	25	37

			Expected Count	17.4	19.6	37.0
			% within Anemia	32.4%	67.6%	100.0%
			% of Total	24.5%	51.0%	75.5%
	Total		Count	23	26	49
			Expected Count	23.0	26.0	49.0
			% within Anemia	46.9%	53.1%	100.0%
			% of Total	46.9%	53.1%	100.0%
Total	Anemia	Anemia	Count	15	1	16
			Expected Count	8.0	8.0	16.0
			% within Anemia	93.8%	6.3%	100.0%
			% of Total	24.2%	1.6%	25.8%
		Tidak anemia	Count	16	30	46
			Expected Count	23.0	23.0	46.0
			% within Anemia	34.8%	65.2%	100.0%
			% of Total	25.8%	48.4%	74.2%
	Total		Count	31	31	62
			Expected Count	31.0	31.0	62.0
			% within Anemia	50.0%	50.0%	100.0%
			% of Total	50.0%	50.0%	100.0%

Risk Estimate

Umur Ibu		Value	95% Confidence Interval	
			Lower	Upper
Berisiko	For cohort Stunting = stunting	2.250	1.084	4.671
	N of Valid Cases	13		
Tidak berisiko	Odds Ratio for Anemia (Anemia / Tidak anemia)	22.917	2.644	198.661
	For cohort Stunting = stunting	2.826	1.722	4.638
	For cohort Stunting = Tidak stunting	.123	.019	.816
	N of Valid Cases	49		
Total	Odds Ratio for Anemia (Anemia / Tidak anemia)	28.125	3.399	232.730

	For cohort Stunting = stunting	2.695	1.779	4.083
	For cohort Stunting = Tidak stunting	.096	.014	.647
	N of Valid Cases	62		

Tests of Homogeneity of the Odds Ratio

	Chi-Squared	df	Asymptotic Significance (2-sided)
Breslow-Day	.219	1	.640
Tarone's	.218	1	.641

Tests of Conditional Independence

	Chi-Squared	df	Asymptotic Significance (2-sided)
Cochran's	16.376	1	.000
Mantel-Haenszel	13.615	1	.000

Under the conditional independence assumption, Cochran's statistic is asymptotically distributed as a 1 df chi-squared distribution, only if the number of strata is fixed, while the Mantel-Haenszel statistic is always asymptotically distributed as a 1 df chi-squared distribution. Note that the continuity correction is removed from the Mantel-Haenszel statistic when the sum of the differences between the observed and the expected is 0.

Mantel-Haenszel Common Odds Ratio Estimate

Estimate	**29.199**
ln(Estimate)	3.374
Standardized Error of ln(Estimate)	1.097
Asymptotic Significance (2-sided)	.002

Asymptotic 95% Confidence Interval	Common Odds Ratio	Lower Bound	**3.399**
		Upper Bound	**250.833**
	ln(Common Odds Ratio)	Lower Bound	1.223
		Upper Bound	5.525

The Mantel-Haenszel common odds ratio estimate is asymptotically normally distributed under the common odds ratio of 1,000 assumption. So is the natural log of the estimate.

4. Anemia dengan Stunting berdasarkan Pendidikan

Anemia * Stunting * Tinggi Badan Crosstabulation

Tinggi Badan				Stunting		Total
				stunting	Tidak stunting	
Berisiko	Anemia	Tidak anemia	Count	1	1	2
			Expected Count	1.0	1.0	2.0
			% within Anemia	50.0%	50.0%	100.0%
			% of Total	50.0%	50.0%	100.0%
	Total		Count	1	1	2
			Expected Count	1.0	1.0	2.0
			% within Anemia	50.0%	50.0%	100.0%
			% of Total	50.0%	50.0%	100.0%
Tidak berisiko	Anemia	Anemia	Count	15	1	16
			Expected Count	8.0	8.0	16.0
			% within Anemia	93.8%	6.3%	100.0%
			% of Total	25.0%	1.7%	26.7%
		Tidak anemia	Count	15	29	44
			Expected Count	22.0	22.0	44.0
			% within Anemia	34.1%	65.9%	100.0%
			% of Total	25.0%	48.3%	73.3%
	Total		Count	30	30	60
			Expected Count	30.0	30.0	60.0
			% within Anemia	50.0%	50.0%	100.0%
			% of Total	50.0%	50.0%	100.0%
Total	Anemia	Anemia	Count	15	1	16
			Expected Count	8.0	8.0	16.0
			% within Anemia	93.8%	6.3%	100.0%
			% of Total	24.2%	1.6%	25.8%
		Tidak anemia	Count	16	30	46

		Expected Count	23.0	23.0	46.0
		% within Anemia	34.8%	65.2%	100.0%
		% of Total	25.8%	48.4%	74.2%
	Total	Count	31	31	62
		Expected Count	31.0	31.0	62.0
		% within Anemia	50.0%	50.0%	100.0%
		% of Total	50.0%	50.0%	100.0%

Risk Estimate

			95% Confidence Interval	
Tinggi Badan		Value	Lower	Upper
Berisiko	Odds Ratio for Anemia (Tidak anemia / .)	.[a]		
Tidak berisiko	Odds Ratio for Anemia (Anemia / Tidak anemia)	29.000	3.488	241.131
	For cohort Stunting = stunting	2.750	1.789	4.227
	For cohort Stunting = Tidak stunting	.095	.014	.640
	N of Valid Cases	60		
Total	Odds Ratio for Anemia (Anemia / Tidak anemia)	28.125	3.399	232.730
	For cohort Stunting = stunting	2.695	1.779	4.083
	For cohort Stunting = Tidak stunting	.096	.014	.647
	N of Valid Cases	62		

a. No statistics are computed because Anemia is a constant.

Tests of Homogeneity of the Odds Ratio

	Chi-Squared	df	Asymptotic Significance (2-sided)
Breslow-Day	.000	0	.
Tarone's	.000	0	.

Tests of Conditional Independence

	Chi-Squared	df	Asymptotic Significance (2-sided)
Cochran's	16.705	1	.000
Mantel-Haenszel	14.163	1	.000

Under the conditional independence assumption, Cochran's statistic is asymptotically distributed as a 1 df chi-squared distribution, only if the number of strata is fixed, while the Mantel-Haenszel statistic is always asymptotically distributed as a 1 df chi-squared distribution. Note that the continuity correction is removed from the Mantel-Haenszel statistic when the sum of the differences between the observed and the expected is 0.

Mantel-Haenszel Common Odds Ratio Estimate

Estimate			**29.000**
ln(Estimate)			3.367
Standardized Error of ln(Estimate)			1.081
Asymptotic Significance (2-sided)			.002
Asymptotic 95% Confidence Interval	Common Odds Ratio	Lower Bound	**3.488**
		Upper Bound	**241.131**
	ln(Common Odds Ratio)	Lower Bound	1.249
		Upper Bound	5.485

The Mantel-Haenszel common odds ratio estimate is asymptotically normally distributed under the common odds ratio of 1,000 assumption. So is the natural log of the estimate.

5. Anemia dengan Stunting berdasarkan Pendidikan

Anemia * Stunting * Pekerjaan Crosstabulation

Pekerjaan				Stunting		Total
				stunting	Tidak stunting	
Bekerja formal	Anemia	Anemia	Count	5	0	5
			Expected Count	2.8	2.2	5.0
			% within Anemia	100.0%	0.0%	100.0%
			% of Total	55.6%	0.0%	55.6%
		Tidak anemia	Count	0	4	4

			Expected Count	2.2	1.8	4.0
			% within Anemia	0.0%	100.0%	100.0%
			% of Total	0.0%	44.4%	44.4%
	Total		Count	5	4	9
			Expected Count	5.0	4.0	9.0
			% within Anemia	55.6%	44.4%	100.0%
			% of Total	55.6%	44.4%	100.0%
Bekerja non formal	Anemia	Anemia	Count	10	1	11
			Expected Count	5.4	5.6	11.0
			% within Anemia	90.9%	9.1%	100.0%
			% of Total	18.9%	1.9%	20.8%
		Tidak anemia	Count	16	26	42
			Expected Count	20.6	21.4	42.0
			% within Anemia	38.1%	61.9%	100.0%
			% of Total	30.2%	49.1%	79.2%
	Total		Count	26	27	53
			Expected Count	26.0	27.0	53.0
			% within Anemia	49.1%	50.9%	100.0%
			% of Total	49.1%	50.9%	100.0%
Total	Anemia	Anemia	Count	15	1	16
			Expected Count	8.0	8.0	16.0
			% within Anemia	93.8%	6.3%	100.0%
			% of Total	24.2%	1.6%	25.8%
		Tidak anemia	Count	16	30	46
			Expected Count	23.0	23.0	46.0
			% within Anemia	34.8%	65.2%	100.0%
			% of Total	25.8%	48.4%	74.2%
	Total		Count	31	31	62
			Expected Count	31.0	31.0	62.0
			% within Anemia	50.0%	50.0%	100.0%
			% of Total	50.0%	50.0%	100.0%

Risk Estimate

			95% Confidence Interval	
Pekerjaan		Value	Lower	Upper
Bekerja formal	Odds Ratio for Anemia (Anemia / Tidak anemia)	[a]		

Bekerja non formal	Odds Ratio for Anemia (Anemia / Tidak anemia)	16.250	1.897	139.210
	For cohort Stunting = stunting	2.386	1.555	3.663
	For cohort Stunting = Tidak stunting	.147	.022	.966
	N of Valid Cases	53		
Total	Odds Ratio for Anemia (Anemia / Tidak anemia)	28.125	3.399	232.730
	For cohort Stunting = stunting	2.695	1.779	4.083
	For cohort Stunting = Tidak stunting	.096	.014	.647
	N of Valid Cases	62		

a. Risk Estimate statistics cannot be computed. They are only computed for a 2*2 table without empty cells.

Tests of Homogeneity of the Odds Ratio

	Chi-Squared	df	Asymptotic Significance (2-sided)
Breslow-Day	1.959	1	.162
Tarone's	1.707	1	.191

Tests of Conditional Independence

	Chi-Squared	df	Asymptotic Significance (2-sided)
Cochran's	17.085	1	.000
Mantel-Haenszel	14.103	1	.000

Under the conditional independence assumption, Cochran's statistic is asymptotically distributed as a 1 df chi-squared distribution, only if the number of strata is fixed, while the Mantel-Haenszel statistic is always asymptotically distributed as a 1 df chi-squared distribution. Note that the continuity correction is removed from the Mantel-Haenszel statistic when the sum of the differences between the observed and the expected is 0.

Mantel-Haenszel Common Odds Ratio Estimate

Estimate	**23.611**
ln(Estimate)	3.162

Standardized Error of ln(Estimate)			1.000
Asymptotic Significance (2-sided)			.002
Asymptotic 95% Confidence Interval	Common Odds Ratio	Lower Bound	**3.329**
		Upper Bound	**167.483**
	ln(Common Odds Ratio)	Lower Bound	1.203
		Upper Bound	5.121

The Mantel-Haenszel common odds ratio estimate is asymptotically normally distributed under the common odds ratio of 1,000 assumption. So is the natural log of the estimate.

6. Anemia dengan Stunting berdasarkan Status Gizi

Anemia * Stunting * Status Gizi Crosstabulation

Status Gizi				Stunting		Total
				stunting	Tidak stunting	
KEK	Anemia	Anemia	Count	2	0	2
			Expected Count	1.3	.7	2.0
			% within Anemia	100.0%	0.0%	100.0%
			% of Total	66.7%	0.0%	66.7%
		Tidak anemia	Count	0	1	1
			Expected Count	.7	.3	1.0
			% within Anemia	0.0%	100.0%	100.0%
			% of Total	0.0%	33.3%	33.3%
	Total		Count	2	1	3
			Expected Count	2.0	1.0	3.0
			% within Anemia	66.7%	33.3%	100.0%
			% of Total	66.7%	33.3%	100.0%

Tidak KEK	Anemia	Anemia	Count	13	1	14
			Expected Count	6.9	7.1	14.0
			% within Anemia	92.9%	7.1%	100.0%
			% of Total	22.0%	1.7%	23.7%
		Tidak anemia	Count	16	29	45
			Expected Count	22.1	22.9	45.0
			% within Anemia	35.6%	64.4%	100.0%
			% of Total	27.1%	49.2%	76.3%
	Total		Count	29	30	59
			Expected Count	29.0	30.0	59.0
			% within Anemia	49.2%	50.8%	100.0%
			% of Total	49.2%	50.8%	100.0%
Total	Anemia	Anemia	Count	15	1	16
			Expected Count	8.0	8.0	16.0
			% within Anemia	93.8%	6.3%	100.0%
			% of Total	24.2%	1.6%	25.8%
		Tidak anemia	Count	16	30	46
			Expected Count	23.0	23.0	46.0
			% within Anemia	34.8%	65.2%	100.0%
			% of Total	25.8%	48.4%	74.2%
	Total		Count	31	31	62
			Expected Count	31.0	31.0	62.0
			% within Anemia	50.0%	50.0%	100.0%
			% of Total	50.0%	50.0%	100.0%

Risk Estimate

Status Gizi		Value	95% Confidence Interval	
			Lower	Upper
KEK	Odds Ratio for Anemia (Anemia / Tidak anemia)	[a]		
Tidak KEK	Odds Ratio for Anemia (Anemia / Tidak anemia)	23.563	2.818	197.003
	For cohort Stunting = stunting	2.612	1.717	3.972
	For cohort Stunting = Tidak stunting	.111	.017	.742
	N of Valid Cases	59		

Total	Odds Ratio for Anemia (Anemia / Tidak anemia)	28.125	3.399	232.730
	For cohort Stunting = stunting	2.695	1.779	4.083
	For cohort Stunting = Tidak stunting	.096	.014	.647
	N of Valid Cases	62		

a. Risk Estimate statistics cannot be computed. They are only computed for a 2*2 table without empty cells.

Tests of Homogeneity of the Odds Ratio

	Chi-Squared	df	Asymptotic Significance (2-sided)
Breslow-Day	.564	1	.453
Tarone's	.540	1	.463

Tests of Conditional Independence

	Chi-Squared	df	Asymptotic Significance (2-sided)
Cochran's	16.345	1	.000
Mantel-Haenszel	13.451	1	.000

Under the conditional independence assumption, Cochran's statistic is asymptotically distributed as a 1 df chi-squared distribution, only if the number of strata is fixed, while the Mantel-Haenszel statistic is always asymptotically distributed as a 1 df chi-squared distribution. Note that the continuity correction is removed from the Mantel-Haenszel statistic when the sum of the differences between the observed and the expected is 0.

Mantel-Haenszel Common Odds Ratio Estimate

Estimate			**26.021**
ln(Estimate)			3.259
Standardized Error of ln(Estimate)			1.056
Asymptotic Significance (2-sided)			.002
Asymptotic 95% Confidence	Common Odds Ratio	Lower Bound	**3.284**

Interval		Upper Bound	**206.150**
	ln(Common Odds Ratio)	Lower Bound	1.189
		Upper Bound	5.329

The Mantel-Haenszel common odds ratio estimate is asymptotically normally distributed under the common odds ratio of 1,000 assumption. So is the natural log of the estimate.

Lampiran 4. Surat Keterangan Selesai Penelitian

PEMERINTAH KABUPATEN GUNUNGKIDUL
DINAS KESEHATAN
UPT PUSKESMAS PONJONG II
Bedoyo Kulon, Bedoyo, Ponjong, Gunungkidul 55892
Telepon/WA : 08112951922, Email : puskesmasponjongii@gmail.com,
Laman : http://ponjong2.puskesmas.gunungkidulkab.go.id

SURAT KETERANGAN SELESAI PENELITIAN
NO. 812 / 020 / 2023

Yang bertanda tangan di bawah ini :

Nama	: Dheny Cahyo Saputro, S.Farm, Apt.
NIP	: 19910627 201502 1 001
Jabatan	: Kepala Tata Usaha
Unit Kerja	: UPT Puskesmas Ponjong II

Dengan ini menerangkan bahwa mahasiswa berikut :

Nama	: Vina Dewantari
NIM	: P07124322137
Jurusan	: DIV Kebidanan
Asal Perguruan Tinggi	: Poltekkes Kemenkes Yogyakarta

Telah selesai melakukan penelitian di Puskesmas Ponjong II selama 6 hari terhitung mulai tanggal 13 Februari sampai dengan 18 Februari 2023 untuk memperoleh data penyusunan skripsi dengan judul "PENGARUH RIWAYAT ANEMIA PADA IBU HAMIL TERHADAP KEJADIAN STUNTING BAYI BARU LAHIR DI WILAYAH KERJA PUSKESMAS PONJONG II GUNUNGKIDUL."

Demikian surat keterangan ini dibuat dan diberikan kepada yang bersangkutan untuk dapat dipergunakan sebagaimana mestinya.

Ponjong, 20 Februari 2023
Kepala Tata Usaha,

PEMERINTAH KABUPATEN GUNUNGKIDUL * UPT. PUSKESMAS PONJONG II * DINAS KESEHATAN

Dheny Cahyo Saputro, S.Farm, Apt.
NIP. 19910627 201502 1 001