



Breastfeeding as Worship: “An Islamic Perspective on Stunting Prevention” a case study conducted in Southeast Sulawesi

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Abstract. *This study aims to analyze the relevance of the Qur'anic injunction on two-year breastfeeding to stunting prevention and its contribution to public health strategies in Southeast Sulawesi through a tafsir maudhū'i approach and empirical survey. The research employed a mixed-methods design, combining thematic exegesis of Qur'anic verses on breastfeeding with field surveys conducted in Katobu and Palangga districts. Data were collected from 100 respondents, supplemented by interviews and focus group discussions (FGDs), and analyzed using thematic analysis and Pearson correlation in SPSS to examine the relationship between two-year breastfeeding practices and stunting prevalence. Findings reveal that Katobu, which implemented nutrition counseling grounded in Islamic values, achieved a more significant reduction in stunting rates compared to Palangga. Cross-sectoral collaboration among health workers, religious leaders, and community health cadres enhanced maternal adherence to medical recommendations and fostered awareness of breastfeeding as a religiously meritorious act. This approach proved effective in overcoming socio-cultural and economic barriers while strengthening mothers' motivation to practice sustained breastfeeding. The study proposes an integrative educational model based on three pillars – medical counseling, spiritual education, and community mentoring – that can be replicated in other regions as a framework for stunting prevention. Moreover, these findings carry broader implications for maternal and child health and contribute to achieving the Sustainable Development Goals (SDGs), particularly SDG 2 (Zero Hunger), SDG 3 (Good Health and Well-being), SDG 4 (Quality Education), and SDG 17 (Partnerships for the Goals).*

Keywords: *Two-year breastfeeding, stunting prevention, Qur'anic perspective, islamic nutrition, SDGs*

1. Introduction

Stunting is one of the major global health problems that has received serious attention from various international organizations, including WHO and UNICEF. In Indonesia, stunting has become a challenge in human resource development due to its long-term impact on brain development, intelligence, productivity, and the overall quality of life of children in the future (World Health Organization, 2021). Data from the 2022 Indonesian Nutrition Status Survey (SSGI) show that the national prevalence of stunting reached 21.6%, while the government has targeted a reduction to 14% by 2024 (Kementerian Kesehatan RI, 2022).

Stunting is generally caused by inadequate nutritional intake, particularly during the first 1,000 days of life, which includes the period from pregnancy until the child reaches two years of age. One of the most important nutritional interventions during this critical period is exclusive breastfeeding, followed by continued breastfeeding up to two years of age

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(UNICEF, 2020). WHO and the Indonesian Ministry of Health recommend exclusive breastfeeding for the first six months, continued with complementary feeding until two years of age or beyond (Kemenkes RI, 2020).

Evidence demonstrates that the practice of exclusive breastfeeding and continued breastfeeding up to two full years plays a significant role in preventing stunting, both through the fulfillment of optimal nutritional needs and protection against infectious diseases (Victora et al., 2016; WHO, 2021).

Within the context of Islamic teachings, breastfeeding for two years is not only recommended but also explicitly mentioned in the Qur'an. This study seeks to explore the correlation between the Qur'anic recommendation of two years of breastfeeding and empirical data on stunting prevention. In other words, the Qur'an does not merely contain moral and spiritual values but can also serve as a source of inspiration in addressing contemporary challenges faced by the Muslim community, including public health issues. Therefore, the integration of religious knowledge and health science becomes a necessity in responding to the challenges of holistic human development (Nasution, H., 1995).

The objective of this study is to analyze the relevance of the Qur'anic recommendation of two years of breastfeeding in relation to stunting prevention based on empirical evidence, as well as to identify the contribution of the Islamic perspective to public health strategies in Southeast Sulawesi. The study employs a theological approach through *tafsir maudhu'i* of the relevant Qur'anic verses, combined with an empirical approach based on field surveys to assess the impact of two-year breastfeeding practices on stunting prevention.

This integration contributes not only to the literature on Islamic studies and public health but also has direct relevance to the Sustainable Development Goals (SDGs), particularly SDG 2 (Zero Hunger) and SDG 3 (Good Health and Well-being), which aim to reduce stunting prevalence and improve maternal and child health (United Nations, 2015). Furthermore, this study supports SDG 4 (Quality Education) through the enhancement of health literacy grounded in religious values, as well as SDG 17 (Partnerships for the Goals) by combining theological and empirical approaches within the framework of health policy. Thus, this research offers an intervention model that is not only aligned with local contexts and Islamic values but also relevant to the global sustainable development agenda.

2. Literature Review

The Qur'an explicitly directs Muslims to breastfeed their children for a full two years as part of parental responsibility for a child's growth and development. Surah Al-Baqarah verse 233 states, "*Mothers shall breastfeed their children for two full years, for those who wish to complete the period of nursing*", while Surah Luqman verse 14 emphasizes, "*His mother carried him in weakness upon weakness, and his weaning is in two years*" (Ministry of Religious Affairs of the Republic of Indonesia, 2005). These verses not only convey normative commands but also embody theological meanings concerning the importance of compassion, maternal commitment, and health values in Islam (Quraish Shihab, 2007).

A thematic exegesis (*tafsir maudhu'i*) views the Qur'anic verses on breastfeeding as part of the Islamic value system in building healthy families and strong generations. The practice of two years of breastfeeding can be understood as a form of *syar'i* endeavor in supporting holistic child development—not only physical but also spiritual (Nasaruddin Umar, 2015). In other words, breastfeeding is not merely a biological act but also an act of worship and a moral

responsibility aligned with the *maqāṣid al-sharī'ah*, particularly in the preservation of progeny (*hifz al-nasl*) (Kamali, 2008).

From a medical perspective, exclusive breastfeeding during the first six months of life, continued up to two years, has been proven to provide optimal nutritional protection. Breast milk contains antibodies, enzymes, growth hormones, and complete nutrients that support brain development and strengthen the child's immune system (Victora et al., 2016). Research has shown that children who are breastfed up to two years have a lower risk of stunting compared to those who do not receive optimal breastfeeding (WHO, 2021; Black et al., 2013).

The integration of religious values and health in the context of Muslim communities has proven to be a strategic approach in health promotion. Various studies indicate that religion-based approaches are more socially accepted and can enhance the effectiveness of health interventions, including breastfeeding education and stunting prevention (Yusuf et al., 2020; Dewi & Hasan, 2022).

However, most research remains limited to aspects of socialization or education without empirically examining the impact of the religion-health integration model on reducing stunting prevalence. Moreover, there is a literature gap regarding the mechanisms of internalizing religious values into maternal health behaviors, as well as a lack of interdisciplinary studies linking Qur'anic exegesis with evidence-based nutrition data. Some studies have also reported inconsistent findings concerning the optimal duration of breastfeeding across different cultural contexts, indicating the need for more contextual and participatory approaches in its implementation.

This study seeks to fill these gaps by positioning the concept of two-year breastfeeding as an integrative model between Qur'anic exegesis and empirical approaches, thereby contributing to the development of more effective and locally relevant stunting prevention strategies.

3. Methods

This study employs a mixed-methods approach, integrating both qualitative and quantitative methods. The qualitative approach is applied to conduct a theological study through the *tafsīr maudhū'ī* (thematic exegesis) method of Qur'anic verses related to breastfeeding and child care. The quantitative approach is implemented through field surveys to measure the relationship between the practice of two-year breastfeeding and the incidence of stunting. The research was conducted in two sub-districts in Southeast Sulawesi – Palangga Sub-district (South Konawe Regency) and Katobu Sub-district (Muna Regency) – which have different characteristics in terms of stunting prevalence.

Participants were selected based on the following criteria: (1) Muslim mothers with children aged 2–5 years residing in the research locations, (2) health workers involved in nutrition or maternal and child health programs, (3) religious counselors, and (4) local religious leaders. The total number of participants consisted of 100 respondents for the quantitative survey, in addition to 15 participants for in-depth interviews and two groups for focus group discussions (FGDs). Data collection instruments included interview guidelines, observation sheets, structured questionnaires for the survey, and FGD guides. The techniques employed were literature review, questionnaire distribution, in-depth interviews, FGDs, and participatory observation. Qualitative data were analyzed thematically using open, axial, and selective coding techniques, while quantitative data were analyzed using descriptive statistics and Pearson correlation tests with the aid of SPSS software. Data validity was strengthened

through methodological triangulation, pilot testing of instruments prior to the main data collection, member checking of interview results, and expert validation of both the questionnaire and interview guidelines.

4. Results and Discussion

4.1. Research Location Overview

This research was conducted in two regions of Southeast Sulawesi Province, namely Palangga Sub-district in South Konawe Regency and Katobu Sub-district in Muna Regency. The selection of these two locations was based on a purposive sampling approach, taking into account the diversity of geographical contexts, social conditions, and nutritional intervention policies implemented by the local government. These differing characteristics were expected to provide a more comprehensive and representative picture of the contribution of two-year breastfeeding practices to stunting prevention, both from theological and empirical perspectives.

Palangga Sub-district was selected because it is categorized as an area with a relatively high prevalence of stunting, according to data from the South Konawe District Health Office. Factors such as limited access to information, low maternal education levels, and the suboptimal implementation of breastfeeding education programs contribute to the high stunting rates in this area. Therefore, Palangga represents communities that still require increased awareness and education on the importance of optimal breastfeeding during the first two years of a child's life.

Meanwhile, Katobu Sub-district in Muna Regency was chosen because it is one of the areas actively implementing nutritional intervention programs, including exclusive breastfeeding campaigns and community-based maternal and child health training. Data from the local Public Health Center (*Puskesmas*) indicate a declining trend in stunting prevalence over recent years, which is strongly associated with the success of these educational programs. The comparison between the two regions aims to identify the role and impact of two-year breastfeeding practices in preventing stunting, as well as to explore religious values that can strengthen nutrition intervention strategies rooted in local culture and spirituality.

In terms of respondents, each region contributed 50 participants. The demographic profile shows that the majority of mothers were aged between 25–35 years, with education levels dominated by junior high school (SMP) and senior high school (SMA) graduates. Nearly 70% of the respondents were housewives, while the rest worked as honorary teachers, traders, and daily laborers.

Although most respondents had participated in child health and nutrition counseling activities at *Posyandu* (integrated health posts) or *Puskesmas* (public health centers), only about 28% reported ever receiving explicit explanations about the importance of two-year breastfeeding from the perspective of Islamic teachings. This indicates a gap in understanding between the medical and spiritual approaches in the health education provided at the community level. Generally, respondents were more familiar with the medical rationale for breastfeeding (such as its benefits for immunity) but less aware that two-year breastfeeding is also a command mentioned in the Qur'an.

4.2. Theological Study Results

4.2.1 Analysis of Qur'anic Verses

A study of Surah Al-Baqarah verse 233 and Surah Luqman verse 14 indicates that the Qur'an explicitly provides guidance regarding the duration of breastfeeding, which is set at two full years. In Surah Al-Baqarah 2:233, it is stated:

وَالْوَالِدَتُ يُرْضِعْنَ أَوْلَادَهُنَّ حَوْلَيْنِ كَامِلَيْنِ لِمَنْ أَرَادَ أَنْ يُتِمَّ الرَّضَاعَةَ وَعَلَى الْمَوْلُودِ لَهُ رِزْقُهُنَّ وَكِسْوَتُهُنَّ بِالْمَعْرُوفِ لَا تُكَلَّفُ نَفْسٌ إِلَّا وُسْعَهَا لَا تُضَارَّ وَالِدَةٌ بِوَلَدِهَا وَلَا مَوْلُودٌ لَهُ بِوَلَدِهِ وَعَلَى الْوَارِثِ مِثْلُ ذَلِكَ فَإِنْ أَرَادَا فِصَالًا عَنْ تَرَاضٍ مِنْهُمَا وَتَشَاوُرٍ فَلَا جُنَاحَ عَلَيْهِمَا وَإِنْ أَرَدْتُمْ أَنْ تَسْتَرْضِعُوهُمَا أُولَادُكُمْ فَلَا جُنَاحَ عَلَيْكُمْ إِذَا سَلَّمْتُمْ مَا آتَيْتُمْ بِالْمَعْرُوفِ وَاتَّقُوا اللَّهَ وَاعْلَمُوا أَنَّ اللَّهَ بِمَا تَعْمَلُونَ بَصِيرٌ ﴿٢٣٣﴾

Means: "Mothers shall breastfeed their children for two complete years, for those who wish to complete the term of nursing. The father is responsible for their provision and clothing in a reasonable manner. No soul shall be burdened beyond its capacity. Neither mother should be harmed because of her child, nor father because of his child. The same is incumbent on the heir. But if both (parents) desire weaning, through mutual consent and consultation, there is no blame on them. And if you wish to have your children nursed (by a wet nurse), there is no blame on you, provided you pay (the wet nurse) fairly. Fear Allah and know that Allah is Seeing of what you do."

This verse contains a normative indication of breastfeeding as part of complete maternal responsibility, as well as a form of protection for the child's health and growth. Exegetical interpretations emphasize that the two-year period represents the most critical phase in establishing the foundations of a child's health and brain development. It is further explained that the recommendation of two years of breastfeeding is not merely a medical directive, but also a reflection of the Qur'an's concern for the child's comprehensive biological and psychological well-being (Quraish Shihab, 2002). Meanwhile, Al-Maraghi, in his exegesis, elaborates that breastfeeding for two years embodies submission to God's command while also encompassing values of compassion, responsibility, and emotional closeness between mother and child (Al-Maraghi, A.M., 2001).

These findings are reinforced by the study of Khasanah et al. (2020), which demonstrated that mothers who breastfed for two years were more successful in maintaining their child's ideal body weight compared to those who stopped earlier, while also fostering stronger emotional bonds. Rahmawati (2021) also confirmed that breastfeeding practices in accordance with Qur'anic guidance had a significant impact on stunting prevention in rural areas where maternal knowledge levels were relatively high. Similarly, Fitriani et al. (2022) revealed that an understanding of the religious values underlying breastfeeding practices was a major driving factor for the success of exclusive breastfeeding up to two years, despite challenges related to employment and social pressures.

On the other hand, Surah Luqman (31:14) stated:

وَوَصَّيْنَا الْإِنْسَانَ بِوَالِدَيْهِ حَمَلَتْهُ أُمُّهُ وَهْنًا عَلَى وَهْنٍ وَفِصَالُهُ فِي عَامَيْنِ أَنْ اشْكُرْ لِي وَلِوَالِدَيْكَ إِلَيَّ الْمَصِيرُ ﴿١٤﴾

Means: "And We have enjoined upon man [care] for his parents. His mother carried him, [increasing her] in weakness upon weakness, and his weaning is in two years. Be grateful to Me and to your parents. To Me is the [final] destination."

Likewise, Surah Luqman 31:14 underscores divine acknowledgment of the great burden and sacrifice of a mother, while providing moral legitimacy to the duration of breastfeeding. Collectively, these verses illustrate that the Qur'an does not separate the biological and spiritual dimensions of child-rearing, but rather views them as an integrated whole in shaping a healthy and faithful generation.

This perspective aligns with the research of Sari & Handayani (2023), who found that family support and maternal religiosity made a significant contribution to adherence to the recommended duration of breastfeeding. Another study by Abdullah (2021) emphasized that reinforcing religious messages through women's study groups (*pengajian ibu-ibu*) effectively increased the percentage of mothers practicing two-year breastfeeding in urban areas, highlighting the effective role of Islamic-based health-oriented *da'wah*.

4.2.2 The Spiritual Dimension of Breastfeeding

In Islam, breastfeeding is not merely understood as a biological act but also as a form of worship that carries profound spiritual value. Al-Ghazali, in *Ihya' 'Ulum al-Din*, mentions that breastfeeding constitutes an act of devotion when it is intended to seek the pleasure of Allah and fulfill the maternal trust with sincerity (Al-Ghazali, 1998). This process can serve as a means of drawing closer to Allah, particularly when mothers face challenges such as fatigue, difficulties in milk production, or social pressures that hinder the practice of breastfeeding for the full two years.

This spiritual dimension is crucial in building internal motivation for mothers to continue breastfeeding despite external obstacles. By perceiving breastfeeding as an act of worship, a mother not only gains divine reward for her sacrifices but also strengthens her moral and emotional commitment to her child. Indeed, some exegetes and jurists argue that breastfeeding is not merely recommended but, under certain circumstances, may become a *shar'ī* obligation when it concerns the survival and health of the child (Yusuf al-Qaradawi, 1997).

Furthermore, the spirituality of breastfeeding fosters the values of *rahmah* (compassion) and *ihsan* (benevolence), which are central to Islamic teachings. The compassion cultivated through breastfeeding interaction strengthens the mother-child bond, which has significant psychological effects on the child's social and emotional development. This bond also contributes to shaping a stable personality and a heightened sense of empathy in adulthood.

Thus, breastfeeding is not only viewed as a health strategy for preventing stunting but also as a spiritual pathway that enriches the maternal role from an Islamic perspective. The integration of scientific and theological approaches demonstrates that two-year breastfeeding constitutes a righteous act (*'amal ṣāliḥ*) that brings benefit (*maṣlaḥah*) both in this world and the hereafter.

4.3. Empirical Results

4.3.1 Breastfeeding Practices

The survey reveals a significant difference in breastfeeding practices between the two sub-districts. In Katobu, 57% of mothers breastfed their children for the full two years, whereas in Palangga only 34% did so. This disparity appears to be closely related to the intensity and continuity of counseling programs conducted by the local Community Health Center (*Puskesmas*) and the Office of Religious Affairs (*Kantor Urusan Agama*, KUA).

In Katobu, there is a regular collaboration between religious counselors and health workers who actively disseminate information on the nutritional value of breast milk and the practice of breastfeeding from both health and religious perspectives. In contrast, in Palangga, counseling activities are more sporadic and lack thematic coordination. Mothers who receive comprehensive information from both domains tend to be more confident and motivated to practice two-year breastfeeding. This finding is consistent with previous research indicating that the integration of medical and religious counseling can strengthen community motivation toward healthy behaviors (Hasnida, A., et al., 2019).

4.3.2 Correlation Between Breastfeeding and Stunting

To examine the relationship between breastfeeding duration and children's nutritional status, a quantitative analysis was conducted using the chi-square (χ^2) test. The results indicated a statistically significant association between breastfeeding for two full years and child nutritional status, with a p-value < 0.05. Children who received exclusive breastfeeding and continued breastfeeding up to two years had a lower risk of stunting compared to those who were weaned before reaching two years of age.

The data showed that among children breastfed for two years, 82% were in the normal nutritional status category (weight-for-age and height-for-age according to WHO standards), while 18% were at risk of undernutrition. Conversely, among children who were not breastfed for two years, only 45% were classified as having normal nutritional status, while the remaining 55% were at risk of or already experiencing stunting.

These findings reinforce the results of previous studies such as Titaley et al. (2013), which confirmed that breastfeeding duration is significantly correlated with child growth, where breastfeeding for two years serves as a protective factor against stunting in toddlers. Similarly, UNICEF (2020) emphasized that breastfeeding for two years substantially contributes to meeting the energy and micronutrient requirements of children aged 6–24 months.

This study also makes a significant contribution to the achievement of the Sustainable Development Goals (SDGs). First, with respect to SDG 2: Zero Hunger, full breastfeeding for two years supports the reduction of child malnutrition by providing comprehensive nutrition, encompassing essential macronutrients and micronutrients for growth, while also enhancing children's immunity against infectious diseases (WHO, 2021; Black et al., 2013). This contributes to the prevention of malnutrition and wasting, which are key indicators of SDG 2. Within the Indonesian context, faith-based strategies can increase community acceptance of national nutrition programs, thereby accelerating progress toward stunting reduction targets.

Second, regarding SDG 3: Good Health and Well-being, optimal breastfeeding benefits both children and mothers. For children, breastfeeding provides protection against respiratory infections, diarrhea, and obesity in later life. For mothers, breastfeeding reduces the risk of breast and ovarian cancers and aids postpartum recovery (Victora et al., 2016). Thus, this intervention directly supports SDG 3 indicators, such as reducing infant mortality, improving maternal health, and enhancing healthy life expectancy.

Third, concerning SDG 4: Quality Education, this study integrates medical education with religious perspectives rooted in Qur'anic verses and exegesis. Such an approach strengthens community health literacy, particularly in areas with varying levels of formal education (Yusuf et al., 2020; Dewi & Hasan, 2022). Educational strategies that combine spiritual and scientific values enhance understanding, acceptance, and sustainability of

positive health behaviors, thereby indirectly supporting SDG 4 indicators on lifelong learning and access to relevant information for all segments of society.

Fourth, in relation to SDG 17: Partnerships for the Goals, breastfeeding programs as a strategy for stunting prevention require multi-stakeholder collaboration. This study highlights the role of health workers, religious leaders, and Posyandu cadres in providing integrated counseling. Such collaboration creates synergy between scientific knowledge, moral authority, and community outreach. This cross-sectoral approach aligns with SDG 17 targets, which emphasize strategic partnerships among stakeholders to strengthen capacity, resources, and coordination in addressing global challenges sustainably (United Nations, 2020).

In conclusion, breastfeeding for two years is not only normatively grounded in Islamic teachings but is also empirically proven to be a highly effective practice in reducing stunting prevalence. These findings underscore the urgency of strengthening integrated counseling that incorporates both medical and religious aspects, particularly for mothers in high-stunting areas. Community-based interventions involving health workers, religious leaders, and Posyandu cadres represent an effective strategy to expand the coverage of two-year breastfeeding as part of sustainable stunting prevention efforts.

4.4. Research Discussion

4.4.1 The Relevance of Islamic Theology in Nutritional Practices

This study affirms that Islamic teachings play a significant role in shaping public health practices, particularly in the domain of breastfeeding. In QS. Al-Baqarah: 233, it is stated that the complete period of breastfeeding is two full years. This provision is not merely biological but also demonstrates the concern of religion for child health from the earliest stages of life. By framing breastfeeding as both an act of worship and a religious command, its implementation relies not only on medical knowledge but also on dimensions of faith and obedience to Allah SWT (Quraish Shihab, 2002).

The religious approach applied in counseling within Katobu District provides evidence that the integration of spiritual values can enhance awareness and adherence to breastfeeding practices. As noted by Nasution (1995), a rational and transformative understanding of religion has the capacity to reach the deepest dimensions of society, making it more effective in changing behavior. This highlights the importance of interdisciplinary approaches that combine health and theology in efforts to prevent stunting.

These results are consistent with the findings of Yusuf et al. (2020), who demonstrated that health education grounded in religious values is more readily accepted in rural communities and can significantly increase compliance with exclusive breastfeeding recommendations. Similarly, the study by Dewi and Hasan (2022) confirmed that collaboration between healthcare providers and religious leaders can improve the effectiveness of stunting prevention campaigns by up to 35% compared to medical approaches alone. Furthermore, Victora et al. (2016) found that children who were breastfed for up to two years had a 50% lower risk of stunting than those who were weaned earlier, reinforcing empirical evidence that the Qur'anic recommendation aligns with modern scientific findings.

By integrating these three strands of evidence, it can be concluded that the implementation of Islamic teachings on two-year breastfeeding is not only spiritually relevant but also effective as a sustainable public health strategy. The synergy between theological and medical approaches can serve as a practical intervention model for achieving the Sustainable

Development Goals, particularly in preventing stunting and improving maternal and child health outcomes.

4.4.2 Socio-Cultural Implications

Findings from in-depth interviews reveal that socio-cultural factors play a significant role in the success of the two-year breastfeeding program. In Palangga District, the myth that breast milk becomes “spoiled” after the child reaches one year of age remains prevalent, leading some mothers to practice early weaning. This perception is further reinforced by socio-economic conditions that compel many mothers to work in the informal sector, resulting in a double workload that hinders the consistency of breastfeeding practices.

In this context, a theological approach has proven effective in shaping the perception that breastfeeding is not merely a biological responsibility but also an act of worship that carries spiritual merit. Strengthening religious values in health education—as implemented by the Office of Religious Affairs (KUA) in Katobu and local religious leaders—has successfully instilled a sense of spiritual responsibility among mothers. This aligns with the thought of Al-Ghazali in *Ihya' Ulumuddin*, which emphasizes that worship is not confined to formal rituals but encompasses all activities undertaken with the intention of pleasing Allah, including breastfeeding (Al-Ghazali, 2005).

These findings are consistent with the research of Rahman et al. (2021), which demonstrated that interventions rooted in local wisdom and religious values were able to reduce the incidence of early weaning in rural communities. Similarly, the study by Nurhayati and Firmansyah (2020) revealed that religious approaches can effectively challenge misconceptions surrounding breastfeeding practices, while simultaneously fostering social support from extended families and the wider community. Thus, educational strategies that integrate religious values with health messages have been shown to transcend cultural barriers that previously hindered breastfeeding practices, while also strengthening family resilience in sustaining child health over the long term.

4.4.3 Institutional Role

The synergy between religious and health institutions emerges as a key factor in the success of the two-year breastfeeding program. In Katobu, collaboration among community health centers (*Puskesmas*), the Office of Religious Affairs (KUA), and local *majelis taklim* has established a comprehensive support ecosystem. Cross-sectoral health education initiatives have proven more effective in reaching mothers from lower socio-economic backgrounds. This corresponds with the community-based approach promoted by the World Health Organization (WHO) in the field of public health, where the involvement of local actors is regarded as a vital component of behavioral change (WHO, 2021). Similarly, the study of Suryani and Putra (2021) demonstrated that the participation of religious institutions in maternal and child health programs could increase compliance with medical recommendations by up to 35%, particularly in rural areas.

In addition, the use of digital media—such as online sermons, educational videos, and social media platforms—by millennial preachers has provided a new avenue for reaching younger generations. This strategy is particularly important given that young mothers are vulnerable to misinformation circulating on social media. Research by Fitriani et al. (2022) found that health education delivered through social media, when combined with religious narratives, significantly enhanced understanding of exclusive breastfeeding compared to

conventional education. Therefore, training and capacity-building programs for *da'i* and religious counselors are essential so that they can communicate Qur'an-based health messages in a contextual and scientifically grounded manner.

4.4.4 Integrative Education Model

Based on field findings, the researcher proposes an integrative educational model grounded in Islamic values, structured around three main pillars. The first pillar is medical counseling delivered by healthcare professionals, aimed at explaining the biological and scientific aspects of two-year breastfeeding. The second pillar is spiritual education conducted by religious counselors, designed to strengthen mothers' religious motivation. The third pillar is community-based support provided by *posyandu* cadres or PKK activists, offering practical assistance at the household level.

This model embraces a holistic approach as suggested by UNICEF (2020), which emphasizes that nutritional interventions cannot succeed without social, cultural, and spiritual engagement. The study of Kurniawan and Handayani (2020) reinforces this perspective by showing that *posyandu* empowerment programs integrating both health and religious messages were able to reduce stunting prevalence by up to 12% within a year. Thus, education is no longer top-down but rather participatory and contextually grounded, aligned with the characteristics of local communities. The implementation of this model requires cross-sectoral training, the development of Islamic-based educational modules, and ongoing program monitoring.

4.4.5 Strengthening Islamic Nutrition Literacy

Islamic nutrition literacy has become an urgent necessity, particularly in areas with low levels of education and high religiosity. Thus far, most nutritional counseling has been primarily medical in nature and has not addressed value-based aspects. In fact, Muslim communities are generally more receptive to advice that is linked to religious teachings. This is consistent with the findings of Zulaikha et al. (2020), which demonstrate that the integration of religious values into nutrition education can increase maternal adherence to breastfeeding recommendations up to 82%, far higher than counseling that is purely medical. Therefore, the development of educational media such as pocketbooks, *dakwah* modules, sermon pamphlets, and short lectures on themes such as "Breastfeeding in the Perspective of Islam" or "Stunting from the Qur'anic Perspective" is essential.

This initiative bridges the gap between health sciences and religious understanding, in line with culturally based health communication approaches. In this context, religious leaders are not only transmitters of religious messages but also social change agents in the field of health. The study of Fitriani & Purnama (2021) reinforces this view, showing that collaboration between religious counselors and healthcare workers in rural areas significantly improved mothers' knowledge about exclusive breastfeeding and the recommended two-year duration. When nutritional messages are combined with Qur'anic and Prophetic traditions, a stronger internalization of values can occur at both family and community levels.

Furthermore, Hamzah (2022) emphasizes that faith-based nutrition literacy has long-term effects in preventing early weaning due to myths or economic pressures, as messages grounded in belief tend to persist longer in community memory. In addition, premarital education and counseling for prospective mothers at the Office of Religious Affairs (KUA) represent strategic avenues for introducing material on the importance of two-year

breastfeeding. In this way, prospective parents are equipped with sufficient knowledge even before childbirth. Such preventive approaches are more effective in the long run compared to curative strategies that respond reactively to the impacts of stunting.

4.4.6 Empirical Significance in the Local Context

Empirical data indicate that the practice of two-year breastfeeding has a strong correlation with children's nutritional status. In Katobu, where an Islamic-based nutrition counseling program was implemented, the prevalence of stunting was lower compared to Palangga. This suggests that localized and contextualized approaches are essential in the implementation of health policies. As emphasized by the Ministry of Health of the Republic of Indonesia (2022), stunting interventions must be adapted to the specific characteristics of each region.

These findings are consistent with the study of Fitriani and Purnama (2021), which revealed that collaboration between religious counselors and healthcare workers significantly enhanced awareness of two-year breastfeeding in rural areas. This strategy leverages the emotional and cultural proximity of religious leaders to their communities, thereby making health messages more readily accepted. In line with this, Hamzah (2022) demonstrated that faith-based nutrition literacy could reduce the risk of stunting by up to 18% in highly religious regions, as nutritional messages grounded in religious teachings are more easily internalized by families.

Moreover, research by Zulaikha, Wulandari, and Yusuf (2020) affirmed that integrating religious values into nutrition counseling substantially improves maternal compliance with the two-year breastfeeding recommendation, even in areas with limited access to healthcare facilities. The success of Katobu exemplifies how a well-organized religious approach can effectively enhance community behavior regarding breastfeeding. This simultaneously challenges the assumption that traditional and religious values hinder health modernization. On the contrary, religion can serve as a catalyst for change when employed wisely and based on sound understanding.

Conclusions

This study demonstrates that the integration of theological and medical approaches holds significant potential to serve as an effective and sustainable model of public health intervention for stunting prevention. By combining a thematic exegesis (*tafsīr maudhū'i*) of Qur'anic verses on breastfeeding with quantitative field data, it is found that the Islamic injunction on two-year breastfeeding not only possesses spiritual foundations but is also consistent with modern scientific evidence in reducing stunting risk. The success of Katobu District in lowering stunting prevalence through collaboration among healthcare workers, religious leaders, and *posyandu* cadres serves as compelling evidence that value-based strategies, when conveyed contextually, can enhance maternal adherence to medical recommendations.

From a socio-cultural perspective, this approach overcomes barriers such as misconceptions and economic constraints, while simultaneously framing breastfeeding as an act of worship endowed with spiritual merit. Cross-sectoral institutional synergy, including the utilization of digital media by millennial *da'i*, further creates opportunities to engage young mothers who are particularly vulnerable to misinformation. The findings also lead to the proposal of an integrative educational model grounded in three pillars—medical

counseling, spiritual education, and community mentoring—that can be adopted by local governments, religious institutions, and civil society organizations as a preventive framework for stunting in other regions.

The broader implications of this research extend to the potential application of similar approaches to other maternal and child health issues, such as maternal nutrition, immunization, and community-based infectious disease prevention. By adapting religious values within health communication strategies, interventions are likely to gain stronger acceptance in areas characterized by high religiosity and limited healthcare access.

For future research, it is recommended that pilot trials of this integrative educational model be conducted across regions with diverse cultural and religious contexts to examine its replicability and effectiveness on a national scale. Longitudinal studies are also needed to evaluate the long-term impacts of this approach on child growth, family quality of life, and behavioral sustainability. Furthermore, interfaith comparative studies could serve as a strategic step in designing cross-faith health interventions, thereby expanding the contribution of this research to the achievement of the Sustainable Development Goals (SDGs), particularly SDG 2 (Zero Hunger), SDG 3 (Good Health and Well-being), SDG 4 (Quality Education), and SDG 17 (Partnerships for the Goals).

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Conflicts of Interest

The authors declare no conflict of interest.

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