



Recognizing and Developing the Potential of 4-6-Year-Old Children through Early Detection of Child Growth and Development

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Abstract

This study aims to discover and improve the potential of children aged four to six years through early detection of child development. The research method uses descriptive qualitative. This research was conducted in 2024. The object of this research is children aged 4-6. This descriptive qualitative research uses documentation, parent interviews, and observation to collect data. Data analysis used content analysis to interpret the research data. The results showed that children generally develop according to age stages, and if there are deviations, early discovery allows parents to take quick action. The study's conclusion shows that children generally develop according to their age stages, and if there are deviations, early discovery allows parents to take quick action. This study can contribute to developing or validating measurement tools such as the Developmental Pre-Screening Questionnaire (KPSP), Denver II, or other detection tools appropriate to the local context.

Kata Kunci

Deteksi dini
Tumbuh kembang anak;
Pendidikan anak usia dini
Intervensi
Perkembangan anak.

Abstrak

Tujuan penelitian ini adalah untuk menemukan dan meningkatkan potensi anak usia empat hingga enam tahun melalui deteksi dini perkembangan anak. Metode penelitian menggunakan kualitatif deskriptif. Penelitian ini dilaksanakan pada tahun 2024. Objek penelitian ini yaitu anak usia 4-6. Dokumentasi, wawancara orang tua, dan observasi adalah metode yang digunakan dalam penelitian kualitatif deskriptif ini untuk mengumpulkan data. Analisis data menggunakan analisis isi untuk menginterpretasikan data penelitian. Hasil penelitian menunjukkan bahwa anak-anak pada umumnya berkembang sesuai dengan tahapan usianya, dan jika ada penyimpangan, penemuan dini memungkinkan orang tua untuk mengambil tindakan cepat. Kesimpulan penelitian menunjukkan bahwa anak-anak pada umumnya berkembang sesuai dengan tahapan usianya, dan jika ada penyimpangan, penemuan dini memungkinkan orang tua untuk mengambil tindakan cepat. Penelitian ini dapat berkontribusi pada pengembangan atau validasi alat ukur seperti Kuesioner Pra-Skrining Perkembangan (KPSP), Denver II, atau alat deteksi lainnya yang sesuai dengan konteks lokal.

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INTRODUCTION

According to the National Association for Education (NAYC), children in early childhood, including those aged 0-6 or 0-8 years, are considered the golden age that influences how children develop their personality, character traits, and intellectual capacity. Growth and development occur at the same time. That being said, each child will have different outcomes. Early Early childhood encompasses many different characteristics (Mustikawati, 2024).

One important factor is the development and growth of the baby. Knowledge and understanding of a single, for example, nutrition or nutrition, includes heredity and psychological aspects of family rules. And education, including educational guidelines sourced from family and religion (Idzni Azhima, 2023).

From conception to death, human existence is characterized by a natural process of growth and development. Through the natural process of growth and development. While growth is mainly concerned with measurable physical changes, qualitative development refers to gradual changes caused by experience and maturity (Finch-Savage & Bassel, 2016). The time between birth and the start of primary school is among the most precious and crucial in a child's life, as this time will affect their future growth (Black et al., 2017). The foundations for developing language, self-concept, self-emotional skills, morals, and religious ideals must be laid now.

For babies to grow and develop healthily and intelligently, parents should at least pay attention to the needs of their children. Children's basic needs include clothing, food, shelter, affection, clean air, and sufficient sunlight. Prevention of accidents and diseases, and development of lifelong habits and abilities. Children's psychological needs include lofty humanitarian ideals, affection, security, a sense of belonging to strong interpersonal bonds, familiarity with the surrounding environment, and freedom from various constraints (Rahmawati et al., 2024). Discipline, opportunities to learn from mistakes, opportunities to become independent, a sense of responsibility, and opportunities to help others. Parents need to be involved if they want their children to grow and develop in a healthy, intellectual, and real way. Supervision, attention, and provision of

growth and development facilities are essential (Utomo & Pahlevi, 2022). Motor, cognitive, emotional, social, linguistic, moral, and religious development are some of the developmental areas included in the scope of early childhood development. Of the developmental areas included in early childhood development. The five elements work together as a cohesive unit that is interdependent.

Early childhood development and growth detection aims to identify any abnormalities or normal growth and development in children (Marino et al., 2012). All children, including newborns, should undergo these tests regularly. Early detection is not limited to children suspected of having developmental problems; it allows parents and medical professionals to identify possible problems immediately.

Along with early identification, stimulation from birth is essential to encourage the best possible development of the child. Talking, singing, storytelling, and playing with age-appropriate toys are all ways to stimulate the sensory system. Children who are stimulated frequently will usually develop more than those who are not (Egnatoff, 2021). In addition to encouraging sensory and motor development, these activities can increase the emotional bond between parents and children, laying a strong foundation for children's growth (Alvina & Reni, 2023).

The goal of early detection is to identify developmental or growth abnormalities. Parents can understand their child's development and detect developmental abnormalities early through monitoring. Through monitoring, parents can understand their child's development and detect developmental abnormalities early on; this detection is guided by the SDIDTK (Stimulation, Detection, and Early Intervention of Growth and Development) book, which includes several question instruments

METHOD

This research uses descriptive qualitative research methodology. Qualitative research looks at data conveyed verbally or visually rather than numbers.

This research was conducted in 2024. The object of this research is children aged 4-6. To determine early growth and development, the data collection method begins with obtaining information

about children and ends with data analysis. Information was collected from the study participants through observation, interviews with parents, and recording.

The researcher used the SDIDTK (Stimulation, Detection, and Early Intervention of Growth and Development) book as a guide to collect data, as it comes with easy-to-use tools and clear instructions. In addition to finding growth and development problems, the most complete child development program is offered to children aged 4-6 years. After the data was collected, the data was analyzed using content analysis, which was used to interpret the research data.

RESULTS AND DISCUSSION

Result

The results of the study based on instruments guided by the SDIDTK (Stimulation, Detection, and Early Intervention of Growth and Development) book evaluate early detection of growth and development, specifically early detection of growth and development deviations, hearing tests (TDD), developmental pre-screening questionnaires (KPSP), early detection of emotional behavioral deviations (KMPE), and early detection of attention deficit disorder and hyperactivity (GPPH).

The findings from testing using KPSP, TDD, KMPE, and GPPH, which are used to identify growth in developing areas early, children are said to be normal or well developed if, from the existing instruments, the answer is "yes" if the KPSP answers 10 questions with the answer "yes," then the TDD answers three questions with the answer "yes," for KMPE itself it is said that the child does not experience emotional behavior problems if he answers 14 questions "no," and GPPH is said that the child does not experience attention disorders if the total answer is below the total score of 13 (Ministry of Health, 2016).

And from the two children studied, namely the initials KR and ATB, each of whom is four years old and male, the parents' answers indicate based on the instrument guided by SDIDTK, that the answers are that both children are normal or well-developed, this can be seen from the 10 "yes" answers to the KPSP instrument questions, 3 "yes" answers to TDD answers, 14 no answers to KMPE, and a total score of 6 and 5 on GPPH answers.

The results of early detection of growth in the development area include examinations conducted with KPSP, showing normal conditions or well-developed if out of ten questions are answered with 10 "Yes" and 0 "No." The 10 questions include: the aspect of fine motor development is said to be developing well if two questions are answered "Yes." as for the questions, namely: 1. Give an example of making a bridge from 3 cubes, namely by placing two cubes with a little distance (about one finger), then placing the third turn above the two blocks so that it is formed like a bridge. Ask the children to do it. Give the child a pencil and paper. Do not help the child, and do not mention circles. Draw a circle on the paper. Ask the child to copy it. Can the child draw a circle?; then in the aspect of speech and language development is said to be developing well if four questions are answered "Yes," as for questions, namely: 3. Show the child the picture below asked: ("Which one can be wasted," "Which one can meow," "which one can speak," which one can bark," 'which one can neigh'). Can the child say his/her full name without help? Answer "No" if he/she says part of his/her name or his/her speech is difficult to understand; 5. Recognize the concept of number 1. Place five cubes on the table and a piece of paper next to the cubes. Tell the child, "Pick up Pickbe, and place it on top." After the child has finished placing, ask, "How many cubes are on the paper?" "Can the child do this by taking only one cube and saying "one"? 6. Ask the child the following questions one by one: ("What is the use of a chair?" answer: To sit on "), (" What is the use of a cup? "), (" What is the use of a pencil?"). Answer: For scribbling, writing, drawing. Can the child answer the three questions related to the different uses correctly?"); then in the aspect of Socialization and Independence is said to be developing well if two questions are answered 'Yes'; the questions are: 7. Ask the parent or caregiver if the child can follow the game when playing with friends (e.g. Snakes and Ladders, Hide and Seek, etc.); 8. Ask the parent or caregiver if the child can follow the game when playing with friends (e.g., Snakes and Ladders, Hide and Seek, etc.); then the Gross Motor aspect is said to be well developed if two questions are answered "Yes," the questions are: 9. "Place a piece of paper carving this book on the floor. Can the child jump the width of the paper by lifting both feet together without starting to

run?", 10. Ask the child to stand on 1 foot without holding on. If necessary, show him how and give him the opportunity 3 times. Can he/she maintain balance for 2 seconds or more?.

The hearing power test (TDD) shows normal conditions if the three questions consist of three yes and zero no answers. The three questions in the hearing instrument are: the first expressive ability of the child is said to be normal if you answer yes from "can the child be able to name objects and uses, such as cups to drink, balls to throw, colored pencils to draw, spoons to eat? Do more than three-quarters of people understand what your child is talking about?" then, if in receptive ability, the child is said to be normal if he/she answers yes to the question: "Is your child able to point out at least two names of objects in front of him/her according to function (e.g., for drinking: cup, for throwing: ball, for eating a little: for drawing: colored pencil?) "and the last question the child is said to be normal if he/she answers yes to the visual ability question 'does the child spontaneously go through games with body movements, such as' pok Ame-Ame 'or club?'. Does your child point with the index finger when he/she wants something, instead of holding it with all fingers?."

The Emotional Behavior Problem Questionnaire (KMPE) shows a normal condition if: out of 14 questions, there are zero yes answers and 14 no answers. The 14 questions are as follows: 1) Does your child often react negatively, get angry, or be tense for no apparent reason? (reacting negatively, for example, fussy, impatient, crying a lot, irritable, or overreacting when he/she feels the situation is not as he/she expected or his/her wishes are not fulfilled), 2) Does your child prefer to be alone, play alone, or avoid children of the same age or adults? (wants to be alone, solitary with a moody expression, lack of enthusiasm, sadness, or loss of interest in things he/she used to enjoy), 3) Does your child tend to be defiant? (arguing, resisting, refusing to obey or doing the opposite of what is asked, and appearing unconcerned when told or listened to), 4) Is your child easily frightened or overly anxious for no apparent reason? (e.g., fear of animals or harmless objects, appearing anxious when not seeing their mother or caregiver), 5) Does your child often have difficulty concentrating, get distracted easily, move around a lot, or can't stay still? (e.g., the child

cannot stay with one game for long, is easily distracted when other things attract more attention such as sound or movement, cannot sit quietly, moves a lot, or tends to walk or pace), 6) Does your child cling more or always ask for company, is easily anxious, and not confident? (seems to ask for protection or company in various situations, especially when in new situations or there are new people he/she knows: expresses anxiety and looks insecure), 7) Does your child show changes in sleep patterns? (e.g., difficulty falling asleep, staying awake all day, often waking up at night due to nightmares, delirium, crying in his/her sleep), 8) Does your child experience changes in eating patterns from usual? (loss of appetite, not wanting to eat at all, or on the contrary, overeating, being very picky about types of food or giving food a long time in the mouth without chewing or snacking), 9) Does your child often complain of headaches, stomachaches, or other physical complaints at certain times? 10) Is your child easily discouraged or frustrated and often shows negative emotions? (e.g., prolonged sadness or disappointment, complaining, anger, or protesting, for example, when the child finds it difficult to draw, then yells for help, gets angry, or tears the paper), 11) Does your child experience a regression in behavior patterns from the abilities he/she already has? (e.g., re-wetting the bed, sucking the thumb, or not wanting to separate from parents or caregivers), 12) Does your child often fight, quarrel, or attack other children verbally and non-verbally? (e.g., taunting, yelling, grabbing games, or hitting their friends), 13) Is your child often mistreated by other children or adults? (e.g., left out of games, avoided, teased, called names, grabbed toys, or physically hurt), 14) Does your child tend to be destructive or always want to win or dominate? (e.g., breaking objects, hurting themselves or animals).

The attention and hyperactivity disorder (GPPH) questionnaire shows a normal condition: out of 10 questions, there are five answers: 0, 5 answers 1, 0 answers 2, and 0 answers 3. The 10 questions are: 1) Tireless or excessive activity; 2) not being excited impulsive; 3) disturbing other children; 4) Failing to complete activities that have been started; short attention span, 5) moving limbs or head continuously; 7) His/her requests must be met immediately; easily becomes frustrated, 8) often and

easily cries, 9) his/her mood changes quickly and drastically, and 10) outbursts of frustration, behavior, explosive, and unpredictable.

According to the justification provided, the findings of this study show that early diagnosis helps determine whether a child's growth is deviant as soon as possible. Therefore, the researcher claims that the growth of children who have done this early detection will be known to what extent and what can be done to maintain or add more to the development; the researcher concludes that the children studied have developed according to the stages at the age of the child. And if there is a developmental deviation, it will be known more quickly and can be handled according to its development (Guavera, 2013).

Based on the measurement tools described, early developmental detection produces almost perfect findings for the child's age. A child's developmental screening results may indicate anomalies, such as problems with the KPSP instrument, where the child cannot pronounce his long name when he should be able to pronounce three to four vocabulary words at his age. Children with these language and communication delays struggle with reading, writing, paying attention, and interacting with others (Phillips, 2021).

Given the importance of early life screening, educators, parents, and other stakeholders should work together to support child development to improve newborn functional abilities through early intervention as a follow-up to early detection initiatives (Sadoo, 2022).

Discussion

Growth is the term used to describe the growth in size and quantity of cells and intercellular tissues to measure the size and structure of the body in terms of weight and length. The expansion of increasingly complex body parts and functions in speech and language, fine and gross motor skills, socialization, and independence is known as development (Brody, 2013). From birth to adulthood, growth and development encompasses the physical, motor, social-emotional, and cognitive domains. Early diagnosis of growth and development is necessary to ensure that every child reaches his or her full potential according to age stage (Ariyanti, 2023).

Children's physical, motor, socio-emotional, cognitive, and language development is systematically observed, assessed, and tracked to ensure that children develop according to their age stages. This approach aims to identify developmental delays or illnesses as soon as possible so that necessary therapies can be implemented promptly. Using specific assessment instruments or methodologies, such as the Developmental Pre-Screening Questionnaire (KPSP), parents, educators, or health workers conduct early detection to support optimal child development (Sufa, 2023).

One of the advantages of early detection of growth deviations is the ability to immediately identify abnormalities such as malnutrition, microcephalic or macrocephalic disease in children, and good or poor nutritional health. Early growth detection is essential to identify developmental problems (delays) in language and speech, fine and gross motor skills, socializing, and independence (Susilowati, 2021).

Early Developmental Identification and Intervention (SDIDTK) It is very important to identify differences and stimulate activities to identify problems early. In addition to being a very good period, it is also a period vulnerable to harmful influences. Children's basic development will influence and determine their future development during this period. Rapid development in speech and language, mobility, independence, creativity, social awareness, emotional intelligence, and self-reliance lay the foundation for future progress. In addition, these developments also form the foundation for moral and psychological growth. Optimal growth requires good nutrition, stimulation, care, and health (Hendrawati, 2022).

Understanding the general condition of a child's development is one of the advantages of early detection. (Suherlina, 2021) If the results of Early Detection and Intervention for Developmental Disabilities (SDIDTK) show that the child is developing normally, stimulation can be changed to encourage physical, emotional, and auditory development. For example, role-play to develop emotions, reading stories or playing with sounds to develop hearing, and physical activity to improve motor skills.

CONCLUSION

The findings of this study show that monitoring children's growth and development between the ages of four and six is important to spot developmental problems early. Parents can obtain the right information about their child's development using tools like the Test of Hearing (TDD), the Developmental Pre-Screening Questionnaire (KPSP), and other detection tools. The analysis findings showed that, for the most part, the children studied showed age-appropriate growth, with little to no deviations found. This study shows that early detection helps identify problems and allows parents to implement the necessary actions to promote their child's growth as best as possible. This study shows that early detection helps identify problems and allows parents to implement the necessary measures to promote their child's growth as best as possible. To ensure that children grow and develop well in various areas, such as physical, motor, and social-emotional, cognitive, parents and medical personnel must conduct early detection and provide appropriate stimulation regularly.

This study highlights how important it is for parents to actively monitor and assist their children's development. It also provides suggestions for raising awareness of early detection's importance in early childhood education. In addition to actively observing and assisting their children's development, parents also provided suggestions to raise awareness of the importance of early detection in early childhood education.

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