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Evaluation of The Implementation of The Dashat (Healthy Kitchen Overcomes Stunting) and Gong Ceting (Gotong Royong to Prevent Stunting) Program to Prevent and Fulfill Nutrition of Stunting Toddler in Tieng Village, Wonosobo District

Lial Khusna[1]*, Reni Pawestuti Ambari Sumanto [1]

[1]Department of Early Childhood Education Department, Faculty of Education and Psychology, Universitas Negeri Semarang, Indonesia

*Correspondence to: *lialkhusna27@gmail.com*

Abstract: This research aims to determine the evaluation of the implementation of the stunting reduction program, namely the Healthy Kitchen to Overcome Stunting and Mutual Cooperation to Prevent Stunting program in Tieng Village, Wonosobo Regency, by analyzing the evaluation of input, process and output. The method used is a descriptive qualitative method. The subjects in this research were 11 people consisting of PKK cadres, Posyandu cadres, Tieng Village Midwives, students, nutritionists, village officials and program recipients. Data collection techniques are carried out through interviews and documentation. Method triangulation by conducting interviews with nutritionists at the Kejajar Community Health Center, Tieng Village Officials, and parents of program recipients. Data analysis techniques are carried out through data reduction, data presentation, and verification or drawing conclusions. Evaluation of the DASHAT program shows obstacles to input evaluation in the form of a lack of budget from program organizers, time constraints for program implementation, delays in handling stunted children, as well as the need to improve facilities and infrastructure. The output during the implementation of DASHAT is influenced by input and process, the output from the implementation of the DASHAT program is still not able to reduce stunting cases in Tieng Village. The evaluation of the Gong Ceting program experienced obstacles in the input evaluation in the form of a lack of facilities and infrastructure, long distance from the campus to the focal village, internet network problems when participating in the MURI record zoom, as well as short implementation time, but the output of the Gong Ceting program showed success marked by solutions MURI record by serving 14,000 portions of nutritious food for stunted children and declaring 10 stunting locus villages in Wonosobo Regency.

Keywords: *Interpersonal communication, speaking ability, early childhood*

INTRODUCTION

WHO explains that public health problems can be caused by malnutrition (stunting) in a country where the prevalence reaches 20%, so it will become a public health problem. Based on data obtained from the Asian Development Bank (ADB), Indonesia was ranked second with the highest prevalence of stunting cases in Southeast Asia in 2020, namely the prevalence reached 31.8%.

One effort to accelerate the reduction in stunting rates is by determining the areas that will be the focus of the government's pilot projects. The selected areas are areas where the prevalence of stunting is still high. Through a meeting of ministers in February 2022, there were 12 stunting priority provinces in Indonesia in 2022, one of which was Central Java province. By focusing on 12 stunting priority provinces, around 60% of the stunted toddler targets have been covered. It is also hoped that intervention activities carried out by groups and institutions that reach the priority stunting locus villages that have been determined will truly reach the target communities.

Based on information presented by the head of the BKKBN, there are 5 districts that are in the highest prevalence order in Central Java, namely Wonosobo, Brebes, Temanggung, Demak and Jepara districts (Widwiono, 2022). Based on the explanation from the Department of Population Control,

Family Planning, Women's Empowerment and Child Protection (PPKB-PPPA) in 2021, Wonosobo Regency is still at 28.1% based on data from SSGI (Indonesian Nutrition Status Survey). The Wonosobo Regency Government is making various efforts to accelerate the reduction in stunting prevalence by collaborating with various parties.

In 2022, the Wonosobo Regency government through the Population Control, Family Planning, Women's Empowerment and Child Protection Service (PPKB-PPPA) succeeded in carrying out a collaboration which was considered effective in reducing the prevalence of stunting in Wonosobo Regency, namely the DASHAT program which aims to improve the nutritional intake of pregnant women and stunted toddlers so that their nutritional needs can be met.

The DASHAT (Healthy Kitchens Overcome Stunting) program is a program launched by the national BKKBN team in order to accelerate the reduction and prevention of stunting through activities to provide nutrition for families at risk of stunting by utilizing local food ingredients which are then processed by the DASHAT program implementation team and then distributed to families at risk. stunting such as toddlers, toddlers and pregnant women. The DASHAT program in Tieng Village was implemented twice, DASHAT I was implemented in June-July 2022 for 60 days, then DASHAT II will be held from November, December to January 2023.

Apart from the DASHAT program, the Wonosobo Regency TP PKK (Family Empowerment and Welfare Mobilization Team) also launched a work program, namely Gong Ceting (Mutual Cooperation to Prevent Stunting) which will be implemented in August 2022 for 3 days. This program is intended as a continuation of the DASHAT program launched by the BKKBN of Central Java Province. The Gong Ceting program consists of several activities, including socialization and education activities related to balanced nutrition and healthy eating patterns for pregnant women and toddlers, providing additional food and nutritional supplements for pregnant women and toddlers, improving sanitation and environmental health such as access to clean water and proper sanitation, improving the quality of health services, especially for mothers and children.

The activities in the gong ceting program are carried out in an integrated manner through cooperation and collaboration with the health service, education service, social service, agriculture service and other services related to nutrition. The role and participation of the community is also needed to make the gong ceting program a success, which can be implemented through mutual cooperation programs in cleaning the environment, cooking healthy food together, as well as supporting the implementation of other nutrition programs.

After the DASHAT and Gong Ceting programs were implemented, stunting cases in Wonosobo Regency were still considered high, namely the prevalence was 22.7% according to e-PPGBM data in September 2023. The causes of the high stunting rate in Tieng Village include, among other things, inappropriate parental care patterns, lack of parental knowledge about nutrition so that children's nutritional adequacy is not met, irregular obstetric examinations, unintended pregnancy (KTD), mothers who do not routinely check the condition of the womb, no consuming blood supplement drugs during pregnancy, inadequate breast milk supply, delays in treating stunting, namely after the child is more than 3 years old, and early marriage (Mutmainah et al., 2022).

Indirectly, maternal knowledge regarding nutritional intake can influence the health of the mother, the baby she is carrying, and the quality of the baby born. In general, efforts to increase nutrition are only carried out when the mother is pregnant, even though it would be better if education related to nutritional intake had been campaigned long before the mother became pregnant. This can be done as an effort to prevent stunting from the start and mothers already have

the knowledge to prepare for pregnancy and nutritional intake during pregnancy and after giving birth (Kirana et al., 2022).

Increasing mothers' knowledge about stunting and nutrition can be done through the DASHAT and Gong Ceting programs, so it is hoped that through these programs stunting cases can decrease, however after the implementation of the two programs stunting cases in Tieng Village have not been completely resolved. If assessed from human resources, the number of cadres and village midwives is sufficient and the budget provided by Tieng Village as well as assistance from other institutions is sufficient for the implementation of the two programs, however, the output or results from the implementation of the DASHAT and Gong Ceting programs still require further follow-up. in order to really reduce the prevalence of editing in Tieng Village.

Evaluation of program implementation in this research aims to accumulate, examine, and select and display useful data related to the object being researched or evaluated (Wirawan, 2011). Another opinion regarding program evaluation is that it is a tool used to analyze a program and search for information with the aim of improving the quality of a program, improving the results of program implementation, as well as overcoming problems or obstacles that occur which can be used to make decisions regarding program implementation and provide data for the need for program sustainability (Mets, 2007).

According to (Rahmadiani, 2022) shows that there are 3 components of stunting program evaluation, namely input evaluation whose indicators consist of human resources, facilities and infrastructure, program implementation procedures, program rules, and funding, then process evaluation, namely the process during program implementation, as well as output evaluation. or results after the program takes place.

Based on the description above, researchers are interested in researching and exploring how the Gong Ceting and DAHSAT programs are implemented to fulfill stunting nutrition in Tieng Village, Wonosobo Regency and what obstacles are experienced during program implementation, then researchers conduct analytical research to evaluate program implementation through activity components such as input, process, and output.

METHODS

This type of research uses a descriptive qualitative type, this research is used to describe more clearly and in detail the problem being studied as well as to describe and identify data in a structured manner with a case study research design.

This research was conducted in Tieng Village, Kejajar District, Wonosobo Regency. Tieng Village is one of the locus villages (special locations) for stunting or villages that have a fairly high prevalence of stunting. Wonosobo Regency has 10 stunting locus villages where efforts are being made to reduce them. Tieng Village has also implemented two stunting reduction programs, namely the DASHAT and Gong Ceting programs. The focus of this research is related to program input factors, the program implementation process, as well as the results or impacts of program implementation in Tieng Village.

Data collection in this research was carried out through interviews and documentation with 11 informants consisting of 2 PKK cadres, 2 Posyandu cadres, 1 village midwife, 1 village official, 1 Kejajar Health Center nutritionist, 2 students, and 2 recipients of the DASHAT and Gong Ceting programs. Data validity techniques according to Sugiyono (2019) are carried out through credibility tests, transferability tests, dependability tests, and confirmability tests. The data analysis technique uses the

Miles and Huberman model which consists of data collection, data reduction, data presentation, as well as drawing conclusions and verification.

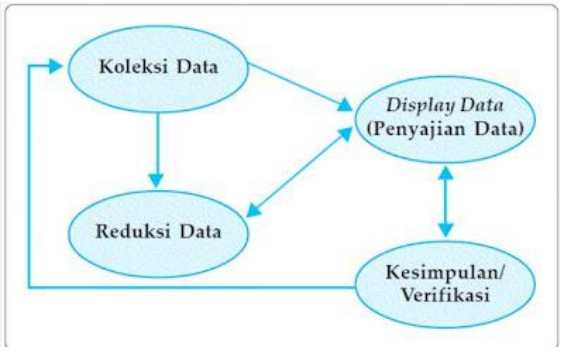

Figure 1. Miles and Huberman model data analysis technique

RESULT AND DISCUSSION

Based on the results of research conducted in Tieng Village, Kejajar District, Wonosobo Regency using in-depth interview techniques and documentation in describing the evaluation of the implementation of the DASHAT and Gong Ceting programs, the following results were obtained:

Evaluation of the Implementation of the DASHAT Program

Input Evaluation

Based on the research results, it is known that the implementation of the DASHAT program has gone well, if assessed through input evaluation whose indicators consist of human resources, program implementation procedures, rules and procedures that have not experienced any problems. The implementation team consisting of PKK cadres, Posyandu cadres, village midwives, and nutritionists from the community health center have carried out their duties quite well and routinely carry out monitoring and evaluation during program implementation. There are also standard operating procedures and menu lists provided by the Kejajar Community Health Center, However, in the facilities and infrastructure indicators as well as the program budget, there are several obstacles such as facilities and infrastructure that need to be improved, for example the need for a refrigerator as a means of storing food, this is not in accordance with the statement from (Nurtin, 2022) that the quality of human resources and supporting facilities and infrastructure is an element and factor that can influence the progress of an organization. This is in accordance with the results of interviews with the program implementation team "... The facilities are adequate and quite complete, around 70% complete. The cooking equipment needs to be improved, for example adding a mixer, refrigerator and others..." (MI, 6 September 2023).

Apart from that, the budgeting for program implementation also experienced deficiencies in the middle of program implementation so that the program stopped on the 60th day when it should have been 90 days, the implementing team also did not receive incentives during the implementation of the DASHAT program, delays in handling stunted children also became an obstacle because if the child was too late If treated, based on the results of interviews with nutritionists at the Kejajar Community Health Center, the child will have difficulties in the treatment process. This data was obtained according to the results of an interview with a nutritionist at the Kejajar health center "... children who take part in the stunting program are indeed children who are already stunted and for treatment they must be referred to the hospital. Yes, DASHAT is actually good, but the increase is a little 103 if I look at it. because it's difficult for the child because he's already stunted..." (TW, 10 September 2023)

Process Evaluation

Based on the evaluation of the process or process of implementing the DASHAT program, everything

went smoothly, starting from scheduling cadres for cooking, timeliness of program implementation, the distribution process, providing menus in accordance with menu scheduling from the Kejajar health center nutritionist, as well as monitoring and evaluation carried out by the Kejajar health center. , this is in line with research (Jannah et al., 2023) that the monitoring carried out includes measuring body weight, height, ensuring that food packages are consumed by children, as well as recording weight and height gain. The program implementation process was also considered to have gone well according to the results of interviews with DASHAT program recipients "...The program implementation was carried out in a timely manner, then also through the DASHAT program we paid more attention to nutritional intake and cooking methods so that the nutritional value was not lost, then cooked for little ones. the salt is further reduced, no MSG is used, and animal protein is added and this is still done today..." (NLR, 11 September 2023)

Figure 2. Socialization of food serving patterns

There are several obstacles that were obtained through the results of interviews, namely the lack of understanding of parents regarding fulfilling nutrition for children, feeding patterns that do not contain adequate amounts of animal protein and fat, there are parents who do not accept it when their child is said to be stunted, there are parents who are not happy when given free food assistance from the village, during the food distribution there were several people who were difficult to find, and there were several parents who were not aware of taking food during the second DASHAT program. based on the results of interviews with cadres, another obstacle in the DASHAT program is that it is limited by implementation time, so that after the program is completed there are some parents who do not implement a healthy and nutritious menu for their children so that the results of the DASHAT program are considered less effective in increasing parental awareness in fulfilling nutritional requirements for children.

Output Evaluation

Output evaluation can be seen through the achievements achieved by program implementers (Rahmadiani, 2022). Apart from that, output evaluation is also used to analyze results during and after the program runs and test effectiveness during the program including reviewing the impact of the program (Lee SH et al., 2019).

The achievement of the DASHAT program in Tieng Village is assessed by the fact that the implementation of the DASHAT program has actually facilitated the target community receiving the program, by being provided with knowledge about food nutrition, serving nutritious food menus, as well as knowledge about family menus that can be consumed daily so that family nutrition is fulfilled and stunting can be treated. Several program recipients have also implemented a healthy family menu in their daily lives. However, there are still some families whose awareness is still low in participating in socialization held by both the village and other institutions, resulting in a lack of nutritional knowledge,

which can hinder the acceleration of stunting reduction in Tieng Village. This is in accordance with the results of an interview with the Tieng village midwife "... The DASHAT program is less effective because it only provides food once, and the causes are not only due to diet, but also due to parenting patterns. "Then the targets or achievements of the DASHAT program are quite good because there are some normal ones and some pregnant women who have managed to increase their lila, but not many, only a few percent..." (IA, 7 September 2023)

Evaluation of the Implementation of the Gong Ceting Program

Input Evaluation

Based on the research results, it is known that the implementation of the Gong Ceting program in Tieng Village has gone well, if assessed through input evaluation whose indicators consist of human resources, program implementation procedures, rules and procedures, facilities and infrastructure, and the budget has not experienced any problems. The implementing team consisting of UNSIQ lecturers, UNSIQ students, PKK cadres, Posyandu cadres, and village midwives have carried out their duties quite well and in accordance with the directions of the UNSIQ FIKES lecturers, the budget obtained was also sufficient during the implementation of the program, the implementing team received incentives from the parties UNSIQ, as well as the implementation of providing healthy menus are in accordance with those previously determined by the district. The cadres were also enthusiastic about taking part in measurement training using anthropometry delivered by UNSIQ Fikes lecturers.

The above is in accordance with the results of interviews with the Gong Ceting program implementation team "...Yes, participated from planning to implementing the program, then there was also training before the program ran, such as cadres receiving training in cooking healthy menus for impromptu stunting by the health team working together with village midwives then train the cadres to make menus to reduce stunting..." (KE, 6 September 2023).

Process Evaluation

Evaluation of the implementation process of the Gong Ceting program has been running smoothly as seen from the timeliness of the program implementation, the suitability of the material presented in the socialization with what is needed by cadres, namely regarding measurements using anthropometry as well as demonstrations of parent training in making healthy food menus for stunted children. Obstacles during the implementation of the program were related to the network which hampered the implementation of the MURI record zoom and the distance of the village from campus so that students experienced difficulties.

Overall, the process of implementing the Gong Ceting program has been running well and smoothly and the material related to socialization is appropriate and in line with what is needed by the recipient community and cadres, according to the results of interviews with program recipients "...During program implementation, the program ran smoothly and on time. In fact, sometimes pregnant women arrive late. The Gong Ceting program also helps increase family knowledge in making nutritious family menus..." (NLR, 11 September 2023).

Figure 3. Implementation of socialization of anthropometric measurements

Output Evaluation

Evaluation of the output in implementing the Gong Ceting program in Tieng Village is in line with the study conducted Mutmainah *et al.*, (2022) who conducts anthropometric measurement training through the Gong Ceting program to train cadres to use valid measurement tools to measure TB in toddlers. The results of this research are also in line with the study conducted by Purnamasari *et al.*, (2023) through the implementation of the Gong Ceting program by the regional government in collaboration with universities, it was able to increase the knowledge of cadres and families at risk of stunting in efforts to prevent and accelerate the reduction of stunting in the Regency. Wonosobo. The following are the results of interviews with students implementing the program "...Thank God, even though the work is not yet complete, it can increase the knowledge of parents and cadres to prevent and accelerate the reduction of stunting in Tieng Village..." (ZFR, 12 September 2023)

The holding of the Gong Ceting program in Tieng Village produced short-term and long-term output. Based on research from Hariani (2017), the short-term results of the program can be assessed from awareness, knowledge, attitudes and skills. The short-term output in implementing the Gong Ceting program in Tieng Village has been considered successful, marked by increased parental awareness, for example in terms of cooking, paying more attention to cooking methods and safe ingredients given to children, increasing parents' knowledge regarding stunting and fulfilling children's nutrition through socialization and training on cooking menus. healthy food for stunted children, as well as being able to improve the skills of cadres in using anthropometry through anthropometric measurement training activities, as well as achieving the program objectives, namely the declaration of Gong Ceting in 10 stunting locus villages in Wonosobo Regency and achieving a MURI record in the context of making 14,000 portions of healthy food for families at risk of stunting together with 140 other villages in 14 districts.

Meanwhile, in the long term, the Gong Ceting program is a condition that is expected (conditions) such as health conditions and social conditions, therefore follow-up is still needed for the Gong Ceting program continuously, such as socialization regarding parenting patterns and education regarding family eating habits, especially in villages where one meal is usually used for up to 2 days, so the nutritional value is lost, this can be followed up to achieve long-term output in reducing the prevalence of stunting in Wonosobo Regency, carried out by all stakeholders.

Figure 4. MURI Record Award for making 14,000 portions of healthy food

Figure 5. Gong Ceting Declaration

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CONCLUSION

Based on the results and discussion of the evaluation of the DASHAT (Healthy Kitchen to Overcome Stunting) program to prevent stunting and fulfill nutritional requirements for toddlers in Tieng Village, Wonosobo Regency, which consists of input, process and output evaluations, it can be concluded that most of the problems originate from input, including the availability of facilities. and infrastructure that needs to be further improved, kitchen conditions that need to be improved, budgeting issues that need to be reviewed, as well as program implementation that is tied to implementation time so that when the program is finished there are several parents who return to providing instant food to their children.

Obstacles in process evaluation are related to parental awareness in providing food for children and distribution, obstacles in input and process evaluation can influence output evaluation which is less than optimal and unable to meet nutrition and reduce the prevalence of stunting cases in Tieng Village.

Meanwhile, the evaluation of the implementation of the Gong Ceting program in Tieng Village has gone well, in the input evaluation there were no problems, then in the process evaluation there were internet network problems during the implementation of the MURI record zoom and the distance

between the campus and the stunting locus village was quite far, and for the evaluation Output includes short-term and long-term output. The short-term output evaluation has been successful, marked by the MURI record for serving 14,000 healthy meals for stunting targets, increasing awareness, knowledge, attitudes and skills of parents and cadres. The implementation of the Gong Ceting declaration which was followed by Tieng Village as one of the stunting locus villages in Wonosobo Regency is also included in the short-term output. Then, for long-term output, follow-up is still needed from various parties to jointly reduce the prevalence of stunting in Tieng Village.

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