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Village Government Policies to Unravel the Failure in Handling Stunting

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Abstract

The prevalence of stunting in 2021 according to the Indonesian Infant Nutrition Survey (SSGBI) was 24.4%. This figure still exceeds the WHO limit of 20%. The prevalence of stunting cases in Wonosobo Regency touched 10.49 percent and Candiyasan Village is the locus of stunting in Kertek District. This study aims to identify the factors causing the high stunting rate in Candiyasan Village and its relation to the extreme poverty rate, which is also high in Kertek Sub-district. The method used is descriptive qualitative method according to the results of interviews as primary data and literacy data as secondary data. The results show that stunting cases are caused by several factors, including: high rates of early marriage, pregnant women's awareness of the importance of checking nutritional fulfillment during pregnancy, nutritional fulfillment patterns, family food security, and poverty. The majority of stunting toddlers come from poor families.

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INTRODUCTION

Stunting in Indonesia is still a crucial problem. This is because Indonesia's stunting prevalence rate in 2021 was 24.4%. In 2022, based on the Indonesian Infant Nutrition Survey (SSGBI), it decreased to 21.6% and still exceeded the stunting prevalence rate threshold set by WHO of 20% (Ministry of Health, 2023). So that handling stunting becomes one of the targets of the 2020-2024 RPMN policy strategy. Stunting itself according to WHO is defined as a condition of failure to grow as a result of chronic malnutrition and psychosocial stimulation as well as exposure to repeated infections, especially in the First 1,000 Days of Life (HPK) or commonly called a short body. In Presidential Regulation No. 72 of 2021, it is stated that stunting is a disorder of child growth and development due to chronic malnutrition and repeated infections, characterized by length or height below the standards set by the minister who organizes health affairs. Therefore, in early childhood, this stunting issue requires special attention because it can cause children's physical and mental development to be disrupted. Stunted growth is a risk factor for increased mortality, cognitive performance, decreased development, and imbalances in physical function. The longterm risks can be an increased risk of intellectual disability, decreased productivity, and an increased risk of degenerative diseases in the future.

Stunting on the one hand is also closely related to the problem of poverty that occurs in society. Wonosobo Regency, which is located in the highlands, is still the second poorest district in Central Java. Candiyasan Village, Kertek Subdistrict, is a contributor to the poverty and stunting rates which are quite high compared to other villages in Wonosobo Regency. In 2021, the prevalence of stunting cases in Wonosobo District touched 10.49 percent. This figure is targeted to decrease to 10 percent by 2024. Data from the Wonosobo Health Office states that Candivasan Village has a record of decreasing the number of dysgenetic babies between 2020 and 2021. At first the stunting rate in Candiyasan was 89 children and then dropped to 68 children. But in 2022 the stunting cases in Candiyasan Village actually increased to 70 children. Based on this data, it is necessary to conduct in-depth research to obtain a comprehensive identification of the factors that cause stunting in Candiyasan Village. Although the local government has made serious efforts to prevent stunting, including Germas.

Healthy Living Community Movement activities (GERMAS) is in line with the Ministry of Health's stunting prevention efforts. The government has also made handling stunting a priority with the issuance of Permendesa No. 19 of 2017 concerning Priority Use of Village Funds, 2018, with the target of 1000 villages in 100 districts / cities throughout Indonesia to carry out stunting prevention programs through village policy interventions (Kemendes PDTT RI, 2018). The Candiyasan village government has also made efforts to handle stunting since 2018 through a supplementary feeding program (PMT) during the implementation of child posyandu. However, not only the government, but all aspects of the community components must also work together in preventing stunting, (Sari & Oesmani, 2020).

Previous research that has been conducted by several researchers on stunting is only aimed at describing the government collaboration built in overcoming stunting in Kalirandu Village and knowing the driving and inhibiting factors that influence collaboration (Evalia; Herbasuki, 2021). The research conducted by this author is intended to understand and describe the factors of stunting in Candiyasan Village, Kertek Sub-district, Wonosobo Regency as the second poorest area in Central Java with stunting rates that are still below the national target.

Previous research on stunting prevention through increasing community knowledge in Muntoi Village, Passi Barat Subdistrict, Bolaang Mongondow Regency found that by providing a knowledge stimulus to the community about stunting such as nutrition during pregnancy and children before the age of 2 years, the prevalence of stunting can be suppressed (Rahmawati; Hamzah, 2020). Of course, this research only measures the success of stunting education to the community so that it has not found the factors that cause stunting.

METHOD

This research was conducted using descriptive qualitative research methods by collecting primary data through interviews and observations whose results were analyzed descriptively. The informants of this research were the Village Head, Village Midwife and Village Local Facilitator (PLD) in Candiyasan Village, Kertek District, Wonosobo Regency. The instruments used in this study used a list of questions to deepen the problems in the study. Secondary data were obtained from literature and data from the Wonosobo District Health Office.

RESULTS AND DISCUSSION

Candiyasan Village, Kertek Subdistrict, Wonosobo Regency, with a natural landscape of Mount Sidoro and Sumbing, covers an area of 6.0 km2 and has a population of 4,429 people with 1,310 families. The majority of the population are vegetable farmers and laborers. The social condition of Candiyasan Village has a fairly high stunting rate. The stunting rate fluctuates as shown in the following table.



Figure 1. Candiyasan Village Stunting Rate in 2020-2022

Based on this data, Candiyasan Village has succeeded in reducing the stunting rate from a total of 89 children in 2020 to 68 children in 2021. However, the positive trend of decreasing the number still cannot be used as a reference for the village's success in serious efforts to deal with stunting. This condition is due to the fact that in 2022 the total number of stunted

toddlers actually increased to 70 children. The reality of the ups and downs of the stunting rate raises big questions about whether the handling pattern applied so far is correct, and what are the factors that cause the high stunting rate.

According to information from the village midwife, the stunting number of 70 toddlers is spread across four hamlets, namely Banjaran, Jurangjero, Kabelukan, and Grenjeng. In 2021, Grenjeng hamlet had the highest number of stunting records. However, in 2022 the distribution map of stunting has changed. The highest number is now in Banjaran Hamlet with a percentage of 23.17% of the total 82 toddlers, followed by Jurangiero Hamlet with 32 toddlers out of a total of 143 toddlers (22.37%), followed by Grenjeng and Kabelukan Hamlets with 14%. Based on these figures, the percentage of stunting in Candiyasan Village reached 19.83%. Compared to the national case, Candiyasan Village has a lower percentage. If we look at the government's target in 2024 where the percentage is sought to decrease to 14%, Candiyasan Village still has a target to reduce the number of stunting cases to be below the government's target standard. By looking at the reality of the number of babies under the age of two who are indicated to be stunted and the number that still fluctuates per year, of course, this is a serious concern for the village government and the district government.

Stunting cases in Candiyasan village are categorized as evenly distributed because they are spread across four hamlets. Even the number of children under two years old (baduta) and under five years old (toddlers) in each hamlet who are categorized as stunted is a serious concern for the village government.

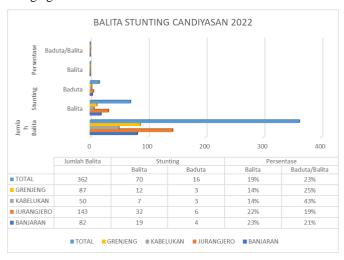


Figure 2. Data on the Distribution of Stunting Toddlers in Candiyasan Village in 2022

The high stunting rate in Candiyasan Village is caused by several factors including: 1) The number of cases of early marriage, so that young brides do not understand the importance of nutritional needs during pregnancy and 1000 days of life for children. "Early marriage in Candiyasan is more due to the low level of education of children and parents, lack of awareness of the physical and mental readiness of adolescents, and the absence of special educational forums for adolescents who do not pursue formal junior or senior high school education about the risks of early marriage" said Edi Kriyono, Head of Candiyasan Village. 2) Lack of awareness and understanding of pregnant women to have regular gynecological check-ups. "There are still many pregnant women who are lazy and do not want to check their

womb according to the target of at least four times during pregnancy and as recommended by the midwife" said Mrs. Miatun, the village midwife. In addition, the level of education of parents is also influential, due to the low level of education and the difficulty of accessing information about nutritional content. mothers of toddlers usually have a very poor level of understanding about stunting (Kholia et al., 2020).

3) Incorrect parenting of under-five children, "most young brides because both parents are busy earning a living, the child is entrusted to the grandmother or biological mother or in-laws. By grandmothers or mothers who usually take care of them, the infants are given additional food before the age of 6 months so that the infants are not fussy, this has quite an influence on the growth of the child" said Mrs. Miatun, the village midwife. 4) Economic conditions/poverty of the family, "the poor economic condition of the family causes less attention to the fulfillment of toddler nutrition, sometimes toddlers are given easily obtained food such as instant noodles" said Gunawan (PLD). Based on the verification and validation of extreme poverty data in Candiyasan Village, a correlation was found between the high stunting rate and the number of poor people.

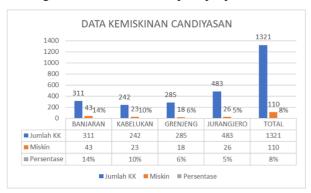


Figure 3. Data on the Distribution of Extreme Poverty in Candiyasan Village

Based on the data obtained, the total number of families in Candiyasan Village is 1321 families. The extreme poverty rate in Candiyasan Village, precisely in Banjaran Hamlet is 311 families with an extreme poverty rate of 43 families (14%), Kabelukan Hamlet is 242 families with an extreme poverty rate of 23 families (10%), Grenjeng Hamlet is 285 families with an extreme poverty rate of 18 families (6%), while in Jurang Jero Hamlet there are 483 families with an extreme poverty rate of 26 families (5%). In fact, Banjaran Hamlet as the highest contributor to stunting is also the hamlet with the highest extreme poverty. Thus, it can be seen that poverty is also one of the factors causing stunting. In addition to the factors of early marriage and nutritional knowledge of mothers of toddlers, awareness of pregnant women in checking the womb, parenting and diet of children, extreme poverty is also the strongest factor causing stunting in Candiyasan Village.

CONCLUSION

Stunting is a serious problem for the Candiyasan Village Government and the Wonosobo District Government. The high number of stunting cases in Candiyasan Village from 2020 to 2022 is serious

evidence that the stunting cases that occur in Candiyasan Village are caused by several factors. From the research results, the following analysis was obtained. First, the high rate of early marriages in Candiyasan Village, which is caused by the low level of education of the community, causes a lack of pre-marital preparation such as economic and mental psychological readiness as parents who suddenly have children under five. Second, the lack of awareness to check pregnancy and the importance of nutritional fulfillment during pregnancy. Third, parenting by other people or usually entrusted to grandmothers or mothers or in-laws of the toddler's parents who are not equipped with information on toddler diets with balanced nutritional fulfillment for infants under two years so that understanding of the right diet, portion, content and frequency for under-fives. It is confirmed that the unavailability of information makes it easier for people to adopt attitudes and actions that encourage stunting (Rehena et al., 2021). Fourth, the problem of poverty leads to low family food security in fulfilling toddler nutrition.

The fact found in Candiyasan Village is that the majority of stunted toddlers also come from poor families. Despite efforts to provide additional food (PMT) by the village government every month through posyandu, the stunting rate is still high. This is because solving the stunting problem does not lie in fulfilling nutrition through PMT alone. But the village and district governments must focus on the four factors that cause stunting mentioned above, such as continuous education to the community about the dangers of stunting for the child's future. This condition requires policies from the Wonosobo Regency government and the Candiyasan village government as a result.

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