

Local Government Efforts to Prevent Stunting at the Village Level

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ABSTRACT Stunting is a chronic disease that occurs in toddlers due to long-term malnutrition. The condition of stunting in toddlers is caused by various things, including problems in nutrition, hygiene, health and social understanding for children. This study aims to determine the local government's stunting prevention efforts in children at the village level, Sungai Mas District, West Aceh Regency. The research method used is a descriptive survey using a qualitative approach that focuses on the phenomena and problems during the survey. The research results show that the government's efforts to prevent child stunting at the village level, Sungai Mas District, and West Aceh Regency are carried out through several stages: the prevention planning stage, program implementation, and HR competency improvement and stunting data reporting. Based on stunting prevention efforts, it was found that the implementation of stunting prevention efforts had been carried out but had not been carried out optimally according to the previously designed plan. However, there has been a decrease in data on the number of confirmed stunting children in the last three months.

Keywords: Prevention, Stunting, Village Government, Policy



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INTRODUCTION

The study of public policy will certainly target several important aspects in the life of the nation and state, both in terms of social, economic, cultural, health and so on ([Anyebe, 2022](#); [Wilson & Gowdy, 2013](#)). Experts have defined public policy by looking at the context of its application in creating a regulation related to the public interest. According to David Easton, public policy is "The authoritative allocation of values for the whole society" ([Agustino, 2020](#); [Bouding, 1968](#); [Easton, 1981](#); [Gross, 1967](#)). In addition, Thomas R Dye defines public policy as whatever government chooses to do or not to do ([Dye, 2017](#); [Goldsmith, 2016](#); [Islamy, 2004](#)). Based on this definition, it concludes that public policy is a series of actions taken or not taken by the government that is oriented toward certain goals to solve public problems or in the public interest. The policy to do something is usually stated in the provisions of laws and regulations made by the government to have a binding and coercive nature. Theoretically, it can be understood that public policy has a very complex coherence that requires a standard in measuring whether or not a public policy is born ([Banerjee et al., 2022](#); [Chu et al., 2022](#); [Pólvara & Nascimento, 2021](#)).

In connection with this, [Rahman et al., \(2021\)](#) & [Suharno, \(2013\)](#) provides standardization of public policies that must pay attention to several variables, including the objectives to be achieved from the policy, what value preferences need to be considered, resources that support the policy, the ability of factors that support the policy, the ability to actors involved in policymaking and the strategies used to achieve goals ([Houser et al., 2022](#); [Melesse et al., 2021](#)).

Based on these variables, if it is related to the context of current government policies in the health sector, the government focuses on the problem of stunting, which is increasingly volatile in all regions in Indonesia ([Marni et al., 2021](#); [Wardoyo et al., 2022](#)). Stunting is a crucial situation that government administrators must resolve because it relates to the resulting impact. Stunting usually occurs due to malnutrition (PE/micronutrients) that attack babies before and after birth. Stunting is also caused by the size of the mother's body, the nutrients consumed during pregnancy, and uneven fetal development. The target object of this stunting is children aged 0-2 years ([Ayelign & Zerfu, 2021](#); [Cao et al., 2022](#); [Hijrawati et al., 2021](#)).

Another opinion also states that unbalanced nutrition problems also cause stunting in children. This is due to insufficient long-term nutrient intake, which has the potential to stunt the child's body size. According to [Amaliah et al., \(2016\)](#), Stunting occurs when the baby is still in the womb but does not appear until the child is two years old. Growth delays can affect the health status of children. In line with this, argues that four main factors influence the occurrence of Stunting in infants, including nutrition and hygiene ([Widyastuti, 2019](#)). Health and social understanding for children. Another cause of the emergence of stunting problems is the inadequate nutritional condition of parents ([Helmyati et al., \(2019\)](#) & Supariasa (2021). Seeing this condition occurs due to several main factors, namely: Poverty. Poor socio-economic conditions. Lack of food and irregular eating habits ([Arlius et al., 2017](#); [Laraia et al., 2017](#); [Liem et al., 2019](#)).

Along with these problems, stunting must be prevented long before the baby is born. Many factors influence the prevention of stunting in children, including Good parenting, improving nutrition and sanitation, and drinking water ([Patimah, 2021](#); [Ruaida, 2018](#)). Stunting can also be prevented by applying a healthy lifestyle and parenting pattern to prospective mothers and children ([Black & Aboud, 2011](#)). Regarding prevention, the government, through regulations, has made stunting a priority in its alleviation in society. This is indeed important because the implications of stunting greatly affect the development of Indonesia's human resources, so it must be considered from birth. In a ministerial-level coordination meeting chaired by the Vice President of the Republic of Indonesia on July 12, 2017, it was decided that stunting reduction is important to carry out a multi-sectoral approach through synergistic programs, national, local and community programs at the central and regional levels.

Based on the provisions of the Village Law Number 06 of 2014 (from now on referred to as the Village Law) in article 68, paragraph 2. The community is obliged to participate in various activities in the village. High community involvement, including village officials, contributes to the success of stunting prevention efforts, which will directly impact poverty alleviation. This is carried out in synergy because poor households are more susceptible to stunting. The role and capacity of the community need to be increased in carrying out the functions of facilitation (data collection and monitoring) and advocacy (coordination, convergence and regulation) to prevent malnutrition and stunting in the village. This is to the objectives of village development by improving the community's quality of life, community welfare, and poverty alleviation. Integrated stunting prevention can fill gaps in already implemented interventions. Community participation can be

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increased to ensure nutritional intake and access to services and build shared responsibility for stunting problems in the village.

Community participation can open up the capacity building for village heads and service providers to promote the sustainability of the stunting prevention movement through strategies, village action plans, regulations and financial support and ensure that village heads are prepared to carry out concurrent monitoring of stunting one of the provinces with the most stunting cases in Aceh. Aceh is currently ranked 9th out of 20 provinces, with worrisome stunting cases reaching 12.1%. The prevalence of stunting malnutrition in Aceh Province is 22% (BAPPENAS & UNICEF, 2020). Data on the number of stunting in Aceh can be seen in Figure 1 below.

| Province | Percentage of Short and Very Short Toddlers | | | | | |
|----------------------|---|------|------|---------------------|------|------|
| | Short | | | Very Short Toddlers | | |
| | 2016 | 2017 | 2018 | 2016 | 2017 | 2018 |
| Indonesia | 18,97 | 19,8 | 19,3 | 8,57 | 9,8 | 11,5 |
| Aceh | 18,84 | 23,5 | 21,1 | 7,56 | 12,2 | 16 |
| Sumatera Utara | 15,1 | 16 | 19,2 | 9,34 | 12,5 | 13,2 |
| Sumatera Barat | 18,88 | 21,3 | 20,3 | 6,66 | 9,3 | 9,6 |
| Riau | 17,75 | 18,5 | 17,1 | 7,32 | 11,2 | 10,3 |
| Jambi | 18,5 | 16,4 | 16,8 | 8,5 | 8,8 | 13,4 |
| Sumatera Selatan | 14,58 | 14,9 | 17,2 | 4,66 | 7,9 | 14,4 |
| Bengkulu | 16,35 | 20,8 | 18,2 | 6,61 | 8,6 | 9,8 |
| Lampung | 18,19 | 21,5 | 17,7 | 6,59 | 10,1 | 9,6 |
| Kep. Bangka Belitung | 15,7 | 18 | 16,1 | 6,22 | 9,3 | 7,3 |
| Kep. Riau | 15,64 | 16,3 | 15,1 | 7,21 | 4,7 | 8,5 |
| Dki Jakarta | 13,78 | 15,5 | 11,5 | 6,28 | 7,2 | 6,1 |
| Jawa Barat | 19 | 20,8 | 19,4 | 6,13 | 8,4 | 11,7 |
| Jawa Tengah | 17,78 | 20,6 | 20,1 | 6,09 | 7,9 | 11,2 |
| Yogyakarta | 17,1 | 14,7 | 15,1 | 4,74 | 5,1 | 6,3 |
| Jawa Timur | 18,62 | 18,8 | 19,9 | 7,51 | 7,9 | 12,9 |
| Banten | 18,9 | 19 | 17 | 8,09 | 10,6 | 9,6 |
| Bali | 14,48 | 14,2 | 16,3 | 5,22 | 4,9 | 5,6 |
| Nusa Tenggara Barat | 21,66 | 26 | 24,3 | 8,31 | 11,2 | 9,2 |
| Nusa Tenggara Timur | 23,72 | 22,3 | 26,7 | 15,03 | 18 | 16 |
| Kalimantan Barat | 22,99 | 23,5 | 21,9 | 11,94 | 13 | 11,4 |
| Kalimantan Tengah | 22,91 | 23,6 | 21,3 | 11,2 | 15,4 | 12,7 |
| Kalimantan Selatan | 21,31 | 21,2 | 21,1 | 9,82 | 13 | 12 |
| Kalimantan Timur | 19,92 | 22 | 19 | 7,22 | 8,6 | 10,2 |
| Kalimantan Utara | 21,31 | 22,1 | 20,1 | 10,29 | 11,3 | 6,8 |
| Sulawesi Utara | 14,42 | 17,3 | 15,7 | 6,79 | 14,1 | 9,8 |
| Sulawesi Tengah | 21,85 | 22,1 | 20,4 | 10,19 | 14 | 11,9 |
| Sulawesi Selatan | 25,87 | 24,6 | 23,2 | 9,73 | 10,2 | 12,5 |
| Sulawesi Tenggara | 20,64 | 21,2 | 18,6 | 8,93 | 15,2 | 10,1 |
| Gorontalo | 21,5 | 20,5 | 19,8 | 11,54 | 11,2 | 12,7 |
| Sulawesi Barat | 25,02 | 25,1 | 25,4 | 14,69 | 14,9 | 16,2 |
| Maluku | 16,65 | 19,7 | 21,5 | 12,33 | 10,3 | 12,5 |
| Maluku Utara | 19,72 | 16,8 | 20,4 | 4,87 | 8,2 | 11 |
| Papua Barat | 18,83 | 19,9 | 16,1 | 11,45 | 13,4 | 11,7 |
| Papua | 16,35 | 16,9 | 17,8 | 11,64 | 15,9 | 15,3 |

Sumber : (Ditjen Bina Pembangunan Daerah Kemendagri, 2021)

Based on the table, it can be explained that the number of stunting sufferers in Aceh with short criteria reaches 23,128 people and a very short 9,889 people. The distribution of stunting cases is spread to 289 sub-districts throughout Aceh Province, divided into 6,497 Gampong. Based on an initial survey conducted at the West Aceh District Health Office, 35 areas infected with pus had the opportunity to grow stunted. The number of stunted children in Aceh Barat Regency is 12.5% , or about 510 children aged 059 months. Of the 35 stunting work areas, the highest stunting rate is found in child workers who experience stunting, with the number of children aged 059 months with stunting reaching 2% or as many as 191 children under five years of age experiencing stunting,

the second place is the stunting work area. Education for malnourished children with a stunting growth rate of 35.80%, or the equivalent of 20 children ([Dinas Kesehatan Aceh, 2021](#)).

Prevention in the village. Implementation of Village Law no. 6 of 2014 is very beneficial for the village's convergence of stunting prevention efforts. One of the advantages of implementing the village law is that the distribution of village funds is transferred to the village account directly without going through a complicated and convoluted bureaucracy. Based on *Parmenides*, Difficult Regional Development and Migration Number 16 of 2018 concerning Priorities for the Use of Village Funds in 2019 stipulates that one of the priorities of Village Funds is to accelerate Stunting Prevention in the Village. Regarding efforts to implement a convergence policy on stunting prevention in villages, guidelines are needed for community empowerment activists and development actors in rural communities to improve the quality of village development and use village funds that are useful for accelerating stunting. The tangible manifestation of the convergence of stunting prevention efforts is the Ministry of Villages, Development of Poor Regions and Migration, which facilitates the Human Development Framework (KPM) training. Village community assistants and KPM assist village officials and village communities in preventing stunting in the village.

Based on the data obtained in the field, it shows that in the study area, three under-fives suffer from stunting with a weight between -0.32 to -1.05, height -3.07-5.56 and weight/TB between 0.32 to 3.24. Simultaneously with the stunting prevention effort, the Sungai Mas sub-district government has attempted to take various actions, including outreach to the public regarding the understanding of stunting and efforts to procure stunting funds allocated by the local village government. However, this effort is considered ineffective because the stunting rate in the village is still high and has not decreased. The socialization that was carried out was also not fully maximized, evidenced by the author's initial interviews with several Gampong communities, including the keuchik and several mothers who had stunted children. From the interview results, the author got information that there are still many people who do not know what stunting is and the dangers of stunting for children. This creates contradictory conditions with presidential regulation number 72 of 2021 Article 8 paragraph (3) letter b access to information and services through outreach activities evenly to the community. Based on this description, the researcher is interested in researching "Analysis of Stunting Prevention Efforts at the Village Level, Sungai Mas District, West Aceh Regency" to be able to solve problems and be able to present solutions to these problems so that they can be useful for the authors, the community and relevant government stakeholders.

METHOD

The method that the researcher uses in this research is qualitative. Researchers use a qualitative approach to find accurate data through in-depth observations of research subjects or those related to the problems studied ([Choy, \(2014\)](#) & [Ishak \(2015\)](#)). The data analysis technique that the researcher uses is through data collection (data collection), data reduction (data reduction), data presentation (data display) and drawing conclusions (concluding drawings) ([Alhojailan & Ibrahim, 2012](#)). The data collection technique used is observation, interviews and documentation ([Kolb, 2012](#)). The informants interviewed in this study were those who had information in the research area. In this study, the number of informants used was four informants, namely 4 Keuchik namely, Keuchik Gampong Geudong, Keuchik Gampong Geudong Sarah Perlak, Keuchik Gampong Geudong Tutut, and Keuchik Gampong Geudong Tungkop.

RESULT AND DISCUSSION

Strengthening Planning and Budgeting

Planning is a crucial factor in the success of policy prevention efforts, one of which is stunting prevention. In stunting prevention efforts, the government has formulated various prevention planning frameworks. One of them is planning a social campaign program through stunting socialization in the villages of the Sungai Mas sub-district. The socialization stage will involve relevant stakeholders, including Puskesmas, Health Office, sub-district government, and village government. Another plan formulated is the implementation of stunting prevention efforts through the "Kitchen Nutrition" program. This program will collaborate between village stunting officers and posyandu officers at the village level. Budget planning is also formulated to successfully implement stunting prevention, where the planned budget allocation is sourced from the Village Revenue and Expenditure Budget (APBDes). The final plan is to report stunting data after the stunting prevention program for every village in Sungai Mas District.

Improving the Quality of Implementation

According to [Abidin \(2014\)](#), the success or failure of implementation can be seen from the execution factor of program implementation in continuing/operating previously designed programs. [Abidin \(2014\)](#) explanation explains that the suitability of implementation and planning is a major factor in the success or failure of implementation. If the implementation is by the plan, the implementation will be successful and vice versa. Sungai Mas Sub-district itself has several planning programs that have been designed, one of which is through the Village RPM. One of the points of the RPJM is the allocation of qualified human resources in stunting alleviation, the nutrition kitchen program and socialization of the importance of preventing stunting from an early age by the community.

As for Sungai Mas Sub-district, one health cadre is assigned to deal with stunting where the scope of work is in 8 posyandu points. However, this matter is still under consideration by the sub-district and village governments for the addition of cadres which will later be distributed at certain points. This is still under the study of the respective village governments. To handle stunting babies for every baby born in Sungai Mas Subdistrict, there will be continuous examination and evaluation through routine activities at the posyandu. But on the other hand, some obstacles occur in the effort to prevent stunting, namely the level of awareness of parents to bring their babies to Posyandu. Based on interviews with several keuchik in villages in Sungai Mas District, including the Keuchik of Sarah Perlak Village, Wazan MD, he said that "We have carried out various programs to prevent stunting in the village. We have budgeted for the Posyandu sub-sector, providing additional and nutritious food for children and we always make outreach with the village community through village posyandu cadres. However, there are still mothers who are lazy to take their children to the posyandu due to various personal reasons." (Results of the interview, 16 November 2021).

Efforts to prevent stunting are carried out through fulfilling nutrition in Sungai Mas District by running the Nutrition Kitchen program. The Kitchen Gzi Program is an effort to improve nutrition for pregnant women, babies, and toddlers, which is carried out once a week, but this program has not run optimally due to the impact of the Covid-19 pandemic. The form of nutritional fulfillment is done by providing additional food in fruits and vegetables. This

information was obtained through direct interviews in the field with the Keuchik Geudoeng, namely Mr. Hasan Juhari. He said: "There are several programs that we have run to reduce the stunting rate in our village, including the nutrition kitchen program, but the program has not been realized optimally because of the COVID-19 pandemic. 19. However, we are still running this program through our posyandu cadres by implementing strict health protocols, and we also divide the feeding twice for pregnant women, infants and toddlers. We do this to not cause a crowd at the Nutrition Kitchen location." (Results of the interview, 17 November 2021).

The implementation of other efforts made by the local government is by intensifying the socialization of stunting prevention for the Sungai Mas community. In its implementation, on average, the Mas River area villages have carried out socialization both by elements of the local Puskesmas and from village stunting cadres and posyandu cadres. This is evidenced by interviews that researchers conducted with several informants. Among them is Keuchik Tutut, namely Naftali. B said: "There are several programs that have been mandated for us so far, some we have run and some we haven't, currently only socialization programs and additional food for toddlers that we have run (Interview results, 18 November 2021). Then, on the other hand the researcher also conducted interviews with several village communities in the research area, one of which was the Sarah Perlak Village community, who said that: "If there is a stunting socialization problem, it will be done. (Results of the interview, 16 November 2021). The same thing was also expressed by the people of Gedung Village, who said that "If there is a stunting problem, there are brothers and sisters who hear and posyandu cadres also often do stunting socialization.". (Results of the interview, 17 November 2021).

Based on the interviews above, it can be concluded that the Sungai Mas government has made efforts to implement stunting prevention actions through various activities, one of which is the socialization activity related to stunting handling that the government has carried out. However, the government's efforts to promote a healthy lifestyle with balanced nutrition have not been maximized. Efforts to increase parental awareness also need to be increased. Posyandu officers also need to carry out routine monitoring of the nutritional supply of children under five to prevent stunting. This activity hopes that public health, especially babies in Sungai Mas District, will continue to be maintained. Later, there will be no additional stunting cases in this village. This is to the [Kementerian Kesehatan Republik Indonesia, \(2018\)](#) regulation, which states that stunting prevention is influenced by three important and fundamental things: good parenting, improved diet, and improved sanitation and drinking water.

Human Resources Competency Improvement

An organization needs human resources to solve its problems [Lengnick-Hall et al.,\(2011\)](#). The availability of competent and adequate human resources is also one of the keys to the success of the stunting prevention program. In this prevention effort, the Sungai Mas government has taken various actions to improve the competence of health practitioners, one of which is by organizing training programs and empowering rural communities in solving health problems, especially stunting. This is evidenced by the efforts of the village government in providing increased knowledge, skills and awareness of mothers and family members in fostering the growth and development of toddlers education on child growth and development care and education on healthy and prosperous family parenting.

Information on the implementation of HR competency development the researchers got from the results of direct interviews with related informants, including interviews with Keuchik Geudoeng, namely Hasan Juhari, who said that "We always intensify resources as health practitioners, both

knowledge about child growth and development, knowledge of growth and development care toddlers and so on, on the other hand we also have stunting cadres, posyandu cadres, among the cadres we use, currently quite good and according to standards." (Results of the interview, 16 November 2021). Based on the results of these interviews, it can be concluded that in handling stunting cases, the government has provided qualified human resources by the standards set by the government.

Stunting Data Reporting

After implementing stunting prevention efforts, it is necessary to report data on the results of stunting prevention efforts. This report serves as a benchmark for the success of the program implementation in every village in Sungai Mas District. Based on information obtained from the Nutrition Officer of Sungai Mas Sub-district, Mrs. Ola stated that each village's stunting data reporting process was carried out once a month. Based on the report on stunting data that researchers obtained from the Nutrition Officer of Sungai Mas Subdistrict, there was a decrease in the amount of stunting data in the last three months; namely, in July, there were five children indicated for stunting, namely from Sarah Perlak as many as three children, and from Tutut Village as many as two people. . In August, the number of stunting data was still the same as the data in July. Namely, five children were indicated to be stunted. Meanwhile, four children decreased the number of confirmed stunting in September, including two children from Sarah Perak Village and two other children from Tutut Village. Based on the reporting results obtained, there is a decrease in the number of children confirmed to be stunting, although the number of these decreases is not significant.

CONCLUSION

The government's efforts to prevent child stunting at the village level, Sungai Mas Sub-district, and West Aceh Regency are carried out through several stages, namely: the prevention planning stage, program implementation, and HR competency improvement and stunting data reporting. Based on stunting prevention efforts, it was found that the implementation of stunting prevention efforts had been carried out but had not been carried out optimally according to the previously designed plan. However, there has been a decrease in data on the number of confirmed stunting children in the last three months.

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