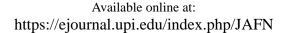


JOURNAL OF APPLIED FOOD AND NUTRITION

Volume 1 Nomor 2, December 2020, 67-72





Stunting in Indonesia: Why is it Increasing?

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ABSTRACTS

The incidence of stunting in Indonesia has increased by 2.1% according to data presented by Basic Health Research in 2018 with a total percentage of 27.5% in 2016 and increased to 29.6% in 2017. This study is a descriptive study with a systematic review method. . Seeing the causes and prevalence of stunting as well as government and community efforts in tackling stunting is the goal of this study. The results showed that stunting cases in 2018 increased by 2.1% to 29.6%. Stunting in Indonesia is mostly caused by difficulty in accessing nutritious food, lack of exclusive breastfeeding, low birth weight (LBW) and low education level and parental income. The government has made various efforts such as intervention in various sectors, however, the incidence of stunting is still quite high. Thus, to tackle the incidence of stunting, collaboration with the community is needed to be more concerned and aware of knowledge related to balanced nutrition, especially for pregnant women, maternity mothers, toddlers and children.

ARTICLE INFO

Article History:

Received August 2020 Revised October 2020 Accepted November 2020 Available online December 2020

Keywords:

Stunting; Indonesia; Case Improvement; Stunting Prevalence.

1. Introduction

Stunting is a chronic nutritional problem in toddlers which is characterized by a shorter height compared to their age where children with stunting are at higher risk of degenerative diseases and affect the level of intelligence of children³. The United Nations International Children's Emergency Fund (UNICEF) estimates that in 2020 the number of stunted children under the age of five is 149.2 million and the highest stunting cases are in South Asia, West Africa and Central Africa⁴. In Indonesia alone, stunting cases increased by 2.1% according to data presented by Basic Health Research in 2018 with a total percentage of 27.5% in 2016 and increased to 29.6% in 2017⁵. World Health Organization (WHO) data) in 2018 also shows that Indonesia is one of the countries with the third highest stunting rate in Southeast Asia, amounting to 36.4% of the under-five population in Indonesia⁴.

Stunting cases that continue to increase in Indonesia have made the Government of Indonesia take action to prevent and reduce the prevalence of stunting cases by intervening in 2018 to 100 districts in 34 provinces as priority locations for stunting reduction, of course these locations will continue to increase from year to year⁴. These intervention activities are carried out in various sectors, namely the health sector, agriculture and food security, marine and fisheries, family planning, education and so on⁶. In the health sector itself, there are many intervention activities that focus on pregnant women, mothers in labor and children as a form of stunting prevention⁶. However, the increasing incidence of stunting in 2018 needs to be reviewed so that more appropriate countermeasures can be evaluated to reduce its prevalence.

2. Materials and Methods

This research is a descriptive study with a systematic review method. Systematic reviews or meta-analyses critically appraise and formally synthesize the best existing evidence to provide a statement of conclusion that answers specific clinical question¹. Bettany-Saltikov and Mcsherry (2016) suggest that a systematic review is a summary of scientific sources focused on one question². In this study, researchers focused on questions related to the incidence of stunting in Indonesia which continues to increase from year to year. Thus, the researchers searched for articles with the keywords 'stunting in Indonesia', 'factors that influence the incidence of stunting in Indonesia', and 'prevalence of stunting in Indonesia'. In the search, found 7 articles from the keyword 'stunting in Indonesia', and 5 articles from the keyword 'prevalence of stunting in Indonesia'. The researcher analyzed and made a review of all the articles that had been found so that the results and conclusions were obtained.

3. Results and Discussion

3.1. Stunting in Childrens

In 2019 stunting reduction interventions in Indonesia will be planned and implemented in 160 regencies/cities in 2020-2024 as part of the Government Work Plan⁶. Presidential Decree no. 42/2013 has established the National Movement for the First Thousand Days of Life in an effort to improve the nutritional status of children under five, which is followed by program development including the budget because stunting has a long risk of non-communicable disease in adulthood, although it can still be corrected at an early age⁷. In addition, the incidence of stunting is also associated with increased risk of morbidity, death, and obstacles to

the motor and mental growth⁸. A study in 2013 stated that if the incidence of stunting in Indonesia was not handled properly and completely, then the average economic potential losses in 32 provinces in Indonesia was around Rp 96 billion-Rp 430 billion (0.15-0.67%) of the GRDP average of the provinces in Indonesia¹². The total cost for economic potential losses due to low productivity stunting in toddlers in Indonesia was around Rp. 3.057 billion-Rp. 13.758 billion (0.04-0.16%) of the total GDP of Indonesia¹². The high losses require the government and the community to work together in tackling stunting.

Stunting affects cognitive development and learning achievement in children where there is a disturbance in the maturation process of brain neurons and changes in brain structure and function that can cause permanent damage to cognitive development¹³. This condition causes the child's thinking and learning abilities to be disrupted and ultimately reduces the level of attendance and learning achievement¹³.

3.2. Factors Causing Stunting

The incidence of stunting begins with the non-fulfillment of good nutrition over a long period of time and is often not realized by the parents, so that after the child is over 2 years old, it can be seen that the child is stunted ¹⁴. Fitri (2018) in her research stated that babies born with low body weight (LBW) and not being given exclusive breastfeeding (ASI) in the first 6 months after birth had a risk of experiencing stunting ⁹. Other factors that influence stunting include the level of energy intake, history of duration of infectious disease, number of families, birth weight, maternal education level and family income ^{11, 16, 20}. Indonesia is a developing country with 24.79 million poor people in September 2019 or approximately 10% of the total Indonesian citizens ¹⁷. A study found that children with low family economic status were 4.13 times more likely to experience stunting ¹⁸. So it can be concluded that the poverty factor plays an active role in contributing to the prevalence of stunting in Indonesia.

One of the interventions carried out by the government includes healthy and clean living behavior (PHBS) which in fact is a response to other factors that cause stunting, namely water sanitation⁶. The results of a study of 21 articles show that water factors (inadequate drinking water sources, drinking water treatment), sanitation factors (use of toilet facilities, open defecation behavior, disposal of toddler feces not in latrines) are associated with stunting in children under five in Indonesia²¹. Maternal habits in washing hands that are not good also contribute 0.12 times the risk of stunting for toddlers ²².

3.3. Prevention of Stunting in Indonesia

Efforts to reduce nutritional problems that are handled cross-sectorally have the main target, namely, mothers and prospective brides who are equipped with knowledge related to exclusive breastfeeding for mothers in labor and optimal complementary foods for breast milk (MPASI)⁹. The government has made efforts to make various interventions in all sectors. In the health sector, there are interventions such as fostering stunting prevention, strengthening supplementation interventions for pregnant women and toddlers, providing additional food for malnourished toddlers and so on6. In the education sector, interventions such as parenting classes are carried out as an effort to overcome stunting⁶. A study suggests that the role of this parenting class can significantly help increase mother's knowledge in tackling stunting²³. But in fact, evidenced by the increase in stunting cases in 2018 stated that the response was still uneven and public awareness and cooperation were needed in assisting the program⁵. The city of Blitar carries out stunting prevention by providing recommendations for health workers

UPTD Health Sukorejo District conducting counseling about nutrition-aware families and providing additional food for 3 months for toddlers with low energy and protein intake and collaborating with the Blitar city education office in socializing 12 year compulsory education¹⁹. Midwives and posyandu with health cadres are important spearheads for stunting reduction in programs implemented by the government²⁴.

There is still a need for massive socialization related to stunting, the impact, the urgency of overcoming it, and efforts to overcome stunting at the grassroots level, as a form of individual preventive efforts without relying on government programs, because stunting is an urgent problem that must be addressed by all parties immediately without waiting for anything ¹⁰. The community is advised to get quality education, provide a balanced nutritional intake and improve the health status of children and the development of EST (Eco Support Theory) in order to reduce stunting in Indonesia ¹¹. A study revealed that Indonesia still has many tasks in tackling stunting such as providing adequate energy intake to infants and toddlers, providing good nutrition to pregnant women, increasing mother's knowledge, opening up wide employment opportunities, providing counseling about parenting and utilizing the yard. as a vegetable garden ¹⁵.

4. Conclusions

Stunting in Indonesia is mostly caused by difficulty in accessing nutritious food, lack of exclusive breastfeeding, low birth weight (LBW) and low levels of education and parental income. The government has made various efforts such as intervention in various sectors with the help of midwives, posyandu and health cadres, however, the incidence of stunting is still quite high in some areas in Indonesia. Thus, to tackle the incidence of stunting, it is necessary to have the role of the community in stunting prevention so that they are more concerned and aware of knowledge related to balanced nutrition, especially for pregnant women, maternity mothers, toddlers and children and are not always too dependent on government programs.

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