



Stunting prevention efforts through integrative socialization and counseling programs in Karangwangi Village Cianjur Regency

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ABSTRACT

In 2016, stunting caused 2.2 million child deaths worldwide. Indonesia ranks 115 out of 151 countries with the highest stunting prevalence globally in 2022. In the West Java region, especially in Cianjur Regency, the stunting rate has decreased from 33.7 percent in 2021 to 13.6 percent in 2022. In Karangwangi Village, Ciranjang District, in 2023, 6 children were found who were indicated to be stunted. Various factors, both direct and indirect factors cause stunting cases. One of the main factors that prevent stunting is the role of a mother. So this service program is realized in the form of stunting socialization which aims to increase awareness of mothers in Karangwangi Village about stunting and clean and healthy living behavior for children as an effort to help realize the creation of individuals with a clean and healthy environment. Both of these programs have been held at Posyandu, PAUD, and also elementary schools located in Karangwangi Village.

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ABSTRAK

Pada tahun 2016 kasus stunting menyebabkan 2,2 juta kematian anak diseluruh dunia. Indonesia sendiri menempati peringkat 115 dari 151 negara dengan angka prevalensi stunting tertinggi secara global di tahun 2022. Di wilayah Jawa Barat khususnya di Kabupaten Cianjur, angka stunting mengalami penurunan dari 33,7 persen pada tahun 2021 menjadi 13,6 persen pada tahun 2022. Di Desa Karangwangi, Kecamatan Ciranjang, pada tahun 2023 ditemukan 6 anak yang terindikasi stunting. Kasus stunting disebabkan oleh berbagai faktor, baik faktor langsung maupun faktor tidak langsung. Salah satu faktor utama untuk mencegah terjadinya stunting yakni peran seorang ibu. Maka dari itu, program pengabdian ini diwujudkan dalam bentuk sosialisasi stunting yang bertujuan untuk meningkatkan kesadaran para ibu di Desa Karangwangi mengenai stunting dan perilaku hidup bersih dan sehat bagi anak-anak sebagai upaya membantu mewujudkan terciptanya individu dengan lingkungan yang bersih dan sehat. Kedua program ini telah dilaksanakan di Posyandu, PAUD, dan juga sekolah dasar yang berlokasi di Desa Karangwangi.

Kata Kunci: pola hidup bersih dan sehat, gizi, penyuluhan stunting

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INTRODUCTION

Good nutrition is one aspect of achieving optimal growth and development in children. The availability of adequate and balanced nutrition is vital during the golden period of child growth and development. The golden period starts when the child is in the womb and continues until age two. Even children under five have nutritional needs that should be a priority for mothers (Uce, 2018). Nutritional deficiencies during the golden period can lead to various issues, including stunting (Teja, 2019). Stunting is a disorder of child growth and development due to chronic malnutrition and recurrent infections. The child's height is below the standard child age growth curve based on Presidential Regulation No. 72 of 2021 concerning the Acceleration of Stunting Reduction.

The risk of stunting begins to occur from the lack of maternal understanding of nutritional intake before, during, and after childbirth, lack of exclusive breastfeeding, and MP ASI for children (Wati *et al.*, 2021). Child stunting is still a health problem that must be watched out for in Indonesia. This case is associated with an increased risk of disease, death, and obstacles to physical, motor, and cognitive growth (Ruswati *et al.*, 2021). The factors that cause stunting are grouped into two, namely, direct factors and indirect factors (Qodrina & Sinuraya, 2021). Direct factors that cause stunting are dominated by the diversity of food intake, infections suffered by children, breastfeeding duration, age, and gender. Meanwhile, poor sanitation, a lack of education about nutritional intake and parenting, inadequate awareness of environmental hygiene, limited information and understanding about stunting, and insufficient health services are indirect causative factors of stunting (Qodrina & Sinuraya, 2021; Verawati *et al.*, 2021).

Efforts to address the problem of stunting are included in the World Health Assembly (WHA) target, which is to reduce the prevalence of stunting by 40% by 2025 (Khoiriyah *et al.*, 2021). Additionally, the Sustainable Development Goals (SDGs) aim to eliminate all forms of malnutrition by 2030. Based on the World Health Organization (WHO) report in 2016, it was found that 22.9% of children worldwide experienced problems with child growth and development (stunting). In addition, WHO stated that in 2016, malnutrition in stunted children caused 2.2 million child deaths worldwide. Based on WHO data in 2016, it was revealed that in the Southeast Asia region, 33.8% of children were affected by stunting. In 2022, Indonesia ranked 115 out of 151 countries with the highest stunting prevalence globally. According to the 2022 Indonesian Nutrition Status Survey (SSGI) results, the prevalence of stunting in Indonesia reached 21.6%. Meanwhile, data on the prevalence of stunted children in West Java in 2022 was 20.2%. Meanwhile, in Cianjur Regency, the stunting rate has decreased from 33.7% in 2021 to 13.6% in 2022. In Ciranjang Subdistrict, particularly in Karangwangi Village, it is known that six children were identified as stunted in 2023.

Cases of stunted children found in Karangwangi Village, Ciranjang Subdistrict, Cianjur Regency are caused by direct and indirect factors. Karangwangi Village officials have implemented several measures to prevent and reduce the prevalence of stunting, including supporting the posyandu organization, promoting Supplementary Feeding (PMT), and monitoring children's growth and development. The role of health workers (midwives, cadres, etc.) is to convey information and motivate others. The participation of families and schools also plays a vital role in supporting efforts to address problems related to nutritional intake, parenting patterns, healthy lifestyles, sanitation, and environmental hygiene. However, maternal parenting and feeding patterns contribute significantly to the occurrence of stunting (Wibowo *et al.*, 2023). These contributions manifest in pregnant women who do not consume nutritious food, infants who do not receive enough exclusive breastfeeding and nutritionally balanced complementary foods, and maintaining a clean and healthy lifestyle in children (Sasmita, 2021).

To date, numerous efforts have been made by the government to reduce the high prevalence of stunted growth rates. Starting with the issuance of new policies, programs, and advertisements about stunting, as well as the introduction of stunting awareness, and many more initiatives. This is, of course, applied thoroughly on a national scale. Unfortunately, the government's efforts to prevent and reduce stunting rates are still reported to be uneven. Due to various obstacles, various policies governing efforts to accelerate stunting reduction are still not implemented correctly and evenly at the regional level (Saputri & Tumangger, 2019). In addition to the serious efforts made by the government, educational initiatives are also carried out by academics in universities across various regions to educate pregnant women and parents about the introduction and prevention of stunting (Pebriandi et al., 2023; Iballa et al., 2023).

Therefore, the KKN team assigned to Karangwangi Village, Cianjur Regency, also implemented a socialization program for the Karangwangi Village community, to increase knowledge about nutrition for children, neonatal health for pregnant and postpartum women, stunting prevention, education on clean and healthy lifestyles, and increasing awareness of the long-term effects of stunting.

Literature Review

Stunting

Stunting is a condition resulting from inadequate nutritional intake in children from the fetal stage and has a higher potential for stunting during the first thousand days of life, which can disrupt child growth (Putra & Sadiyyah, 2023). In addition to affecting physical conditions, stunting also impacts children's cognitive abilities. They are at higher risk of non-communicable diseases, resulting in a lower quality of life than others. However, stunting can be prevented early on. Stunting can be prevented through three stages, including primary, secondary, and tertiary prevention (Nadila & Herdiani, 2022).

1. Primary prevention: This stage of prevention involves conducting nutritional interventions for pregnant women. Specifically, this nutritional intervention is divided into three periods, starting from pregnancy as the first target, by providing supplementary feeding (PMT) to prevent iodine, iron, folic acid, and protein-energy deficiency, as well as chronic energy deficiency. The second target is breastfeeding mothers (0-23 months), in the form of health promotion and encouragement to provide Early Breastfeeding Initiation, called IMD. The third target is breastfeeding mothers (24-59 months), as an effort to encourage them to continue breastfeeding and provide quality complementary foods.
2. Secondary prevention: At this stage, prevention is carried out by improving the quality of life of adolescent girls through increased reproductive health education, education on adolescent nutritional needs, and peer counselors to discuss adolescent development.
3. Tertiary prevention: At this stage, prevention is carried out through empowering the closest people, such as social interventions that mobilize community leaders to promote family planning and health interventions. This includes scheduling pregnancy discussions with husbands and families, providing contraceptives, and offering pre-marital counseling for prospective brides.

METHODS

The service method in the form of implementing socialization and counseling consists of four series of activities, including:

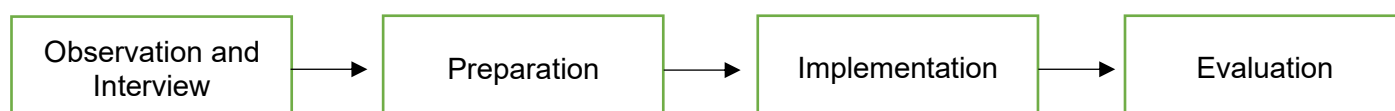


Figure 1. Socialization implementation flow

Source: Community Service 2023

The four series of activities in Figure 1 are explained as follows: 1) observation and interviews conducted with Karangwangi Village officials to find out the actual condition of village public health related to stunting; 2) preparation, coordination, licensing, and provision of logistics for socialization activities. This stage involved external parties: Posyandu cadres, Al-Mubarak Foundation PAUD, and the Principal of SDN Karangwari. As for the internal students, this preparation stage was used to compile socialization materials, educational media, and division of team job desks; 3) implementation, socialization activities coincide with the implementation of routine posyandu. Then, continued with the delivery of material about "Isi Piringku," demonstration of the "Dapur Sehat Atasi Stunting (DASHAT)," and delivery of material about a Clean and Healthy Lifestyle named PHBS; and 4) evaluation, the indicator of the success of this socialization program is the positive response and enthusiasm of parents towards the material that has been provided.

RESULTS AND DISCUSSION

Results

Urgency of Stunting Socialization and Implementation

The high number of stunting cases that occur in toddlers in Indonesia encourages the government to make various efforts so that stunting cases can decrease. According to the National Team for the Acceleration of Poverty Reduction, known as TNP2K (2018), the government has successfully reduced the prevalence rate of stunting in Indonesia from 37.2% to 30.8% within a five-year period (2013-2018). In the same period, the prevalence rate of underweight also decreased, from 32.8% to 29.9%. However, Satriawan, from the National Team for the Acceleration of Poverty Reduction (TNP2K), stated that these figures are still far from the target set by the Indonesian government. This has led the government, especially BKKBN, the institution responsible for this case, to collaborate with universities as stakeholders to raise awareness about stunting at every level of society, particularly among people living in areas far from the reach of the central government.

One form of program for this collaboration is the "KKN Tematik" program with the theme "SiPenting," an acronym for Students Care for Stunting. Through this program, the KKN group with the SiPenting theme from Universitas Pendidikan Indonesia, which was placed in Karangwangi Village, Ciranjang District, Cianjur Regency, conducted a work program related to stunting. In the case of six children who were indicated to be stunted (not yet positive) in the village, the work program designed was aimed at integrative socialization and counseling for the community. Socialization about stunting is only given to specific community groups. Among them are pregnant women, mothers of toddlers, and mothers who plan to have children. This is done so mothers can implement stunting prevention as important role holders in the child's growth and development process. Therefore, the places the KKN Tematik Group chose with this important Theme are Posyandu and PAUD.

Posyandu, or Integrated Service Post, was chosen to host the socialization activities because It is a place where pregnant women and mothers of toddlers often attend simultaneously. It is hoped that pregnant women can apply the information from socialization activities to improve and increase the quality of nutrition for the fetus. This is important because stunting can be prevented as early as possible, even before the child is born (Puspita et al., 2022; Sari, 2021). For mothers of toddlers, this socialization is expected to increase their awareness and sensitivity, enabling them to continuously monitor their children's growth and development through measurements such as height, weight, head circumference, and the child's ability, all in accordance with their age. Thus, stunting cases in Karangwangi Village can be reduced by monitoring the child's growth and development index.

Unlike Posyandu, PAUD Al-Mubarak, located in Karangwangi Village, was chosen to hold a socialization session about stunting because it provides an opportunity for KKN students to meet directly with the parents of early childhood children. This is done so that every parent with an early childhood child begins to realize that there are important things to pay attention to in their children, including nutrition. Using a lecture system, KKN students as speakers also provide brochures containing discussion materials to each activity participant. The discussion of the material given to the activity participants is as follows.

Definition and Characteristics of Stunting

The definition of stunting stated in the brochure is the definition of stunting stated in Presidential Decree No. 72 Tahun 2021, which states, "Stunting is a disorder of growth and development in children due to chronic malnutrition and repeated infections, which is characterized by their length or height being below the standard set by the minister who organizes government affairs in the Health sector." In addition, the brochure also includes several general characteristics of children who are indicated as stunted. These characteristics include the following (Marni dan Ratnasari, 2021):

1. susceptible to infectious diseases
2. Signs of late puberty
3. Face looks younger than age
4. low weight for children of the same age
5. indicated to have delayed growth
6. has poor performance on attention and memory tests
7. delayed bone growth: Children become quite
8. difficulty making eye contact.

Including some of these general characteristics is expected to increase public awareness of monitoring a child's growth and development. If parents notice any indications in a child, they can immediately take action and convey the information to the local village authorities.

Based on information provided by the BKKBN, the causes of stunting are summarized in the brochure into three parts. The first part is when a child is still in the mother's womb (Izar *et al.*, 2020; Ulfa, 2021). Three causes of stunting in this phase include a lack of information and understanding of stunting during preconception, pregnancy, and breastfeeding, genetic factors from both parents, and inadequate nutritional intake during pregnancy (Ali, 2021; Siswati *et al.*, 2020). In the next section, the causes of stunting in the following phase can occur when a child is in the first 1000 days of his life. The causes of stunting in this phase include inadequate provision of complementary foods, disease or infection, inadequate nutritional intake in the child's first 1000 days, and inadequate vitamin consumption.

Finally, this third section mentions several causes of stunting that adults can directly or indirectly contribute to. Among these are poor parenting patterns, inadequate sanitation conditions, and a lack of awareness about maintaining environmental cleanliness, as well as environmental factors (social and economic) that do not support nutritional fulfillment.

Impact of Stunting

The following information about stunting, included in the brochure, outlines the impact of stunting. The impacts of stunting are categorized into short-term and long-term effects (Archda & Tumangger, 2019). The impacts of this socialization are being introduced to increase public awareness and encourage them to prevent stunting cases. The impact of this stunting case is quite profound and dangerous for the health and welfare of the child. Additionally, the Directorate General of Health Services stated that the economic

impact of stunting could result in annual losses of 2-3% of GDP (Nadila & Herdiani, 2022). Some of the impacts described are short-term impacts, namely 1) Metabolic disorders in the body, 2) Disruption of brain development and intelligence, and 3) Impaired physical growth. Meanwhile, the long-term impacts are such as 1) High risk of diabetes; 2) Possible cancer and stroke; 3) Obesity; 4) Heart and blood vessel disease; 5) Decreased immunity so that it is easy to get sick; 6) Decreased cognitive abilities and learning achievement; and 7) Disability in old age (Yadika *et al.*, 2019).

Stunting Prevention

After learning about the detrimental impacts of stunting, each participant in the activity was also provided with information on how to prevent stunting. This is, of course, done by the primary objective of this program, which is to prevent stunting. Some of the methods listed in the brochure that have been designed include 1) Meeting nutritional needs since pregnancy; 2) Continuously monitoring child growth and development; 3) Providing exclusive breastfeeding until the baby is 6 months old; 4) Accompanying exclusive breastfeeding with healthy MP-ASI; 5) Implementing a clean and healthy environment and lifestyle; 6) Monitoring toddler growth at the nearest integrated health post; and 7) Providing complete basic immunization and vitamin A.

After knowing the indications and causes, if there are children who are indicated as stunting, parents (who can be accompanied by the authorities) can take action to handle the indicated children with specific interventions and sensitive interventions. As reported from the Prevent Stunting Itu Penting website (see: <https://ayosehat.kemkes.go.id/cegah-stunting-itu-penting>), specific interventions are defined as interventions that focus on the health sector. There are nine points consisting of specific interventions, including the Provision of Additional Food (PMT) for pregnant women and thin toddlers, the provision of Iron Tablets (TTD) for adolescents, pregnant women, and women of childbearing age (WUS), breastfeeding promotion and counseling, promotion and counseling for infant and child feeding (PMBA), management of malnutrition, monitoring of promotion and growth, micronutrient supplementation, pregnancy check-ups and immunizations, and integrated management of sick toddlers. At the same time, sensitive intervention actions are non-health-handling actions. Sensitive interventions are divided into four types of handling focuses, including providing drinking water and sanitation, nutrition and health services, increasing awareness of care and nutrition, and increasing access to nutritious food.

Dapur Sehat Atasi Stunting (DASHAT)

In addition to presenting the information above, the brochure also includes recommendations for a Healthy Kitchen Overcomes Stunting food menu, called DASHAT. This is a real example of the main objective of the BKKBN institution: to prevent stunting by introducing each family to a healthy, delicious, and nutritious food menu made from affordable, local ingredients. In addition to the DASHAT food menu recommendations for one day, consisting of breakfast, lunch, and dinner, the brochure also contains various other DASHAT menus listed via QR Code. The use of QR codes in the brochure was chosen because smartphone use is currently quite widespread in various regions. This is also proven by the large number of people who use gadgets as participants in socialization in Karangwangi Village. At the end of the activity, each participant is given information on how to access the menu via a smartphone QR code.

Discussions

Based on one type of *stunting* treatment called nutrition-sensitive intervention, several points cover the indirect causes of *stunting*. One of these points emphasizes the importance of addressing sanitation needs, as poor sanitation makes children vulnerable to diseases such as intestinal worms and diarrhea, which in turn compromise their nutritional status (Qodrina & Sinuraya, 2021). According to the website Cegah Stunting itu Penting (see: <https://ayosehat.kemkes.go.id/cegah-stunting-itu-penting>), one aspect of sanitation needs is the implementation of clean and healthy living behaviors known as PHBS. Additionally, through its official website, the Indonesian Ministry of Health states that PHBS is the first step toward improving public health quality (Nurhayati *et al.*, 2020). PHBS is a behavior performed by an individual to maintain cleanliness and health and adopt healthy habits (Husna & Marcellia, 2019). According to the Ministry of Health, PHBS is a health-related behavior performed out of personal awareness. It enables families and all their members to take care of their health and actively participate in community activities. In short, PHBS is defined as behavior related to hygiene and plays a role in improving a person's health quality.

For PHBS to be implemented evenly across all communities, it is necessary to educate the entire community. Several efforts to disseminate this education include approaches by local leaders, individuals with expertise in the field (such as doctors and midwives), community empowerment, and others. According to the Ministry of Health's website, PHBS has five differentiated levels based on the environment in which a person lives (Asrina *et al.*, 2022). The five levels of PHBS include PHBS in the household, PHBS in schools, PHBS in the workplace, PHBS in health facilities, and PHBS in public places. With the implementation of socialization on *stunting* that includes discussions on PHBS and is aimed at parents at the household level, the next step is to provide PHBS education to children. Children are included in the school's PHBS framework, as outlined by Burhan *et al.* (2022). In addition to focusing on health objectives, implementing PHBS in schools can also improve educational objectives (Aminah *et al.*, 2021). Thus, PHBS in schools plays a role that is just as important as PHBS in households and other environments.

The UPI Thematic Community Service Program group stationed in Karangwangi Village conducted an educational session on PHBS at SDN Karangsari to realize this program. The PHBS education was delivered through a lecture, accompanied by additional media, such as slides. Through this activity, each child was constantly reminded to maintain cleanliness, starting with small details such as nails, hair, teeth, ears, and other body parts. To ensure that all participants followed the event enthusiastically, worksheets containing puzzles related to the material were distributed during the session. Additionally, rewards were given to students who could answer the quiz at the end of the presentation.

Through the implementation of this activity, it was found that several children already possessed a basic understanding of PHBS. According to the WHO, one of the 6-step handwashing methods (Suprpto *et al.*, 2020). In addition, several children were found to have good hygiene standards, including clean and neat nails, healthy teeth and gums, and clean clothes. In addition to being provided with information about hygiene as an external support for health, they were also introduced to "Isi Piringku" (My Plate). According to the Ministry of Health's website, "Isi Piringku" is a guideline developed by the Ministry of Health to promote balanced nutrition through food consumption guidelines. Half of the plate should be filled with vegetables and fruits in each meal, while the other half should be filled with staple foods and side dishes (Darni & Wahyuningsih, 2023). This ensures that efforts to improve health also come from within the body. Information about balanced nutrition is crucial for introducing to the public to prevent the occurrence of *stunting* in the future (Nurjanah *et al.*, 2023).

The socialization and education activities mentioned earlier require supporting media to ensure the information conveyed is processed effectively (Arya & Purwanto, 2023). Several media have been

prepared to assist in these socialization and education activities. These include brochures, posters, DASHAT menus, and presentation slides. Because they are considered adequate, brochures and posters were chosen as supporting media for awareness-raising activities. With brochures, each participant can read information about stunting directly during the awareness campaign. An example of a poster is shown in **Figure 2** below.

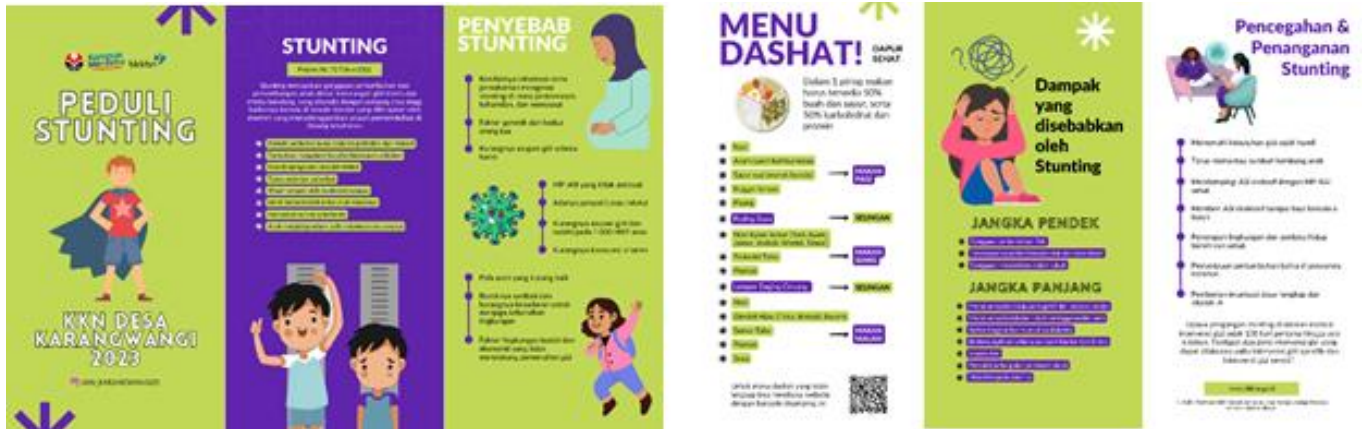


Figure 2. Brochure on Stunting Awareness
 Source: Community Service 2023

Next, the slide display is shown in **Figure 3** below.

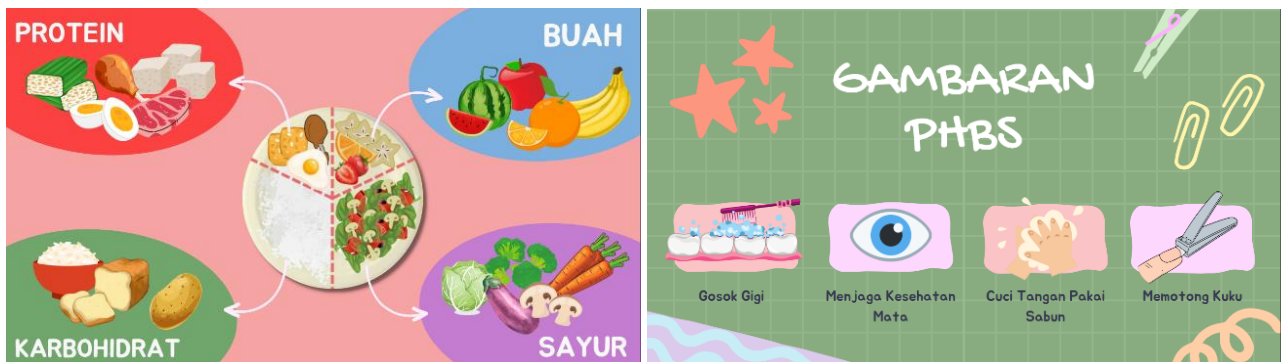


Figure 3. PHBS education slide show
 Source: Community Service 2023

The DAHSAT menu recommendations are shown in **Figure 4** below.



Figure 4. DAHSAT menu recommendations
Source: Community Service 2023

In addition, the brochure can also be helpful when socialization has been completed and can even be reread after a few days or weeks, as shown in **Figure 5**.

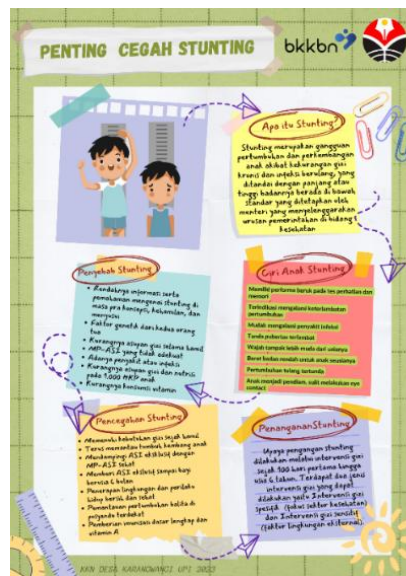


Figure 5. Poster on stunting awareness
Source: Community Service 2023

The varied DASHAT menu can be accessed via a QR code printed on the brochure. This method was chosen because it aligns with technological advances in society. The brochure menu can be easily accessed at any time and from anywhere via mobile devices. Additionally, slides were selected as a support medium because they are considered an appropriate medium for educational purposes. By displaying engaging slides, the presentation of materials can make all participants more enthusiastic. The distribution of worksheets containing puzzles also serves as an additional tool to help boost the participants' enthusiasm.

CONCLUSION

The implementation of community service, in the form of raising awareness and promoting a clean and healthy lifestyle (PHBS), was carried out in accordance with the main objectives of BKKBN and the Indonesian University of Education, as partners working together to prevent stunting. These objectives were implemented in several work programs tailored to the needs and conditions of the local community. In this context, the thematic community service group from the University of Education Indonesia was assigned to Karangwangi Village, Ciranjang Sub-district, Cianjur District. The programs implemented at the community service site included stunting awareness campaigns for pregnant women, mothers of infants, and mothers at the Karangwangi Village Health Post, as well as one early childhood education center in Karangwangi Village. Then, there was also a health education program for children at Karangsari Elementary School, Karangwangi Village.

AUTHOR'S NOTE

The author declares that there are no conflicts of interest related to the publication of this article. The author affirms that the data and content of this article are free from plagiarism.

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