



## Increasing health literacy efforts to provide education to prevent stunting in Neglasari Village

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### ABSTRACT

Neglasari Village is one of the villages in Salawu District, Tasikmalaya Regency, West Java. Neglasari Village is one of those who are still experiencing stunting cases. A community service program in the form of Kuliah Kerja Nyata (KKN) contained in this article aims to find out stunting data, as well as stunting prevention, by going through several health literacy as outlined in the work program that has been carried out. Creating a work program related to health literacy will educate the public about the importance of knowing about stunting, and the program will raise public awareness about stunting. This community service was conducted through observations and interviews with several parties in Neglasari Village. The results found that 34 children were stunted, and the number had decreased to 20 people who had passed stunting. Therefore, the data obtained decreased by 58 percent for those who passed stunting, and the remaining 41.2 percent were still stunted. This is because educational activities are related to preventing stunting in the community and routine activities from posyandu in Neglasari Village.

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### ABSTRAK

Desa Neglasari merupakan salah satu desa yang berlokasi di Kecamatan Salawu Kabupaten Tasikmalaya, Jawa Barat. Desa Neglasari menjadi salah satu yang masih mengalami kasus stunting. Program pengabdian dalam bentuk Kuliah Kerja Nyata (KKN) yang dimuat dalam tulisan ini bertujuan untuk mengetahui data stunting, serta pencegahan stunting dengan melalui beberapa literasi kesehatan yang dituangkan dalam program kerja yang telah dilakukan. Dibuatnya program kerja yang berkaitan dengan literasi kesehatan untuk mengedukasi kepada masyarakat mengingat bahwa pentingnya memiliki pengetahuan mengenai stunting, serta dengan program tersebut akan memberikan kesadaran pada masyarakat mengenai stunting. Pengabdian ini dilakukan dengan observasi dan wawancara kepada beberapa pihak Desa Neglasari. Hasil yang ditemukan bahwa terdapat 34 orang anak yang mengalami stunting dan telah menurunnya angka tersebut menjadi 20 orang yang telah lolos stunting. Maka dari itu, data yang didapat mengalami penurunan sebanyak 58 persen bagi yang lolos stunting dan tersisa 41.2 persen masih stunting. Hal tersebut karena adanya kegiatan edukasi terkait cegah stunting kepada Masyarakat dan adanya kegiatan rutin dari posyandu di Desa Neglasari.

**Kata Kunci:** edukasi; program literasi; pencegahan stunting

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## INTRODUCTION

Malnutrition, commonly known as *stunting*, is a problem that occurs in every country, whether poor, developing, or developed (Azizah *et al.*, 2022). Indonesia has become one of the countries with the highest rates of stunting globally. According to UNICEF and WHO data in "*The State of the World's Children 2019. Children, Food and Nutrition: Growing well in a changing world*", Indonesia's stunting prevalence rate ranks 27th out of 154 countries with stunting data, placing Indonesia 5th among Asia countries. In 2020, according to data from the Asian Development Bank, Indonesia ranked second in Southeast Asia for stunting prevalence, at 31.8%. According to WHO standards, a public health issue is considered chronic if a country's stunting prevalence exceeds 20%. Meanwhile, the prevalence of stunting in Indonesia remains above 20% (see: <https://databoks.katadata.co.id/datapublish/2021/11/25/prevalensi-stunting-balita-indonesia-tertinggi-ke-2-di-asia-tenggara>).

One of the factors contributing to stunting is an environmental factor, which originates from inadequate sanitation and family socioeconomic conditions (Sakti, 2020). Parents with low educational backgrounds are at greater risk of causing stunting in their children. Low maternal education and unemployment among fathers lead to low-income families, which in turn increases the potential for stunting in toddlers (Pertiwi *et al.*, 2019). This is because household socioeconomic indicators such as maternal education level, number of dependents, food consumption expenditure, immunization, breastfeeding, and sanitation influence stunting (Haryanto, 2019). Access to clean water for daily needs, such as personal hygiene and cooking, is crucial for maintaining children's health and can prevent stunting (Laili, 2019). Contaminated water can cause diseases and infections that affect nutrient absorption and compromise the immune system of children.

The causes of stunting are not only economic factors but also arise from poor parenting and feeding practices for toddlers (Permatasari, 2020; Sidiq *et al.*, 2022). According to Saadah in her book "*Modul Deteksi Dini Pencegahan dan Penanganan Stunting*," stunting is caused by inadequate nutrition, repeated infections over a long period, and a lack of psychosocial stimulation from the womb and after birth. Additionally, other issues arise due to the lack of awareness among parents regarding the importance of literacy in enhancing their knowledge of proper childcare and nutritious feeding practices for infants (Devie *et al.*, 2023).

Knowledge about the importance of parenting and nutritious food is still considered trivial among mothers. Stunting can occur during pregnancy due to insufficient nutritional intake, poor eating habits, and low-quality food, which hinder fetal growth (Nurfatimah *et al.*, 2021). Prevention of stunting should begin during pregnancy, especially during the first 1,000 days of life, also known as the period of critical growth and development (PGD). To prevent stunting, the first 1,000 days of life are a crucial period for paying attention to the nutritional needs of mothers and children, including the consumption of a balanced diet rich in vegetables, fruits, protein, carbohydrates, and fats (Nurjanah *et al.*, 2023). Prospective mothers must be educated about the importance of a mother's attitude and behavior in preventing stunting (Nurfatimah *et al.*, 2021). Increasing this knowledge involves providing supplementary foods, vitamin A, and iron tablets to pregnant women and toddlers, as well as understanding proper parenting patterns (Arnita *et al.*, 2020). Thus, there is a strong correlation between the level of knowledge and attitudes toward meeting nutritional needs during pregnancy and improvements in the nutrition and health of pregnant women (Nurfatimah *et al.*, 2021).

Several previous articles have discussed improving health literacy as a preventive measure against stunting. One of the problems contributing to high stunting rates is economic issues such as family income and poor parenting, as well as a lack of public awareness about child nutrition. Therefore, it is essential to provide preventive education on the importance of meeting nutritional needs in infants through skills in

preparing complementary foods. This involves guiding mothers on ingredient selection, preparation techniques, and the final product of complementary foods, such as moringa leaf porridge, named BURIDOR (Devie *et al.*, 2023). Additionally, other studies have mentioned that another factor contributing to stunting is the low knowledge and attitudes of young mothers regarding stunting prevention (Suminar *et al.*, 2021). Therefore, conducting awareness campaigns to improve health information literacy in collaboration with local health departments is crucial for enhancing mothers' knowledge about stunting.

Based on the above explanation, the community's lack of knowledge and awareness about the importance of health literacy related to stunting can result in deviations in parenting patterns and nutritional intake for children. Therefore, this community service initiative aims to educate the community of Neglasari Village about stunting prevention through several health literacy programs, including health seminars and stunting awareness sessions at health posts and elementary schools (SD).

## Literature Review

### Stunting

Stunting is a condition characterized by growth retardation (Akmal *et al.*, 2019). Stunting is characterized by the failure of growth and development in children under five years of age (infants) due to chronic malnutrition and recurrent infections during the first 1,000 days of life (Permadi *et al.*, 2016). Stunting can also cause cognitive development disorders in children (Arini *et al.*, 2019). Cognitive development is the foundation for children's thinking, intelligence, and language (Ifalahma & Retno, 2023). Children with stunting often experience problems with the functioning of their nervous system, which can result in lower intelligence (Solihin *et al.*, 2013). In addition, malnutrition also increases children's susceptibility to disease (Sutriyawan *et al.*, 2020), making it easier for infections to enter the body and causing a decrease in immunity, which in turn leads to weight loss and reduced energy levels.

The causes of stunting are said to be multidimensional (Junior *et al.*, 2022; Nugroho *et al.*, 2021), not only related to economic factors but also to parenting patterns (Permatasari, 2020), inadequate intake of nutritious food (Ningrum, 2020), and lack of psychosocial stimulation (see: <https://www.who.int/news/item/19-11-2015-stunting-in-a-nutshell>). Stunting is also caused by poor water sanitation and environmental hygiene that fail to meet standards. Limited access to clean water and inadequate sanitation can increase the risk of infection in children. Several factors contribute to stunting, including genetic or hereditary factors, socioeconomic factors, complementary feeding, immunization, maternal and child nutrition, and environmental factors (Doy *et al.*, 2021). Ecological factors significantly impact a person's life; a clean environment has a positive effect on the community's health (Widyanto *et al.*, 2019). Environmental factors that cause stunting are divided into direct and indirect factors. Indirect environmental factors include poverty, parental education, parental employment, parental income, and lack of access to health services (Hapsari *et al.*, 2022). These factors also impact the lack of education about nutrition and stunting. Poverty causes families to experience limitations in meeting the nutritional needs of their children, both in terms of quality and quantity (Ni'mah & Muniroh, 2015).

### Health Literacy

Health literacy refers to the ability to access, process, and understand basic information about health and health services, enabling individuals to make informed health decisions (Nurjanah *et al.*, 2016). According to the WHO (see: <https://www.who.int/healthpromotion/conference/79chp/track2/en/>), health literacy is crucial for enhancing access to quality health services, improving health-related understanding, and ultimately improving overall health outcomes. Individuals who understand health literacy can make more informed decisions regarding their healthcare. Based on its role in health empowerment, health literacy is

categorized into several levels, including 1) basic level, which involves the initial ability to read and understand care instructions; 2) intermediate level, which involves the ability to connect prior knowledge with information found in the surrounding environment; 3) advanced level, which is the ability to evaluate received information and communicate it to others as a form of information development (Fitroh & Oktavianingsih, 2020).

## METHODS

Community service was carried out simply by observing an object. In this community service, observations were conducted directly through interviews with six Plamboyan (Posyandu) cadres in Neglasari Village and village officials from Neglasari Village, Salawu District, Tasikmalaya Regency. Interviews were conducted as a form of observation of an object. The instruments were developed based on the customs of the residents of Neglasari Village. The results of the interviews were then adapted to align with existing literature addressing the issues being addressed, yielding findings that could be incorporated into this community service project.

## RESULT AND DISCUSSION

Community service activities aimed at improving health literacy and preventing *stunting* were implemented in two work programs. These included holding health seminars and providing information on *stunting* at integrated health service posts (posyandu) and elementary schools (SD). The target audience for this educational program included all mothers with toddlers, breastfeeding mothers, pregnant women, children, adolescents, and healthcare cadres in Neglasari Village. The seminar was held as shown in **Figure 1**.



**Figure 1.** Health Seminar on Stunting Prevention  
*Source: Author's documentation 2023*

The Health Seminar Work Program consisted of presentations by nutrition experts to educate the community in Neglasari Village, particularly adolescent girls, pregnant women, breastfeeding mothers, and mothers with infants aged 6-24 months. This activity was divided into two sessions: a presentation and a discussion.



**Figure 2.** Implementation of Posyandu Health Education  
*Source: Author's Documentation 2023*



**Figure 3.** Implementation of Stunting Prevention Education at Elementary School (SD)  
*Source: Author's Documentation 2023*

The stunting education program consists of visits to health posts and elementary schools, as shown in **Figures 2** and **3**. This activity provides information about the definition of stunting, its causes, and how to prevent it. Additionally, further observations were conducted during the education sessions to collect data on the number of children experiencing stunted growth. The following describes the stunting data collected successfully from Neglasari Village at Plamboyan (Integrated Health Service Post).

REKAPAN KKN

Data Stunting Terbaru Plamboyan

Data Stunting

No	Nama Anak	Nama Ortu	Tanggal Lahir	Data Sebelum		Data Terkini	
				Berat Badan	Tinggi Badan	Berat Badan	Tinggi Badan
1.	A. Rapi	Rauf	03.11.2021	8,9	78,2	10,0	77,5
2.	Abd Aziz	Enur	27.05.2018	10,4	96,8	16,0	99,7
3.	Adsara	Heri	17.01.2021	10,4	79,2	10,0	83,6
4.	Alfin	Arip	08.09.2020	9,6	11,5	10,6	80,7
5.	Ali	Sapaat	22.02.2018	12,9	96,5	15,7	98,3
6.	Aliya A	Anang	01.06.2019	11,6	92,1	12,7	95,5
7.	Amelia	Dindin	06.06.2018	10,0	84,6	10,0	88,6
8.	Arifatan	Ikbal	17.09.2019	12,8	86,3	11,2	96,3
9.	Arga	Rahmat	02.09.2018	15,0	92,6	14,3	108,0
10.	Asyyla	M. Yusup	26.02.2022	8,1	67,0	9,1	70,8
11.	Azril	Heri	12.12.2018	13,1	95,5	14,5	98,6
12.	Caca	Doni	30.03.2018	15,5	93,8	17,0	97,4
13.	Cici Fatma	Undang	24.10.2018	14,2	90,4	14,7	100,2
14.	Davi	Rumdi	18.06.2021	8,3	72,3	9,3	75,8
15.	Devan	Abd Aip	12.09.2018	13,9	84,8	17,5	104,5
16.	Huda A.	Randi	23.09.2018	17,0	96,6		
17.	Indra	Nano	07.05.2018	16,0	97,3	31,0	108,8
18.	Lulfitiana	Iman	08.12.2021	8,5	71,5	9,3	75,0
19.	M. Adzra	Diran	18.02.2021	10,0	80,2	11,3	83,7
20.	M. Azril	Retno	16.02.2018	15,2	94,3	18,6	97,6
21.	M. Delan	Eman	23.01.2019	13,2	94,6	14,5	98,1
22.	M. Rizka P	Andi	19.06.2019	13,0	86,7		
23.	M. Syaqui	Yusup	04.04.2020	9,4	83,1	16,8	99,1
24.	Raffi A.	Dede	25.02.2018	13,3	92,2		
25.	Rahma M	Arman	22.09.2018	11,7	93,5	12,6	96,1
26.	Sarhan	Hairudin	19.05.2022	7,3	64,2	8,2	74,2
27.	Sindi A	Amid	06.03.2018	12,2	93,1	13,6	95,5
28.	Vanessa	Dadang	11.03.2018	13,9	94,0	15,3	103,5
29.	Nana S.	Warsin	23.05.2022	8,1	64,0	8,8	68,6
30.	Amira K.	Koko	25.07.2022	6,6	61,4	7,2	68,5
31.	Asep H	Supriatman	27.08.2022	4,7	58,2	6,6	66,5
32.	Syafana	Santomi	11.04.2022	5,8	59,2		
33.	Nara Z	Wandi	11.05.2022	8,3	61,5	8,6	69,7
34.	Rayna	Andis	30.10.2022	5,6	56,9	7,7	63,2

No.	Daftar
1.	Nara
2.	Sarang
3.	Asep
4.	Amira
5.	Nana
6.	Sarhan
7.	Dafi
8.	Alfin
9.	Akstira
10.	Lutfiana
11.	Rahma

Data Lolos Stunting

No.	Daftar
1.	Vansa
2.	Sindy Aulia
3.	Rahma M.
4.	Rafa A.
5.	M. Savai
6.	M. Dilan
7.	M. Azril
8.	M. Azra
9.	Indra
10.	Yuda
11.	Defan
12.	Cici Fatma
13.	Caca
14.	Arsila
15.	Arga
16.	Arifatan
17.	Amelia
18.	Ali
19.	Abdul Aziz
20.	Rayna

Figure 4. Stunting Data Summary in Neglasari Village  
Source: Author's Documentation 2023

Based on Figure 4 above, 34 children were previously suffering from stunting in Neglasari Village. After that, the number gradually decreased to 11, with 20 others overcoming stunting. Therefore, based on the data obtained, stunting in Neglasari Village decreased by 58% for those who escaped stunting, leaving 41.2% still stunted. This occurred due to educational activities related to stunting prevention for the community, as well as routine activities to measure the weight and height of children and toddlers at every Posyandu in Neglasari Village. Thus, these activities prevent stunting by regularly monitoring the height and weight of children and toddlers. In addition, supervision of mothers' diets and parenting patterns is provided to support the development and growth of children, preventing stunting.

## Discussion

Based on the data obtained, there has been a significant decrease in the number of *stunting* cases in Neglasari Village. This is due to the implementation of *stunting* prevention programs and the dissemination of health education related to *stunting* in Neglasari Village. Efforts to reduce *stunting* can be carried out in various challenging contexts (Bhutta *et al.*, 2020). The Indonesian Ministry of Health explains that one way to disseminate information is by holding seminars related to nutrition (Prayoga *et al.*, 2022). Individuals with high health literacy can improve or maintain their health (Toar, 2020). With this health literacy, the community, especially mothers with toddlers, breastfeeding mothers, pregnant women, children, adolescents, and the general public, becomes aware of stunting, how to prevent it, and how to manage it. One of these efforts is through the 2023 UPI Community Service Program in Neglasari Village, Tasikmalaya Regency, which aims to improve community health literacy by increasing their knowledge

and understanding of stunting prevention programs for children. The results of this program are satisfactory, as seen from the high enthusiasm of the community to participate in health seminars and stunting counseling. This is inseparable from the community's awareness of the dangers of stunting. Improving parents' education levels, economic status, sanitation conditions, access to health services for mothers, and family planning programs are common efforts to prevent stunting (Vaivada *et al.*, 2020).

After conducting observations and collecting data on stunting rates, several factors were identified as causes of stunting in Neglasari Village, Tasikmalaya Regency: a lack of health literacy. The lack of health literacy triggers unhealthy lifestyles, unhealthy environments, and poor nutrition, which in turn affect children's growth. Mothers' knowledge of children's consumption patterns is crucial to ensure that meals are balanced as complementary to breast milk (Samah *et al.*, 2022). As found in this community service, the low level of knowledge about stunting in the village they studied was due to a lack of health information, especially among parents, resulting in many deviations in providing good nutrition to children (Amrindono *et al.*, 2023). Another real-life case occurred in Pager Village, Pasuruan District, where stunting was attributed to a lack of awareness and minimal knowledge among mothers regarding their children's nutritional intake (Kristina *et al.*, 2023). Therefore, the level of knowledge about health and nutrition can influence behavior and decisions related to feeding children, resulting in inadequate fulfillment of children's nutritional needs. Good nutrition knowledge can be an effective effort to prevent stunting (Putra & Sadiyyah, 2023).

In addition to the above problems, the people of Neglasari Village still lack access to clean and adequate toilets and clean water for their daily needs, which can contribute to poor sanitation and increase the risk of stunting in children (Mashar *et al.*, 2021). Clean water is a primary need for daily activities. Contaminated water can cause infections and diseases such as poor digestion, malabsorption of nutrients, and a weakened immune system in children (Nasrul, 2018). Therefore, it is essential to have knowledge and awareness of health literacy to recognize and prioritize the importance of clean water availability in reducing the risk of stunting and enhancing children's health.

## CONCLUSION

Based on the results of observations and work programs implemented, it is evident that providing education related to preventing stunting to mothers with toddlers, breastfeeding mothers, pregnant women, children, and health cadres is a crucial factor in efforts to reduce stunting rates in Neglasari Village, Tasikmalaya Regency. As shown by the data collected, the stunting rate in Neglasari Village has decreased by 41.2% due to the widespread improvement in health literacy resulting from education on stunting, including its definition, causes, and how to address it. In addition, activities regularly carried out by health cadres at the integrated health service post have facilitated direct monitoring of child growth and development in Neglasari Village, Tasikmalaya Regency.

## 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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