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# Ciherang Stunting Corner: A step to reduce the prevalence of stunting

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**ABSTRACT**

Stunting is a serious global public health challenge and a major concern in Indonesia. Stunting refers to impaired child growth, primarily caused by nutritional deficiencies during early development. Data from the Ministry of Health of the Republic of Indonesia indicates that the prevalence of stunting in children in 2023 reached twenty one point six percent, highlighting malnutrition in children as an urgent issue. Various approaches have been undertaken to address this problem, including the Ciherang Stunting Corner, which is the focus in the Ciherang Village, West Java. The method used in this study is quantitative, with a survey approach and data collection. This program emphasizes a community-based and holistic approach to stunting prevention. By involving the community in planning and implementing nutritional interventions, the program can provide solutions tailored to local needs while addressing sanitation and environmental aspects. Initial results show increased community awareness of nutrition and participation in child growth monitoring. Furthermore, the Community Service Learning (KKN) approach has helped to raise awareness about nutrition issues and gather crucial data to support stunting prevention efforts. Integrating the Ciherang Stunting Corner model with a significant reduction in stunting rates is a strategic step in addressing this issue in Indonesia, offering hope for a brighter future for the nation's next generation.

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**ABSTRAK**

Masalah stunting merupakan tantangan serius dalam bidang kesehatan global dan juga menjadi perhatian utama di Indonesia. Stunting merujuk pada kondisi pertumbuhan anak yang terhambat akibat kekurangan gizi pada masa perkembangan awal mereka. Data dari Kementerian Kesehatan Republik Indonesia menunjukkan bahwa prevalensi stunting pada anak di tahun 2023 sebesar dua puluh satu koma enam persen, mengindikasikan bahwa masalah gizi buruk pada anak-anak masih menjadi masalah yang mendesak. Untuk mengatasi masalah ini, beberapa pendekatan telah diambil, salah satunya adalah Ciherang Stunting Corner, yang menjadi fokus di Desa Ciherang, Jawa Barat. Metode yang digunakan pada penelitian ini adalah kuantitatif dengan pendekatan survei dan pengumpulan data. Program ini menonjolkan pendekatan berbasis komunitas dan holistik dalam upaya pencegahan stunting. Dengan melibatkan masyarakat dalam perencanaan dan pelaksanaan intervensi gizi, program ini mampu memberikan solusi yang sesuai dengan kebutuhan lokal dan juga memperhatikan aspek-aspek sanitasi dan lingkungan. Hasil awal menunjukkan peningkatan kesadaran masyarakat tentang gizi dan partisipasi dalam pemantauan tumbuh kembang anak. Selain itu, pendekatan KKN telah membantu mensosialisasikan isu gizi dan mengumpulkan data penting untuk mendukung upaya pencegahan stunting. Pengintegrasian model Ciherang Stunting Corner dengan penurunan angka stunting yang signifikan merupakan langkah strategis dalam mengatasi masalah ini di Indonesia, memberikan harapan untuk masa depan yang lebih cerah bagi generasi penerus bangsa ini.

**Kata Kunci:** KKN; Pojok Stunting; Stunting

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## INTRODUCTION

Stunting is one of the main challenges in global public health. It refers to impaired child growth, typically caused by nutritional deficiencies during early development. Stunting is commonly found in children during their growth phase. For children, especially those under five, stunting hinders the achievement of optimal growth and development potential (Nursyamsiyah et al., 2021). Handayani et al. state that malnutrition in children, particularly toddlers, can lead to physical disorders and affect intelligence in adulthood (Widjayatri et al., 2020).

In Indonesia, stunting remains a serious concern. Based on the 2023 Indonesian Nutrition Status Survey (SSGI) by the Ministry of Health of the Republic of Indonesia, stunting prevalence decreased from 24.4% to 21.6% (see: https://sehatnegeriku.kemkes.go.id/baca/rilis-media/20230125/3142280/prevalensi-stunting-di-indonesia-turun-ke-216-dari-244/). Although this marks progress, the rate is still above the WHO standard of 20% (Pitoyo et al., 2020). This figure ranks Indonesia 27th out of 154 countries with stunting data and 5th among Asian countries (see: https://www.kemenkopmk.go.id/perlu-terobosan-dan-intervensi-tepat-sasaran-lintas-sektor-untuk-atasi-stunting). These numbers indicate that efforts to address stunting in Indonesia must continue and be effectively managed.

One of the government's efforts to address stunting is the issuance of the Ministry of Health Regulation Number 39 of 2016 concerning Guidelines for Implementing the Healthy Indonesia Program with a Family Approach. Implementing this regulation can be applied by creating public health programs that provide proper education, support, and intervention. One such initiative is the Ciherang Stunting Corner in Cianjur Regency. Ciherang Stunting Corner focuses on preventing stunting through a holistic and community-based approach in Ciherang Village, West Java.

The Ciherang Stunting Corner program is an innovative initiative designed to reduce stunting prevalence through a community-based approach that focuses on education, prevention, and behavior change. Several studies have highlighted the significant potential of community-based models in reducing stunting. Alderman et al., in their in-depth Analysis of the interaction between nutrition, Health, and Education in Kenya, stated that programs that actively involve communities in planning and implementing nutritional interventions have a greater positive impact than top-down approaches. This aligns with the Ciherang Stunting Corner method, emphasizing community participation in designing locally appropriate solutions. In a study by Mitra et al. (2022), it is noted that community involvement is crucial in implementing stunting training programs. Communities are expected to immediately contact health facilitators when they observe symptoms such as loss of appetite, weight loss, or other health problems in children. This role helps facilitators address child health issues promptly.

Additionally, the Ciherang Stunting Corner emphasizes the importance of a comprehensive approach to addressing stunting. According to research by Ruel et al. (2013), stunting is influenced by nutrition and complex social and environmental factors. Therefore, programs that integrate these aspects into their interventions, such as Ciherang Stunting Corner, have the potential to deliver better results in reducing stunting prevalence.

The issue of stunting prevalence must be addressed starting from smaller community scopes, such as villages. Therefore, research on stunting remains a relevant topic to explore. Based on this context, this study aims to examine the Ciherang Stunting Corner initiative further and analyze how the concepts and practices applied in this program contribute to reducing stunting prevalence in Indonesia, particularly in Cianjur Regency.



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## Literature Review

### Stunting

Stunting is a serious global public health issue, especially among children in developing countries. Stunting occurs when a child's height is lower than the standard growth curve for their age, typically caused by chronic malnutrition during early growth periods. It may occur when a child lacks sufficient nutritional intake during the critical 1000 Days of Life (HPK), which includes pregnancy and the first two years of life (Mayasari et al., 2023; Kurdaningsih et al., 2023). The impacts of stunting are severe, including impaired cognitive and motor development, increased risk of chronic diseases, and reduced productivity in adulthood (Utario et al., 2023).

Research on stunting has shown that the contributing factors are highly complex. Poor maternal nutrition during pregnancy, inappropriate infant feeding practices, inadequate sanitation, limited access to clean water, and inadequate healthcare services are among the significant causes (Rahayu et al., 2018; Widiyanto, 2019; Komalasari et al., 2020). In addition, socio-economic factors such as household income and maternal education level also play significant roles in stunting prevalence (Victora et al., 2021; Supariasa et al., 2019).

Efforts to address stunting involve holistic and community-based approaches. Programs that integrate the provision of nutrient-rich foods, behavior change interventions, and improvements in sanitation have proven effective in reducing stunting rates. Moreover, nutrition education for pregnant and breastfeeding mothers, as well as promoting appropriate child-feeding practices, is also essential in reducing stunting (Bhutta et al., 2021). Therefore, a deep understanding of the underlying causes and effective interventions is necessary to support the ongoing global effort to combat stunting.

### Stunting Prevalence Rate

According to a report by the Ministry of Health of the Republic of Indonesia, the prevalence of stunting in Indonesia remained high, reaching 27.7% in 2019 (Kemenkes RI, 2020). This figure indicates that malnutrition among children remains a significant challenge to improving child welfare in the country.

The factors influencing stunting prevalence in Indonesia are highly complex. Poor maternal nutrition during pregnancy, inadequate child-feeding practices, poor sanitation, and limited access to healthcare services are among the main contributors to the high stunting rate in the country (Kemenkes RI, 2020). Efforts to address this issue involve extensive child nutrition and health programs, behavior change in child-feeding practices, and nutrition education for pregnant and breastfeeding mothers. While progress has been made in reducing stunting in several regions, significant challenges remain in achieving lower targets within a short period.

### Stunting Corner

A study conducted by the Ministry of Health of the Republic of Indonesia in 2020 recorded that the Stunting Corner program has raised public awareness about the importance of nutrition and child health. However, further research is needed to evaluate the actual impact of this approach in reducing stunting rates and to understand the factors that influence its effectiveness across different community contexts (Bhutta et al., 2021). More detailed resources and guidelines must also be developed to support the effective implementation of the Stunting Corner program in various regions.



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## METHODS

The method used in this study is quantitative, employing several approaches, including surveys and data collection, to measure the prevalence of the program. Quantitative research aims to gather data based on numerical values and measurable indicators. According to Cresswell, quantitative research focuses on processing data that can be calculated and statistically analyzed (Ardiansyah et al., 2023). Before and after the implementation of the Ciherang Stunting Corner, survey methods and anthropometric data collection were used to assess children in the area. Anthropometry is a technique for measuring or collecting human morphological data, including body dimensions, body mass, and body composition, such as fat and muscle. This method refers to WHO guidelines, such as "Child Growth Standards: length/height-for-age, weight-for-age, weight-for-length, weight-for-height and body mass index-for-age: Methods and Development," which outlines the techniques for measuring children's height and weight.

To assess stunting in children, anthropometric measurements were conducted based on the WHO growth standards for children under five, also stipulated in the Regulation of the Minister of Health of the Republic of Indonesia Number 2 of 2020 concerning the Anthropometric Standards for Children. Stunting occurs when a child's length or height falls below -2 standard deviations (SD) (Aurima et al., 2021).

To determine whether a child is stunted, the following data were collected during the implementation of the Stunting Corner:

1. Height (or body length)
2. Age (in months)
3. Gender

These data were then compared with the PB/U Table (Height-for-Age Standards) as presented in **Tables 1 and 2**. If the score falls below two standard deviations (2 SD), the child is classified as stunted.

**Table 1.** Standard Body Length by Age (PB/U) – Boys Aged 0–24 Months

| Age (Months) | Body Length (cm) | | | | | | |
|---|---|---|---|---|---|---|---|
| | -3 SD | -2 SD | -1 SD | Median | +1 SD | +2 SD | +3 SD |
| 0 | 44,2 | 46,1 | 48,0 | 49,9 | 51,8 | 53,7 | 55,6 |
| 1 | 48,9 | 50,8 | 52,8 | 54,7 | 56,7 | 58,6 | 60,6 |
| 2 | 52,4 | 54,4 | 56,4 | 58,4 | 60,4 | 62,4 | 64,6 |
| 3 | 55,3 | 57,3 | 59,4 | 61,4 | 63,5 | 65,5 | 67,6 |
| 4 | 57,6 | 59,7 | 61,8 | 63,9 | 66,0 | 68,0 | 70,1 |
| 5 | 59,6 | 61,7 | 63,8 | 65,9 | 68,0 | 70,1 | 72,2 |
| 6 | 61,2 | 63,3 | 65,5 | 67,6 | 69,8 | 71,8 | 74,0 |
| 7 | 62,7 | 64,8 | 67,0 | 69,2 | 71,3 | 73,5 | 75,7 |
| 8 | 64,0 | 66,2 | 68,4 | 70,6 | 72,8 | 75,0 | 77,2 |
| 9 | 65,2 | 67,5 | 69,7 | 72,0 | 74,2 | 76,5 | 78,7 |
| 10 | 66,4 | 68,7 | 71,0 | 73,3 | 75,6 | 77,9 | 80,1 |
| 11 | 67,6 | 69,9 | 72,2 | 74,5 | 76,9 | 79,2 | 81,5 |
| 12 | 68,6 | 71,0 | 73,4 | 75,7 | 78,1 | 80,5 | 82,9 |
| 13 | 69,6 | 72,1 | 74,5 | 76,9 | 79,3 | 81,8 | 86,7 |
| 14 | 70,6 | 73,1 | 75,6 | 78,0 | 80,5 | ,83,0 | 85,5 |
| 15 | 71,6 | 74,1 | 76,6 | 79,1 | 81,7 | 84,2 | 86,7 |
| 16 | 72,5 | 75,0 | 77,6 | 80,2 | 82,8 | 85,4 | 88,0 |
| 17 | 73,3 | 76,0 | 78,6 | 81,2 | 83,9 | 87,7 | 90,4 |
| 18 | 74,2 | 76,9 | 79,6 | 82,3 | 85,0 | 87,7 | 90,4 |
| 19 | 75,0 | 77,7 | 80,5 | 83,2 | 86,0 | 88,8 | 91,5 |
| 20 | 75,8 | 78,6 | 81,4 | 84,2 | 87,0 | 89,8 | 92,6 |
| 21 | 76,5 | 78,4 | 82,3 | 85,1 | 88,0 | 90,9 | 93,8 |
| 22 | 77,2 | 80,2 | 83,1 | 86,0 | 89,0 | 91,9 | 94,9 |



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| Age (Months) | Body Length (cm) | | | | | | |
|---|---|---|---|---|---|---|---|
| | -3 SD | -2 SD | -1 SD | Median | +1 SD | +2 SD | +3 SD |
| 23 | 78,0 | 81,0 | 83,9 | 86,9 | 89,9 | 92,9 | 95,9 |
| 24 | 78,7 | 81,7 | 84,8 | 87,8 | 90,9 | 93,9 | 97,0 |

Source: Regulation of the Minister of Health of the Republic of Indonesia No. 2 of 2020 on Child Anthropometry Standards, 2020

**Table 2.** Standard Body Length by Age (PB/U) – Girls Aged 0–24 Months

| Age (Months) | Body Length (cm) | | | | | | |
|---|---|---|---|---|---|---|---|
| | -3 SD | -2 SD | -1 SD | Median | +1 SD | +2 SD | +3 SD |
| 0 | 44,6 | 45,4 | 47,3 | 49,1 | 51,0 | 52,9 | 54,7 |
| 1 | 47,8 | 69,8 | 51,7 | 53,7 | 55,6 | 57,6 | 59,5 |
| 2 | 51,0 | 53,0 | 55,0 | 57,1 | 59,1 | 61,1 | 63,3 |
| 3 | 53,5 | 55,6 | 57,7 | 59,8 | 61,9 | 64,0 | 66,1 |
| 4 | 55,6 | 57,8 | 59,9 | 62,1 | 64,3 | 66,4 | 68,6 |
| 5 | 57,4 | 59,6 | 61,8 | 64,0 | 66,2 | 68,5 | 70,7 |
| 6 | 58,9 | 61,2 | 63,5 | 65,7 | 68,0 | 70,3 | 72,5 |
| 7 | 60,3 | 62,7 | 65,0 | 67,3 | 69,6 | 71,9 | 74,2 |
| 8 | 61,7 | 64,0 | 66,4 | 68,7 | 71,1 | 73,5 | 75,8 |
| 9 | 62,9 | 65,3 | 67,7 | 70,1 | 72,6 | 75,0 | 77,4 |
| 10 | 64,1 | 66,5 | 69,0 | 71,5 | 73,9 | 76,4 | 78,9 |
| 11 | 65,2 | 67,7 | 70,3 | 72,8 | 75,3 | 77,8 | 80,3 |
| 12 | 66,3 | 68,9 | 71,4 | 74,0 | 76,6 | 79,2 | 81,7 |
| 13 | 67,3 | 70,0 | 72,6 | 75,2 | 77,8 | 80,5 | 83,1 |
| 14 | 68,3 | 71,0 | 73,7 | 76,4 | 79,1 | 81,7 | 84,4 |
| 15 | 69,3 | 72,0 | 74,8 | 77,5 | 80,2 | 83,0 | 85,7 |
| 16 | 70,2 | 73,0 | 75,8 | 78,6 | 81,4 | 84,2 | 87,0 |
| 17 | 71,1 | 74,0 | 76,8 | 79,7 | 82,5 | 85,4 | 88,2 |
| 18 | 72,0 | 74,9 | 77,8 | 80,7 | 83,5 | 86,5 | 89,4 |
| 19 | 72,8 | 75,8 | 78,8 | 81,7 | 84,7 | 87,6 | 90,6 |
| 20 | 73,7 | 76,7 | 79,7 | 82,7 | 85,7 | 88,7 | 91,7 |
| 21 | 74,5 | 77,5 | 80,6 | 83,7 | 86,7 | 89,8 | 92,9 |
| 22 | 75,2 | 78,4 | 81,5 | 84,6 | 87,7 | 90,8 | 94,0 |
| 23 | 76,0 | 79,2 | 82,3 | 85,5 | 88,7 | 91,9 | 95,0 |
| 24 | 76,7 | 80,0 | 83,2 | 86,4 | 89,6 | 92,9 | 96,1 |

Source: Regulation of the Minister of Health of the Republic of Indonesia No. 2 of 2020 on Child Anthropometry Standards, 2020

After the data is collected, further data analysis is needed to measure the impact of the Stunting Corner program. Continuous monitoring and evaluation are essential to ensure the program's sustainability. WHO recommendations on public health program monitoring and assessment can guide in this regard.

Additionally, a comparative study can be conducted to assess the effectiveness of the Ciherang Stunting Corner in comparison to similar programs in other regions. This method enables the evaluation of lessons learned from similar initiatives and their more effective application.

## RESULT AND DISCUSSION

As part of its current community service activities, Universitas Pendidikan Indonesia (UPI) has collaborated with the National Population and Family Planning Agency (BKKBN) to launch a program known as “Important Students,” often referred to as “Students Concerned about Stunting.” The issue of stunting in Indonesia is a pressing challenge that must be addressed immediately, as it can hinder future generations from achieving a better future. To address this, the government has issued Presidential Regulation No. 72 of 2021 to accelerate the reduction of stunting rates. Stunting in children can have significant impacts, including physical growth disorders, brain development issues, and effects on academic performance, achievement, productivity, and creativity during their formative years (Indriati & Setiani, 2022). Additionally,


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stunting can also affect children's cognitive, motor, and verbal development, increase the risk of illness and death, and hinder mental and physical growth (Rosyida, 2022).

Stunting in children can cause physical growth disorders, such as short stature or dwarfism (Rohmah et al., 2022). The impact on children is also significant, including physical growth disorders, brain development, academic performance and achievement, productivity, and creativity during their productive years (Nugroho et al., 2021). Additionally, stunting can also affect children's cognitive, motor, and verbal development, increase the risk of illness and death, and hinder mental and physical growth (Amelia, 2023). The various negative impacts felt during growth and adulthood make stunting a critical health issue that must be addressed.

One key strategy in shaping a high-quality, competitive, and ethical generation is to maximize the family's role. This involves socialization, counseling, and educational approaches using promotional media to address the knowledge gaps of mothers of young children and serve as a guide for the community in adopting balanced nutrition behaviors (Hasanah et al., 2023). Implementing these socialization or educational approaches provides opportunities for the community to increase their knowledge about the dangers of stunting and how to prevent and address it.

Ciherang Village is one of the focuses of the University of Education Indonesia in its efforts to implement strategies to reduce stunting rates across various regions in Indonesia. According to the Cianjur Regency Statistics Agency (BPS), in 2021, Ciherang Village consisted of 4 hamlets equipped with 10 RWs, 35 RTs, and 12 Posyandus. The Stunting Corner is implemented in the 12 Posyandus in Ciherang Village to accurately achieve the program's target: infants and pregnant women. The Stunting Corner is an educational service that raises community awareness about stunting issues. The growing awareness in the community about stunting is expected to reduce the stunting rate in Ciherang Village. Activities include providing education through leaflets and posters about stunting and prevention efforts, measuring children's height and weight, and identifying children's nutritional status.

## Raising public awareness

Raising public awareness about stunting is crucial when addressing malnutrition in children. Public awareness is the cornerstone for changing behaviors and practices related to child nutrition and health. A better understanding of the risks of stunting, its long-term consequences, and the steps that can be taken to prevent it will help parents and the community as a whole take more proactive measures in supporting children's growth and development (Bhutta et al., 2021).

Nutrition education delivered through awareness campaigns, stunting prevention programs, or through child health services can help increase public awareness. Research by Victora et al. (2021) shows that increased public awareness of the importance of exclusive breastfeeding, appropriate complementary feeding, and good sanitation can significantly reduce the risk of stunting in children. Therefore, efforts to increase public awareness are essential in reducing the prevalence of stunting, and resources should be allocated to effective nutrition education programs and sustained awareness campaigns (Hartini et al., 2021).

## CIHERANG Stunting Corner Program

The Stunting Corner is an initiative designed to educate the community about the importance of balanced nutrition and a healthy diet in preventing stunted growth in children. The Stunting Corner aims to educate people about the importance of providing children with nutritious food to prevent their growth from being



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stunted (Astuti & Wahyuni, 2022). As a result, parents and the community will become more concerned about their children's nutrition and make positive changes in their eating habits. Such initiatives have been implemented in several countries, and research in Indonesia shows that the Stunting Corner has successfully increased public awareness about the risks of stunting (Raihana et al., 2022).


**Figure 1.** Stunting Corner at one of the Posyandu in Ciherang Village
Source: Author's documentation, 2023

The Ciherang Stunting Corner is a monthly program run by Ciherang Village that collects data and provides information on immunization and stunting at 12 Posyandu locations. This activity is part of the effort to reduce the prevalence of stunting in Ciherang Village. The Stunting Corner activity aims to increase the awareness of the Ciherang Village community about preventing stunting. This activity provides information and education through leaflets on stunting prevention, emphasizing the importance of adequate child nutrition, regular immunization, and improved water and sanitation. Additionally, height and weight measurements of infants were taken to identify whether they exhibited signs of stunting. It is hoped that the community will adopt healthy lifestyles, meet their children's nutritional needs, and reduce the prevalence of stunting in Ciherang Village.

## The Community Service Approach at Posyandu

The KKN (Community Service Learning) approach can have a significant impact on the community, particularly for pregnant women and toddlers, in preventing and reducing stunting rates. Here are some positive effects the KKN approach can have in this context.

First, socialization and education about nutrition and health for the community, particularly pregnant women and infants. This includes the importance of adequate nutritional intake during pregnancy and the early growth period of children, as well as preventive measures against stunted growth. These activities also explain the “My Plate” recommendations from KKN students regarding balanced nutrition and dietary intake (Sinaga et al., 2022).

Second, KKN students can assist in collecting data related to stunting and nutrition issues in their communities. This data can be used to understand the prevalence of stunting and the factors influencing stunting cases at the local level. Additionally, they can help monitor and evaluate ongoing stunting prevention programs, thereby identifying what is working and what needs improvement.

A well-targeted KKN approach can effectively support efforts to prevent and reduce stunting rates while providing direct benefits to the community. By involving students and the community in joint efforts, we can create significant change in stunting issues at the local level.

## Holistic Approach


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A holistic approach to preventing and reducing stunting is a comprehensive approach to addressing malnutrition in children. This approach recognizes that stunting is not solely a nutritional issue but is also influenced by social, economic, cultural, and environmental factors. Therefore, the holistic approach seeks to understand and address all factors contributing to stunting to achieve sustainable change in children's nutritional status (Neola & Anita, 2022).

This approach prioritizes the physical environment and sanitation. This includes access to clean drinking water, good sanitation, and proper waste management. A clean and healthy environment is essential for preventing diseases that can affect children's growth in line with the findings of Sumarno dan Syafiuddin (2023) on the Analysis of Well Water Quality and sanitation facilities about stunting incidence in the Driyorejo Subdistrict, which showed that stunting incidence in children was more prevalent in environments with poor water quality. This means that access to clean water, whether for consumption or sanitation purposes, has a significant impact on children's growth and development. In addition to water cleanliness, the community must also maintain environmental cleanliness.

The community needs to be reminded of the importance of maintaining cleanliness. Community service activities can be achieved through socialization or education, emphasizing comprehensive cleanliness. Good cooperation between the local government and the community is necessary for these cleanliness education activities to continue uninterrupted.

## Integration of the Stunting Corner Model

The integration of the “Stunting Corner” model in Ciherang Village has resulted in a decrease in the prevalence of stunting, marking a strategic step in efforts to overcome the problem of stunting in Ciherang Village, Karangtengah District, Cianjur Regency. The results of implementing the stunting corner model in Ciherang Village are significant and have also shown a decrease. **Table 3** shows the results obtained.

**Table 3.** Number of Infants and Toddlers Routinely Undergoing Growth Monitoring in Ciherang Village, 2021–2023

| | 2021 | | 2022 | | 2023 |
|---|---|---|---|---|---|
| | **Semester I** | **Semester II** | **Semester I** | **Semester II** | **Semester I** |
| Absolut | 622 | 633 | 622 | 706 | 714 |
| Persentase | 95,40% | 97,09% | 92,28% | 100,00% | 100,00% |

Sumber: Data Peneliti, 2023

Based on **Table 3**, the number of infants and toddlers who regularly undergo growth and development checks in Ciherang Village increased from 2021 to 2023. In the first semester of 2021, 622 infants and toddlers underwent periodic checks. This number increased to 633 in the second semester of 2021 and 706 in the first semester of 2022. In the second semester of 2022, the number of infants and toddlers regularly undergoing growth and development check-ups remained at 706. In the first semester of 2023, the number of infants and toddlers undergoing periodic growth and development check-ups increased to 714.

**Table 4.** Number of Premature Births in Ciherang Village, 2021–2023

| | 2021 | | 2022 | | 2023 |
|---|---|---|---|---|---|
| | **Semester I** | **Semester II** | **Semester I** | **Semester II** | **Semester I** |
| Absolut | 3 | 8 | 4 | 2 | 1 |
| Persentase | 1,16% | 3,05% | 1,49% | 0,76% | 0,40% |

*Source: Researcher’s Data, 2023*



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Based on **Table 4**, the number of premature births in Ciherang Village also decreased when viewed as a percentage. In the first semester of 2021, premature births reached 1.16%. This number increased to 3.05% in the second semester of 2021, then decreased to 1.49% in the first semester of 2022. In the second semester of 2022, the rate of premature births decreased to 0.76%. In the first semester of 2023, the rate of premature births decreased to 0.40%.

**Table 5.** Number of Births & Low Birth Weight (LBW) Babies in Ciherang Village, 2021–2023

| | 2021 | | 2022 | | 2023 |
|---|---|---|---|---|---|
| | **Semester I** | **Semester II** | **Semester I** | **Semester II** | **Semester I** |
| Absolut | 3 | 8 | 1 | 2 | 0 |
| Persentase | 4,62% | 12,31% | 1,54% | 3,08% | 0% |

Source: *Researcher's Data, 2023*

Based on **Table 5**, the number of low-birth-weight (LBW) babies in Ciherang Village has also decreased. In the first semester of 2021, the number of LBW babies reached 4.62%. This number increased to 12.31% in the second semester of 2021, then decreased to 1.54% in the first semester of 2022. In the second semester of 2022, the number of LBW babies decreased to 3.08%. In the first semester of 2023, LBW babies decreased to 0%.

**Table 6.** Number of Malnourished Toddlers in Ciherang Village, 2021 to 2023

| | 2021 | | 2022 | | 2023 |
|---|---|---|---|---|---|
| | **Semester I** | **Semester II** | **Semester I** | **Semester II** | **Semester I** |
| Absolut | 8 | 47 | 25 | 40 | 9 |
| Persentase | 3,10% | 17,94% | 9,29% | 15,15% | 3,58% |

*Source: Researcher's Data, 2023*

Based on **Table 6**, the number of malnourished toddlers in Ciherang Village also fluctuated. In the first semester of 2021, the number reached 3.10%. This number increased to 17.94% in the second semester of 2021 and then decreased to 9.29% in the first semester of 2022. In the second semester of 2022, the number of malnourished toddlers increased to 15.15%. In the first semester of 2023, the number of undernourished toddlers decreased to 3.58%.

**Table 7.** Number of Stunted Toddlers in Ciherang Village, 2021–2023

| | 2021 | | 2022 | | 2023 |
|---|---|---|---|---|---|
| | **Semester I** | **Semester II** | **Semester I** | **Semester II** | **Semester I** |
| Absolut | 34 | 70 | 29 | 54 | 22 |
| Persentase | 13,18% | 26,72% | 20,78% | 20,45% | 8,76% |

*Source: Researcher's Data, 2023*

Based on **Table 7**, the number of stunted toddlers in Ciherang Village also fluctuated. In the first semester of 2021, the number of stunted toddlers reached 13.18%. This number increased to 26.72% in the second semester of 2021 and then decreased to 20.78% in the first semester of 2022. In the second semester of 2022, the number of stunted infants increased to 20.45%. In the first semester of 2023, the stunted infant rate decreased to 8.76%.

### Prevalence of Stunting in Ciherang

The prevalence of stunting among toddlers in Ciherang village in 2021 and 2022 was relatively high, at 26.72% and 20.45%, respectively. Although there has been a decline, this figure has not yet reached the desired standard or target.



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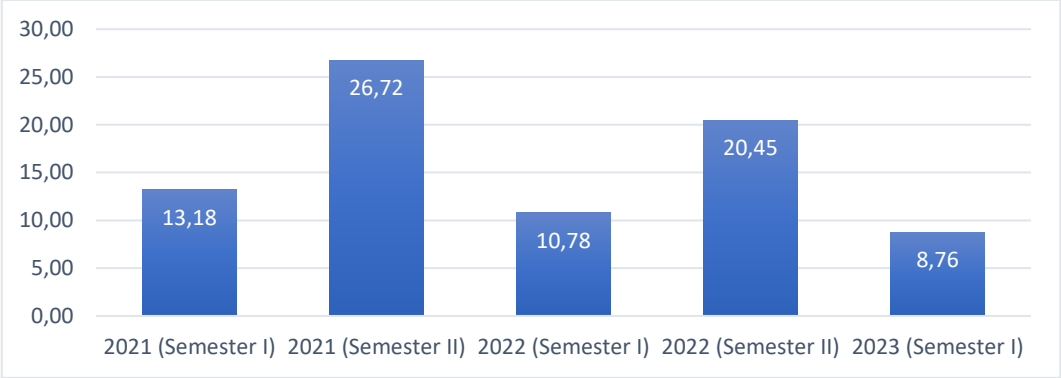


**Figure 2.** Prevalence of Stunting in Infants
Source: Author's processed data, 2023

As shown in **Figure 2**, the prevalence of stunting remains fluctuating. However, from the second semester of 2022 to the first semester of 2023, there was a decrease of 11.69%. This indicates positive results from the stunting prevention efforts implemented in Ciherang Village. In 2023, the stunting prevalence rate in Ciherang Village decreased to 8.76%. This success was achieved through collaborative efforts between village officials, the health sector, PKK mothers, cadres, and active community participation.

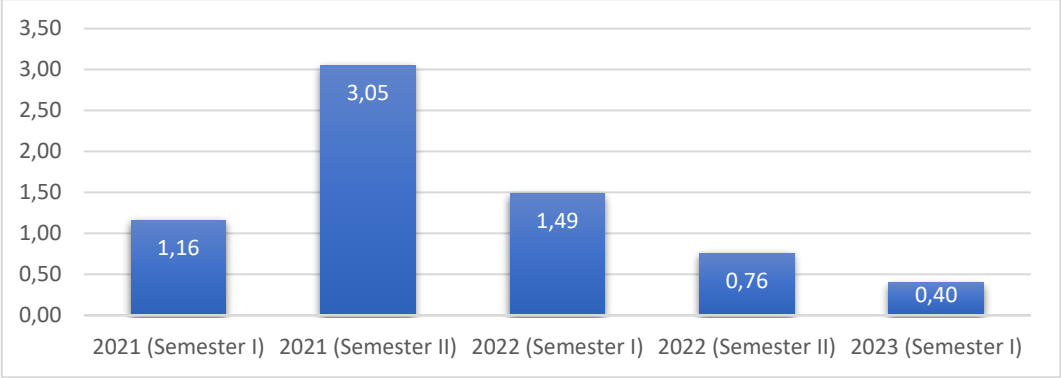


**Figure 3.** Prevalence of Premature Births at the Village Level
Source: Author's processed data, 2023

From 1.16% in the first semester of 2021, 3.05% in the second semester, 1.49% in the first semester of 2022, 0.76% in the second semester, to 0.40% in 2023. The decrease in the prevalence of premature births, as shown in Figure 2, indicates the success of stunting prevention efforts in Ciherang Village.

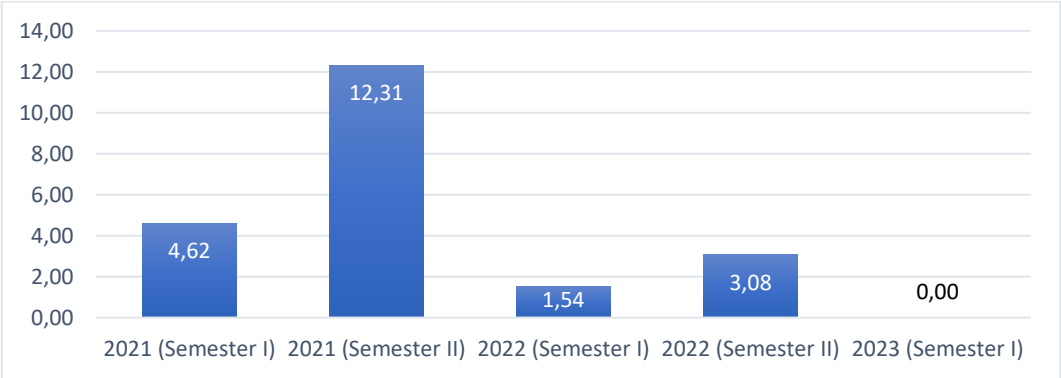


**Figure 4.** Prevalence of Low Birth Weight (LBW) Infants
Source: Author's processed data, 2023



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From 4.62% in the first semester of 2021, 12.31% in the second semester, 1.54% in the first semester of 2022, 3.08% in the second semester, to 0% in 2023. The decline in the prevalence of babies with low birth weights in Ciherang Village reached 0%, indicating success in addressing this issue in Ciherang Village.

An increase in the number of stunted children in Ciherang Village indicates that education about stunting among the local community in 2021 was not yet consistent or widespread. This issue was also observed in a study conducted by Kurniati (2022) at the Sungai Durian Health Center in Sintang District in 2021, which showed that 47.6% of respondents had poor knowledge about stunting, while 52.4% had good knowledge. This data shows that the better a person's knowledge about stunting, the less likely they are to have a stunted toddler.

The importance of education about stunting for the community, especially mothers with toddlers, needs to be recognized by the community itself. In line with Arsyati's (2019) opinion, an increase in knowledge can occur due to a mother's desire to expand her understanding of stunting prevention. Continuous reminders about health education, particularly stunting, can be provided to foster this desire. This can be done through counseling, appropriate media, and methods such as audiovisual media. Audiovisual media stimulate the senses of sight and hearing, enhancing perception, increasing knowledge, and improving memory (Sukmawati et al., 2020). The selection of educational media required for stunting education can be tailored to meet the specific needs and conditions of a particular region.

## CONCLUSION

Stunting is a serious problem in global public health, as well as in Indonesia. Stunting causes growth disorders in children that seriously impact physical health, intellectual development, and individual productivity in adulthood. Efforts to address this problem require a holistic and community-based approach.

The Ciherang Stunting Corner program in Ciherang Village, West Java, is a notable initiative aimed at addressing the issue of stunting. This program focuses on education, prevention, and behavioral change through a community-based approach. Initial results indicate an increase in community awareness of stunting, as well as the number of infants and toddlers undergoing regular growth and development checks. With this program in place, the goal of reducing stunting prevalence in Indonesia can be achieved, and children across the nation can grow and develop optimally, ultimately supporting a brighter future.

## AUTHOR'S NOTE

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

Heartfelt thanks to all village officials, health workers, midwives, community health workers, and the community who have collaborated effectively in the Stunting Corner program in Ciherang Village during the Kuliah Kerja Nyata (KKN). Thank you for your dedication and hard work in reducing stunting rates. We have all played a crucial role in ensuring a healthier future for future generations.

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