

SUPPORT HEALTH QUALITY THROUGH STUNTING SOCIALIZATION AND PREVENTION IN THE TOURISM VILLAGE, BELITUNG REGENCY

Dukung Kualitas Kesehatan Melalui Sosialisasi dan Pencegahan Stunting Di Desa Wisata
Kabupaten Belitung

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ABSTRACT

Stunting is a failure of growth and development in children under five due to chronic malnutrition. This condition can cause high mortality rates in children under five in Indonesia and Southeast Asia. Keciput Village is a tourism area in Belitung province with abundant natural tourism potential, so this area is very strategic. However, human resources in Keciput has a reasonably high stunting rate compared to other tourism areas. The government has issued various stunting prevention policies through 5 (five) main pillars, namely: Increasing leadership commitment and vision in ministries/agencies, provincial, regional governments, district/city regional governments, and village governments; Improving behavior change communication and community empowerment; Increasing the convergence of specific interventions and sensitive interventions in ministries/agencies, provincial, regional governments, district/city regional governments, and village governments; Improving food and nutrition security at the individual, family, and community levels and Strengthening the development of systems, data, information, research and innovation as well as cross-sectoral policies from the central government to the village level. This community service activity is essential to increase awareness and understanding of stunting and prevention efforts in Keciput Village, Sijuk District, Belitung Regency, Bangka Belitung Islands Province.

Keywords: Health Quality, Stunting Outreach, Stunting Prevention, Tourism Village

ABSTRAK

Stunting merupakan kegagalan pertumbuhan dan perkembangan pada anak balita akibat kekurangan gizi kronis. Kondisi ini dapat menyebabkan tingginya angka kematian pada anak balita di Indonesia dan Asia Tenggara. Desa Keciput merupakan kawasan wisata di Provinsi Belitung yang memiliki potensi wisata alam yang melimpah, sehingga kawasan ini sangat strategis. Namun, sumber daya manusia di Keciput memiliki angka stunting yang cukup tinggi dibandingkan kawasan wisata lainnya. Pemerintah telah mengeluarkan berbagai kebijakan pencegahan stunting melalui 5 (lima) pilar utama, yaitu Peningkatan komitmen dan visi kepemimpinan di kementerian/lembaga, pemerintah provinsi, pemerintah daerah, pemerintah daerah kabupaten/kota, dan pemerintah desa; Meningkatkan komunikasi perubahan perilaku dan pemberdayaan masyarakat; Meningkatkan konvergensi intervensi spesifik dan intervensi sensitif pada kementerian/lembaga, pemerintah provinsi, daerah, pemerintah daerah kabupaten/kota, dan pemerintah desa; Meningkatkan ketahanan pangan dan gizi pada tingkat individu, keluarga, dan masyarakat dan Memperkuat pengembangan sistem, data, informasi, penelitian dan inovasi serta kebijakan lintas sektor mulai dari pemerintah pusat hingga tingkat desa. Kegiatan pengabdian kepada masyarakat ini penting untuk meningkatkan kesadaran dan pemahaman terhadap stunting dan upaya pencegahannya di Desa Keciput, Kecamatan Sijuk, Kabupaten Belitung, Provinsi Kepulauan Bangka Belitung.

Kata Kunci: Kualitas Kesehatan, Penjangkauan Stunting, Pencegahan Stunting, Desa Wisata

INTRODUCTION

Indonesia's 2020-2024 Vision is to focus on the development of Human Resources (HR), starting with development in the health sector. Priority programs in the health sector include maternal and toddler/child health (Budiastutik and Nugraheni, 2018). In his Vision Indonesia speech, the President of the Republic of Indonesia stated that the starting point for human resource development is efforts to ensure the health of pregnant women, the health of infants, toddlers and school-age children, including efforts to deal with Stunting (Randani et al., 2022). Stunting is a condition where a toddler has a length or height that is less when compared to his age (De Onis and Branca, 2016). In 2018, the prevalence rate of Stunting in Indonesia was 8.7 million or 30.7% for infants under five years old (toddlers); in this case, the figure was still above the target set by the World Health Organization (WHO) of 20%. Based on the 2018 Riskesdas, Stunting is 30.8% in 20 provinces in Indonesia, 2 of which are above 40%, while the other 18 provinces have a prevalence rate of 30-40% (Beal et al., 2018). The government conducted interventions in 1,000 focus villages in 100 districts/cities by mainstreaming a multi-sector convergence approach in the first phase of 2018.

The intervention activities were expanded to 1,600 focus villages in 160 districts/cities in the second phase of 2019 (Lestari et al., 2018). Activities will be expanded to all districts/cities in stages in the third phase of 2020-2024; this determination will be made annually in the Government Work Plan (RKP).

In 2019, the prevalence rate of stunting in Indonesia was 27.67%, according to the Toddler Nutrition Status survey results. In early 2021, the Government of Indonesia is targeting the stunting rate to drop to 14% in 2024. However, the target prevalence of stunting in toddlers for 2020 is 24.1%, while the EPPGBM SIGIZI report (as of January 20, 2021) from 34 provinces shows that 11.6% of toddlers experience stunting.

This condition continues to decline until 2023, showing a stunting prevalence of an average of 7% of the 16.2 million toddlers in Indonesia. These calculations show that the percentage indicator for stunting under five exceeds the set target (Rachmi et al., 2016). This condition illustrates that the achievement of the percentage of stunting this year is on track.

However, the prevalence of stunting in each province still shows alarming figures. Some areas of Indonesia still have a high stunting prevalence rate of up to 23.2%. The Indonesian

government is very concerned about handling the problem of stunting in the 2020-2024 Medium Term Development Plan (RPJMN) (Ahmadi and Triwinarto, 2019). The government is targeting a reduction in the stunting rate to a maximum of 19% by 2024.

Keciput Village is a significant tourist village because it has a lighthouse and the beauty of marine tourism, which has become a tourism icon in the Belitung district. Therefore, this region needs special attention regarding human resources, including health. So, Keciput becomes the target of socialization and prevention of stunting to improve the standard of living of the people in it. Good human resources can be a relative advantage of a region to further develop its potential.

Vice President of the Republic of Indonesia Ma'ruf Amin also delivered directives from the website (Purnomo, 2016). There are 5 (five) program pillars, namely (Kasjono et al., 2017, Fadila and Kurniawati, 2018):

1. Increase leadership commitment and vision in ministries/ agencies, provincial and regional governments, district/ city regional governments, and village governments.

2. Improvement of behaviour changes communication and community empowerment.

3. Increase the convergence of specific and sensitive interventions in ministries/ agencies, provincial, regional governments, district/ city regional governments and village governments.

4. Improve food and nutrition security at the individual, family and community levels.

5. Strengthening the development of systems, data, information, research and innovation

The health of human resources in Indonesia must constantly be improved, especially in areas with potential tourism, such as the Bangka Belitung Islands (Mediani, 2020, Azizah, 2023). The prevalence of stunting in that area should be no more than 2%, but data for 2023 shows a prevalence rate of up to 3.3%, which is considered high. Keciput Village is a tourist village with precious natural resources, such as Lengkuas Island, equipped with a lighthouse as an icon of Belitung (Hall et al., 2018, Azizah et al., 2023a, Azizah, 2023). So it is necessary to socialize and assist the community to reduce the prevalence of stunting in the Keciput Village to improve the quality of public

health (Azizah And Pramono, 2018, Azizah et al., 2022, Azizah et al., 2023b).

OBJECTIVES

Community service activities in the health sector have short term and long term goals. The short term goal is to provide first aid to stunting sufferers. Meanwhile, the long-term goal of this activity is to provide useful education for the community to better consider their nutrition and health in the future.

METHOD

This community service program uses a face-to-face (offline) method, with the following stages (Vinci et al., 2022):

1. The team coordinated with partners, namely the Keciput Village Government, Sijuk District, which was the location for the community service activities.
2. The team conducted social mapping related to the availability of human resources and equipment for activities, namely, door-to-door to residents' homes accompanied by village postage cadres.
3. Next, the team delivers notifications and directions to the residents that there will be door-to-door stunting socialization and counselling and the installation of stunting

measurement posters for toddlers in all residents' homes.

The implementation of the activity began by gathering all posyandu cadres in Keciput village on Monday, 6 March 2023. This agenda was carried out in distributing schedules to assist door-to-door socialization of stunting. Furthermore, the implementation of socialization in all residents' homes with children under five and pregnant women is based on data from posyandu cadres. This outreach and counselling are carried out door to door so that every citizen can consult, monitor and install stunting posters accompanied by direct analysis. The door-to-door socialization and counselling program lasted 3 days from 7 to 9 March 2023.

RESULT AND DISCUSSION

The Community Service activity carried out by the *Semangat Muda Indonesia* Foundation in Keciput Village, Sijuk District, Belitung Regency, was carried out on March 5-11, 2023. The theme was Stunting Socialization and counselling in Keciput Village. The aim is to realize an increase in an understanding of the community regarding stunting and efforts to prevent stunting in infants and toddlers (Vinci et al., 2022). The expected change is that the people living in the Keciput Village area will have

awareness and knowledge about what stunting is and prevention efforts which, among other things, can be done by fulfilling the need for nutritious food, especially for pregnant women, infants and toddlers (Puspitasari et al., 2021, Laili and Andriani, 2019).

This activity went smoothly with stunting outreach and counselling and installing stunting posters in 35 household in Keciput Village, Sijuk District, Belitung Regency. As expected, this program received a good response from the community, especially the activity targets. They not only have high awareness about nutrition but are also willing to get further education about nutrition, especially MPASI.

Stunting is a failure to thrive in children under five due to chronic malnutrition, especially in the first 1,000 days of life (HPK) (Beal et al., 2018). A lack of nutritional intake causes the failure to thrive in children under five for a long time, and the occurrence of repeated infections, and these two causative factors are influenced by an inadequate intake pattern, especially in 1,000 HPK (First Day of Birth) (Mediani, 2020). Malnutrition occurs when the baby is in the womb and early days after birth. However, stunting appears after the baby is two years old. To assess the nutritional status of children

according to anthropometric standards on the World Health Organization Standards for stunted and severely stunted toddlers, namely toddlers with body length (PB/U) or height (TB/U) according to their age compared to standard standards WHOMGRS (multicentre growth reference study) (De Onis and Branca, 2016).

Children are classified as stunted if their length or height for their age is lower than the applicable national standards (Rachmi et al., 2016). The standards are in the Maternal and Child Health (MCH) book. Stunting affects brain development, so the child's intelligence level is not optimal (Puspitasari et al., 2021). Not only are children more vulnerable to chronic diseases in their adult years, but even stunting and various nutritional problems are estimated to contribute to the loss of 2-3% of the Gross Domestic Product each year (Hall et al., 2018).

Based on the socialization of stunting in 35 households in Keciput Village, two children were found to be stunted, and three children were potentially stunted. After the implementation of socialization, the community has better knowledge of stunting than before; this can be seen from monitoring village health data, which is monitored regularly every month. The community understands more about the

importance of ASI and MPASI for babies' nutritional needs and toddlers' growth and development. So, the Kecciput village community has a high potential for stunting due to a lack of knowledge and comprehensive nutrition monitoring.

Several supporting factors in this activity are:

1. The participants who were invited to participate in this activity were very willing to gain new knowledge related to stunting, the definition of stunting, the factors that cause stunting and what measures can be taken to prevent stunting. As a result after the program, the Keciput Village Community has better capabilities to balance their daily food menu including food composition such as carbohydrates, protein, vegetables, fruit and milk. It means that this program increase their knowledge in nutrition to prevents stunting.
2. They are even willing to ask for further socialization and counseling related to nutrition, such as MPASI, which is beneficial for them.
3. This activity is fully supported by the Keciput Village Government, both directly and indirectly, and the village government also

provides facilities and human resources to carry out adequate stunting socialization and counselling, namely door-to-door to 35 household.

4. This activity is delivered directly by qualified health workers, doctors, nurses and nutritionists in the health field.



Figure 1. Stunting Socialization

Some of the obstacles encountered in the activity include the limited time for community consultations because service activities only last a few days (Dewi and Auliyyah, 2020, Wardana and Astuti, 2019, Riwayati et al., 2022). Tools and materials for activity demonstration materials, for example, the practice of measuring a child's height and weight to find out whether the person concerned is stunted, as well as the introduction of nutritious menus for babies and toddlers using only posters and conversations without any specific data records other than those listed in the Maternal Health Book and Children (MCH) (Vaivada et al., 2020).

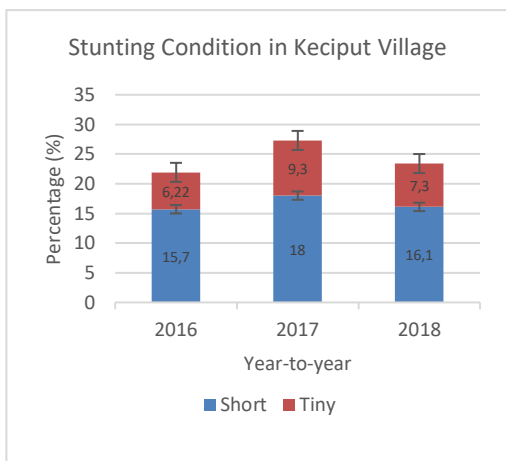


Figure 2. Stunting Condition in Keciput Village (MCH)

MCH only conveys general health data (height and weight) but does not include specific data that is directly related to stunting, such as data on nutritional balance intake consumed every day.



Figure 3. Stunting Measuring

In general, the cause of stunting is a lack of nutrition received by infants and toddlers, with several characteristics such as slowed growth, a face that looks younger than its age and the stages of puberty slowing down (Leroy and Frongillo, 2019, Mataram, 2017). Furthermore, it was enriched with material delivered by professional

health workers who conveyed the matter of providing iron intake for young women, so they do not experience anaemia and age-appropriate marriage preparations (avoiding child marriage), which can also be a factor causing stunting cases (Fadila and Kurniawati, 2018). Then the event continued with discussions and questions and answers between the residents and the community service team to determine the extent of the response and understanding obtained by the community members during the socialization and counselling activities (Moniaga et al., 2019, Permatasari et al., 2019).



Figure 3. Balance Nutrition Counselling

CONCLUSION AND RECOMMENDATION

Through the community service activities, the understanding of the community members in Keciput Village at first still thought that stunting was not a problem. However, after being given the material on stunting, this view changed, and

many people then became aware of the importance of fulfilling balanced nutrition, especially for pregnant women, babies and toddlers. Participants enthusiastically participated in the activity and hoped there would be further activities. The community's response and local government welcomed this activity and even asked to hold follow-up activities such as MPASI training. The local government should prepare a special stunting monitoring card to make the monitoring process more manageable more than just MCH.

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