



Establishment of Sakinah Aisiyiah Center (BSA) to Prevent Stunting

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Abstract

Data from the Sleman Health Office showed that the prevalence of stunting in the Gamping I Health Center was 9.02% and 9.76% in the Gamping II Health Center. The number of cases of stunting in Nogotirto Village for 2021 data has reached 73 cases. Most stunting incidents are caused by the rejection of stunting under five due to a lack of understanding of stunting, poor parenting factors, and feeding practices for infants and toddlers. For this reason, there is a need for a community-based stunting prevention movement, as stated in the 2020-2024 policy directions contained in the Indonesia SDGs Roadmap Towards 2030. Solution: Formation of Balai Sakinah 'Aisiyiah (BSA), formation of cadres, training of cadres, and provision of reading corners and educational media. Method: establishing BSA, increasing cadres' knowledge about stunting, IMD, exclusive breastfeeding, lactation management, and provision of MP-ASI and providing books and reading corner facilities for cadres; Provision of Cadre Education Media in preventing stunting. Results: the formation of 28 BSA cadres, there was an increase in cadre knowledge of > 25%, available reading corners, and educational media.

1. Introduction

The prevalence rate of stunting and malnutrition in Indonesia is one of the highest among countries in ASEAN. 1 out of 3 Indonesian children under five are stunted (Kementerian Perencanaan dan Pembangunan Nasional, 2019). The 2018 Basic Health Research (Riskesdas) results show that the prevalence of stunting in Indonesia is 30.8% (Badan Penelitian dan Pengembangan Kesehatan, 2018). According to the October 2019 Indonesian Toddler Nutrition Status Survey (SSGBI) Soft Launching data, the prevalence of stunting fell to 27.67% (Humas Kemenko PMK, 2020).

Linear growth disorder, often referred to as stunting, occurs especially in the first 2-3 years of life. This manifests the interaction effect between the lack of energy and nutrition intake and the incidence of infection. In theory, it is explained that at that age, the effect of birth weight on stunting is greatest at the initial six months of age and will decrease until the age of 2 years. In addition, poor environmental sanitation and family socio-economic factors are also risk factors for stunting(Rahayu et al., 2018). Related to demographic factors, it turns out that the data shows that stunting occurs in villages and cities, not only in the poor but also occurs in 29% of the rich population.(Direktorat Promosi & Pemberdayaan Masyarakat, 2018)

Stunting affects a child's brain development capacity in the academic field and economic productivity and increases the risk of chronic disease as an adult. Thus, stunting is a threat to the future of the younger generation and the nation, which must receive special attention from the government and the whole community(Kementerian Kesehatan Republik Indonesia, 2019). Stunting prevention requires not only the government's role through the Health Service and Puskesmas but also the role of parties who have direct contact with the community, such as community organizations, NGOs, etc.

As a community movement, 'Aisiyiah is committed to strengthening public health. 'Aisiyiah launched the 'Healthy Aisiyiah Movement (GRASS), which aims to increase every individual's awareness, willingness, and ability, especially 'Aisiyiah residents, to live healthily to improve their health status. The problem of stunting is one of the priorities included in the scope of GRASS(Muhammadiyah.or.id, n.d.).

The prevention of stunting in Sleman Regency goes well with the dynamics of Collaborative Governance. This is shown by the decrease in the stunting rate in the last three years, namely 11% in 2018, 8.38% in 2019, and decreased to 7.24% in 2020, according to the Sleman District Health Office 2021. The commitment of the Sleman Regency Government is also continued by setting targets by 2026 to reduce the stunting rate to below 5 percent. This commitment began with establishing a number of regulations to accelerate the achievement of the stunting reduction target through Sleman Regent Regulation Number 22.1 of 2021 concerning the Acceleration of Integrated Stunting Management, Sleman Regent Regulation Number 1.8 of 2021 concerning Social Safety Nets, and Regent Regulation number 28.(Sukanti & Faidati, 2021)

Data from the Sleman Health Office showed that the prevalence of stunting in the Gamping I Health Center was 9.02% and 9.76% in the Gamping II Health Center. The number of cases of stunting in Nogotirto Village for 2021 data has reached 73 cases.

Most stunting incidents are caused by the rejection of stunting under five due to a lack of understanding of stunting, poor parenting factors, and feeding practices for infants and toddlers. The Covid-19 pandemic in early 2020 disrupted the family economy, which had a major impact on family resilience. This is one of the risk factors for an increase in the incidence of stunting.

For this reason, efforts are needed to tackle community-based stunting as stated in the 2020-2024 policy directions in the Indonesia SDGs Roadmap Towards 2030. Seeing these various problems and the dangers that will be obtained, interventions are needed to deal with these problems.

2. Methods of Implementation

The implementation of this PKM went through several stages, starting with coordination and licensing to gather information related to the problems and needs of partners. The next stage is the establishment of the Aisiyiah Sakinah Center and the formation of cadres. After the cadres are formed, cadre training is carried out on stunting and its prevention, exclusive breastfeeding, provision of MP-ASI and lactation management, and training in educational media. The media and tools used include PowerPoint materials during counseling, stunting pocketbooks and flipcharts on Child Feeding Practices (IYCF) and Clean and Healthy Behavior (PHBS), and leaflets on preventing adolescent anemia.

3. Results and Discussion

The output achieved from service activities is the formation of BSA and BSA cadres. Balai Sakinah 'Aisiyiah is part of the national 'Aisiyiah program to create a prosperous village (Baldaturun Thayyibatun wa rabbun ghafur). BSA was formed as a forum for education, consultation, and assistance on reproductive health and nutrition, strengthening women's leadership and community empowerment. Programs are implemented according to the needs of the area where the BSA is formed. The goals of establishing BSA include increasing women's understanding and awareness of citizen rights (education, welfare, socio-economic protection, etc.), increasing women's leadership in the community, realizing community empowerment, and realizing a ta'awun community that helps each other (Djohantini et al., 2022). The cadres at BSA are expected to become agents of change in the community through involvement in development in their area (Rochimah, 2016).

The output of cadre training results from increasing partners' knowledge

regarding stunting, exclusive breastfeeding, provision of MP-ASI, lactation management, and educational media. The increase in partners' knowledge regarding stunting, MP-ASI provision, and lactation management is known based on the questionnaires conducted before and after the activity. The following presents an increase in cadres' knowledge about stunting, IMD, exclusive breastfeeding, lactation management, and provision of MP-ASI.

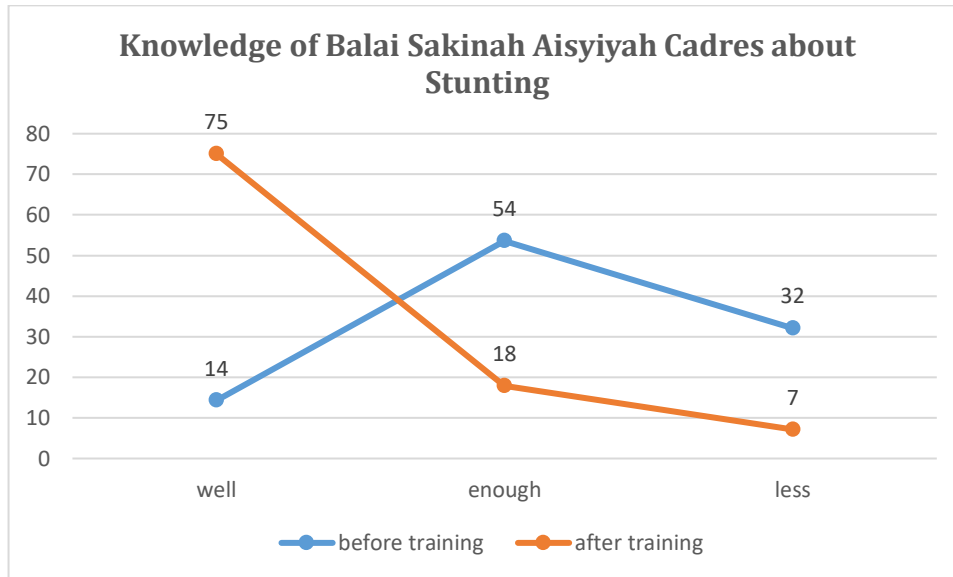


Figure 1. Increasing Knowledge of Balai Sakinah Aisyiyah Cadres about Stunting
There is an increase in good category knowledge from 14% to 75%.

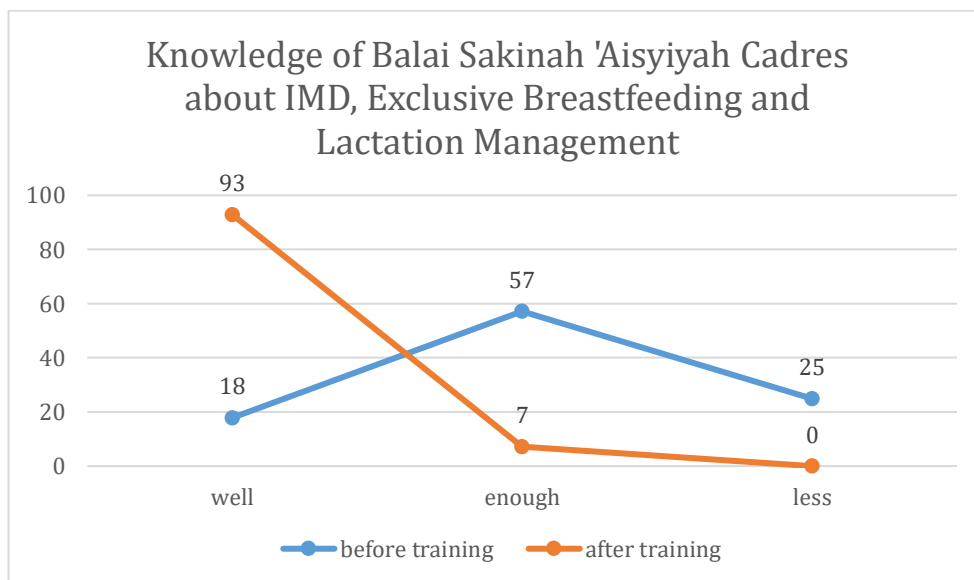
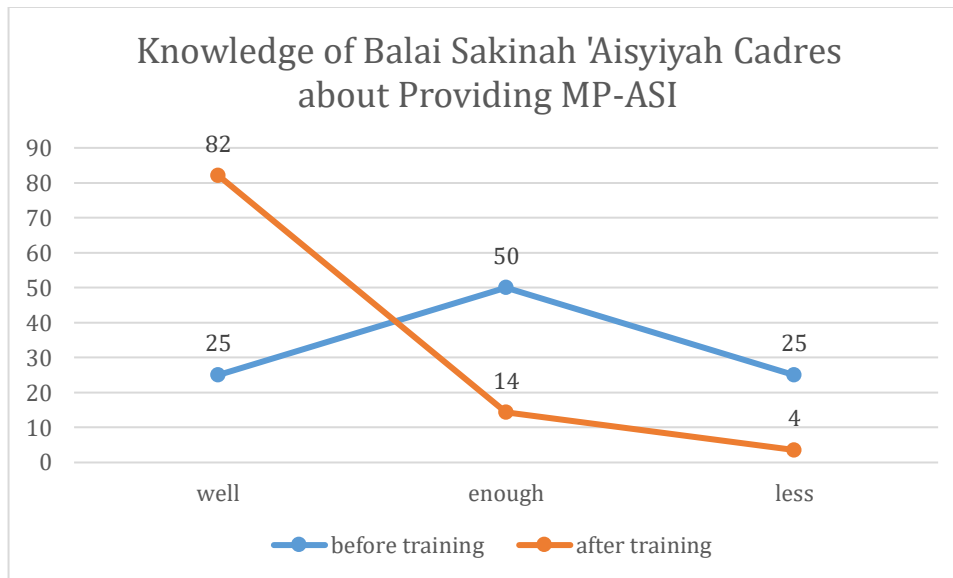


Figure 2. Increasing Knowledge of Balai Sakinah 'Aisyiyah Cadres about IMD, Exclusive Breastfeeding and Lactation Management



There was an increase in the knowledge of BSA cadres about IMD, Exclusive Breastfeeding, and Lactation Management in the Good category from 18% to 93%

There is an increase in the knowledge of BSA cadres about IMD, Exclusive Breastfeeding, and Lactation Management in the Good category from 25% to 82%

Efforts to accelerate stunting reduction can be intervened at posyandu, such as measuring height, and weight, giving PMT (supplementary feeding), educational activities for toddler mothers about IMD, exclusive breastfeeding, and giving MP-ASI. Thus the role of cadres in efforts to prevent stunting is very important. Exposure of the Director General of Public Health, Ministry of Health of the Republic of Indonesia regarding plans to strengthen posyandu in 2019, including 1) Capacity building in the form of orientation and refreshing and rewards system, 2) Provision of Handbooks for cadres, facilitators, and health workers 3) Provision of Educational Media in the form of educational teaching aids and KIE media Innovative. 4) Provision of facilities and infrastructure in the form of weighing equipment and equipment, MCH, and KMS books.(Megawati & Wiramihardja, 2019)

4. Conclusion

Based on the process and results of community service at the Branch Leaders 'Aisyiyah Nogotirto, the BSA Formation activity is the first step to increasing family resilience to prevent stunting. BSA can be useful as a forum for conducting education, consultation, assistance, complaints about Reproductive Health and Nutrition services, and community empowerment.

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