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Situation Analysis as a Effort to Accelerate Stunting Reduction in Labuhan Batu Regency in 2022

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Abstract. Indonesia has set a target in accordance with the SDGs Program in 2030 in the health sector, namely through efforts to improve nutrition and health quality in combating the prevalence of stunting. The achievement of the SDGs goals must be prepared from now on by coordinating cross-sectoral. Over the last 20 years, the handling of the stunting problem has been very slow, globally, the percentage of children whose growth is stunted has decreased by only 0.6% per year since 1999. It is predicted that if this continues, 15 years later it is estimated that 450 million children will experience growth retardation or stunting. The contributing factor is suspected to be the lack of cross-sectoral roles in preventing stunting, so it is necessary to strengthen the role through convergence action to accelerate stunting reduction. The role of Universities as the Regency/City Assistance Implementation Team through the Stunting Reduction Acceleration Program in 10 loci in Labuhan Batu Regency with a 5-pillar approach, namely; (1) increasing commitment and leadership of the Village/Urban Government; (2) System strengthening and development, data, information, research and innovation; (3) communication of behavior change and community empowerment in terms of nutrition, healthy behavior, mutual cooperation and independence; (4) convergence of specific and sensitive interventions through a family approach caring for stunting; (5) food security at the level *Individuals, Families and Communities through optimizing the use of local food ingredients. The* factors that encourage the implementation of convergence actions to accelerate stunting reduction are the government's commitment, as well as the involvement of various parties, both from the health and non-health sectors.

Keywords: Situation Analysis, Stunting, Convergence Action

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INTRODUCTION

Stunting is one of the problems faced in the health sector, namely the lack of optimal nutrition for the community, which is marked by the high number of stunting in children under five. who wish that the handling of stunting should be carried out as early as possible to free children, especially in Labuhan Batu from the risk of inhibiting brain development which causes children's intelligence levels to not be optimal (Kemenkes RI, 2018). Stunting is a condition of failure to thrive in children under five as a result of chronic malnutrition so that children are too short for their age. , 2012). From the time of the fetus to the age of the first two years, the child will experience a phase of rapid growth (growth spurt) so that this phase is a period of golden

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opportunity of life (window of opportunity) for the child (Desa et al., 2017). There are two provinces with very high prevalence of stunting, namely > 40%, namely North Sumatra and South Sumatra. Based on these prevalence figures, it is known that the incidence of stunting in Sumatra is high (Hendarwan et al., 2013). The prevalence of shortness (very short and short) in North Sumatra Province in 2018 was 32.5 percent. The prevalence rate of shortness in Labuhan Batu Regency in 2018 was short 16.31% and very short 21.06% (Hendarwan et al., 2013).

Stunting prevention efforts require the integrated implementation of nutrition interventions at the location and priority target groups of households in the first 1,000 days of life (HPK). The percentage of families who fulfill the Nutrition Awareness Family (Kadarzi) reaches 76.68% (Annual Survey of the Labuhanbatu District Health Office) in Labuhanbatu District in 2020 The percentage of Kadarzi in Labuhanbatu District is still below the national target of 80% (Hendarwan et al., 2013). Higher education is a forum that produces intellectual people in applying an innovation that is beneficial for the benefit so that the role of contributing in applying the knowledge that has been obtained is very important in solving existing problems (Ministry of Health RI, 2018). The government has held coordination and consolidation meetings by collaborating across sectors in the community and one of them is Universities in order to jointly realize a stunting reduction acceleration program with a target of 25.8% to 14% in 2024 (Poverty, 2017). Various efforts have been carried out but have not obtained maximum results through the North Sumatra Rector's Forum, so Universities play an important role in the stunting reduction acceleration program which is included in the stunting locus section to be able to implement the 5 Pillars of stunting intervention (Sumarni, 2015).

METHODS

This service method is carried out in several stages such as (Notoatmodjo, 2003); (1) Conducting Situation Analysis; (2) Conducting cross-sectoral coordination and consolidation; (3) Disseminating Situation Analysis; (4) Making Planning strategy with 5 pillars of Convergence approach.

RESULTS AND DISCUSSION

Situation Analysis

Labuhanbatu Regency is one of the areas on the East Coast of Sumatra. Geographically, Labuhanbatu Regency is located at 1041'00' - 2044'00" North Latitude and 99033' - 100022' East Longitude with an altitude of 0-700 meters above sea level. Labuhanbatu Regency occupies an area of 2,561.38 Km² (256,138 Ha). The Labuhanbatu Regency Government Administration consists of 9 sub-districts, and 98 definitive villages/kelurahan with a description of 23 urban villages and 75 villages with a population of 493,899 people. Labuhanbatu Regency is famous for its oil palm and rubber plantations. Labuhanbatu Regency has a strategic location, which is at the intersection of West Sumatra and Riau, which connects regional development centers in Sumatra and Java, and is directly adjacent to the Malacca Strait so that it has adequate access to foreign countries. Like most other areas in the North Sumatra Region, Labuhanbatu Regency is an area with a tropical climate. So this area has 2 seasons, namely the dry season and the rainy season. The dry season and the rainy season are usually marked by the number of rainy days and the volume of rainfall in the month of the season.

Based on the 2019 profile data, there were 528 stunting toddlers spread over 15 Puskesmas areas in Labuhanbatu Regency. The prevalence rate of shortness in Labuhan Batu Regency in 2019 was short 16.31% and very short 21.06%. The population density of Labuhanbatu Regency in 2020 is 493,899 people/km2. This means that every 1 km2 of Labuhanbatu Regency is inhabited by a population of approximately 193 people with an average of 4 people per household. Meanwhile, based on the results of the 2020 Susenas, the population density of Labuhanbatu is around 193 people/km2. Thus it can be concluded that the Labuhanbatu area is getting denser from year to year. Rantau Selatan sub-district is the most densely populated sub-

district at 1,150 people/km2. For the sub-district with the smallest population density in 2020 is Panai Tengah District, which is 94 people/km2.

Cross-sectoral Coordination and Consolidation

Based on the decision of the Minister of National Development Planning or the Head of Bappenas No. KEP.42./M.PPN/HK/04/2020 dated April 9, 2020 regarding the determination of the expansion of urban districts where the focus of integrated stunting reduction interventions has been set in 2018-2020 as many as 360 urban districts, one of which is Labuhan Batu Regency. Stunting prevention efforts require the integrated implementation of specific and sensitive interventions, especially nutrition improvement in locations and priority target groups of households in the first 1,000 days of life (HPK) (Nugroho et al., 2014). To equate perceptions related to tasks and functions in an effort to accelerate the reduction of stunting or failure to thrive in children, the Higher Education Assistance Implementation Team, both at the Provincial and Regency/Municipal Levels, held meetings in the context of consolidation and coordination. With the establishment of this meeting, it is hoped that the convergence of programs and activities from various sectors can work well, so that a strengthening of the management of one stunting data can be produced and strengthening of monitoring and evaluation and reporting of acceleration of stunting reduction, so as to formulate solutions and recommendations to overcome the problem. that occur in the district/city that they accompany (Public TIJ of, Health, 2008).



Disseminate Situation Analysis

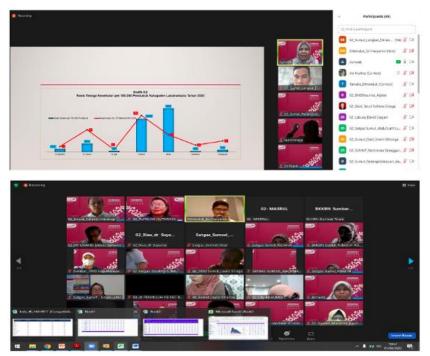
To achieve the Convergence of Stunting Reduction Policies in the Regions, the role of Higher Education Assistance to Regional Governments is an implementation of all existing innovations at Universities within the framework of accelerating Stunting Reduction by compiling an analysis of existing gaps, obstacles, challenges and opportunities. (1) The presentation is displayed based on the Gap Analysis in the Batubara Regency area, which is described on the slide below according to what was found both in the form of data and during field observations, the information conveyed in essence is as follows:

Weakness; (1) The translation of stunting handling commitments varies between villages according to the level of understanding and perception of the urgency of stunting handling for each village head; (2) The occurrence of a pandemic made the stunting budget relocated for handling covid in villages by 8%; (3) Massive campaigns are not adequate enough considering the geographical and socio-demographic conditions related to the tidal conditions in the three regions; (4) The pattern of coordination at several loci is hampered by the limitations of DM and the absence of strategic health workers (village midwives) due to geographical conditions; (5) Awareness of the community because most of the community only eats food without seeing improving family nutrition; (6) Myths that are still believed by most people regarding the food that must be consumed; (7) The stunting mash handling program in the form of specific nutrition interventions has not led to nutritional interventions really sensitive.

Opportunity; (1) The existence of pentahelix cooperation (Government, Private, Universities, Industrial Society, and Society) which can be developed to accelerate the reduction of stunting cases in accordance with their respective roles and authorities; (2) The existence of Android-based social media that can be maximized in a pattern of coordination that is hampered due to geographical and sociodemographic conditions; (3) Community potential (in this case such as associations of Youth Organizations, PKK, Dasawisma, Development of Toddler Families, Youth Families Development, WUS groups, UPPKS and so on) which quite a lot can accelerate stunting reduction acceleration programs

Strength; (1) Commitments have been mobilized starting from the Regent, sector Leading OPD, cross-sectoral OPD to the line of village heads, which have been initiated in several villages by the local village head, fiscal support and funding for stunting management programs through plotting the 2020 Village Fund budget; (2) National campaigns and communication of changes, the behavior carried out is top-down, this can be a strength because the top-down program will massively be followed by OPD and the lines below; (3) Massive campaigns have been carried out in the form of socializing the stunting program and strengthening awareness at several village loci; (4) The nutrition and food security program has been quite well implemented in collaboration with the Health Office in the form of a program that is carried out with a focus on handling nutrition specifically; (5) Awareness has emerged from regional leaders, heads of sector Leading OPDs, cross-sectoral and line-level OPDs to villages to cooperate in efforts to deal with stunting.

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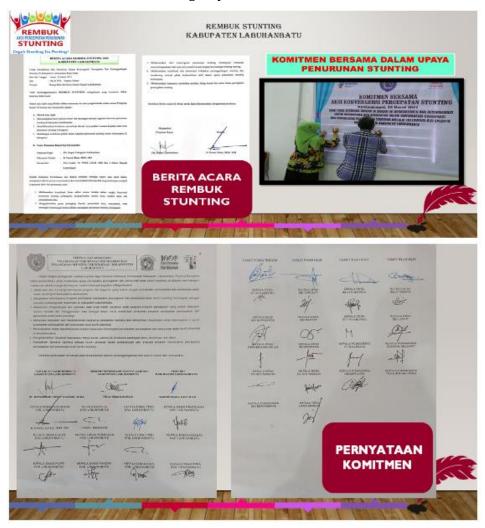


Recommendation Strategy Approach 5 Pillars of Convergence

Children who experience stunting result in decreased intellectual capacity, structural and functional disorders of nerves and brain cells that are permanent and cause a decrease in the

ability to absorb lessons at school age which will affect productivity as adults, and increase the risk of non-communicable diseases such as diabetes mellitus, hypertension. , coronary heart disease and stroke. Children experiencing stunting have the potential for imperfect growth and development, low motor skills and productivity, and have a higher risk of suffering from non-communicable diseases (Sholihah, 2021). Stunting in toddlers has an impact on potential economic losses due to decreased work productivity and maintenance costs. All of which will reduce the quality of human resources, productivity and competitiveness of the nation. Efforts to overcome the problem of stunting through a family approach will be able to achieve better results in the future (Dewi et al., 2022).

Based on the dissemination of Situation Analysis, the Stunting Reduction acceleration program in Labuhan Batu Regency can be utilized by giving birth to a recommendation to be implemented in a further program of activities based on the 5 pillars of stunting reduction intervention, namely: (1). Establishment of Strengthening with increased commitment and leadership of the Village / Kelurahan Government, (2) Establishment of Strengthening and System development. Data, Information, Research and Innovation in stunting prevention (3) Establishment of behavior change communication and Community Empowerment in terms of nutrition, healthy behavior, mutual cooperation and independence in reducing stunting, (4) Establishment of a convergence of Specific and Sensitive interventions through the approach of the Family Ambassador to Prevent Stunting (DUKCIN) (5) Establishment of local Food Security at individual, family and community levels. The activities of the Program for the Acceleration of Stunting Reduction in Labuhan Batu Regency in 2022 are described below:













CONCLUSION

Convergence action is needed to improve the participation of cross-sectoral actors in preventing stunting and speed up the rate at which stunting is being reduced. Stunting Reduction Acceleration Program in 10 loci in Labuhan Batu Regency with a 5-pillar approach, including (1) increasing commitment and leadership of the Village/Urban Government; (2) System strengthening and development, data, information, research and innovation; (3) communication of behavior change and community empowerment in terms of nutrition, healthy behavior, mutual coopera Government commitment and the involvement of several parties from the health and non-health sectors are two elements that boost the implementation of convergence efforts to speed up the reduction of stunting.

THANK-YOU NOTE

- 1. BKKBN of North Sumatra Province
- 2. Labuhan Batu Health Office, North Sumatra Province

REFERENCES

Desa, K., Tertinggal, P. D., & Indonesia, T. R. (2017). Buku saku desa dalam penanganan stunting. *Jakarta: Kementerian Desa, Pembangunan Daerah Tertinggal, dan Transmigrasi Republik Indonesia*.

Dewi, E. R., Mubaroq, M. H., & Febriani, D. (2022). Penerapan Metode Door To Door Dalam Pendampingan Gizi Balita Stunting di Desa Pamotan Kecamatan Pamotan Kabupaten Rembang. *Jurnal Pengabdian Kesehatan*, 5(2), 111-120

- Hariyadi, D., & Ekayanti, I. (2012). Analisis pengaruh perilaku keluarga sadar gizi terhadap stunting di propinsi kalimantan barat. *Teknologi dan Kejuruan: Jurnal teknologi, Kejuruan dan Pengajarannya, 34*(1).
- Hendarwan. H., Winarto A. T., Raflizar., Handayani K., Ida., Nugroho S. U. (2013). *Pokok-Pokok Hasil Riset Kesehatan Dasar Provinsi Sumatera Utara*. 2013. 107 p.
- Kemenkes RI. (2018). Buletin Stunting. Kementeri Kesehat RI. 301(5):1163-78.
- Kementrian Kesehatan RI. (2018). Strategi Komunikasi Perubahan Perilaku. (November).
- Kemiskinan, T. N. P. P. (2017). 100 kabupaten/kota prioritas untuk intervensi anak kerdil (stunting). *Jakarta: Tim Nasional Percepatan Penanggulangan Kemiskinan*.
- Notoatmodjo, S. (2003). *Ilmu Kesehatan Masyarakat, Rineka Cipta*. Jakarta: Rineka Cipta.
- Nugroho, A., Susanto, H., & Kartasurya, M. I. (2014). Pengaruh mikronutrien taburia terhadap perkembangan motorik anak usia 24-48 bulan yang stunting (Studi di Tanjungkarang Barat Kabupaten, Bandar Lampung). *Jurnal Gizi Indonesia (The Indonesian Journal of Nutrition)*, 3(1), 52-59.
- Public TIJ of, Health. (2008). *Beberapa faktor yang berhubungan dengan status balita stunting*. 2008. 8. 99–104.
- Sholihah, L. A. (2021). Stunting prevalence and its associated factors among children in primary school in Sidoarjo District: A secondary data analysis. *AcTion: Aceh Nutrition Journal*, 6(2), 156-162.
- Sumarni, S. (2015). Peran Sarjana Kesehaatan Masyarakat dalam Gerakan Penyelamatan 1000 Hari Pertama Kehidupan untuk Menurunkan Stunting dan Angka Kematian Ibu. In Conference: Seminar Nasional dan Saresehan Kesehatan Masyarakat, At Surabaya, Indonesia.