

COMMUNITY EMPOWERMENT TO PREVENT STUNTING THROUGH INTEGRATED HEALTH PROMOTION IN CILAYUNG VILLAGE, JATINANGOR SUB-DISTRICT**Mamat Lukman¹, Ahmad Yamin², Raini Diah Susanti^{3*}**¹⁻³Department of Community Nursing, Faculty of Nursing, Universitas Padjadjaran, Sumedang, West Java, Indonesia.

Email Korespondensi: raini.diah.susanti@unpad.ac.id

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Doi: <https://doi.org/10.33024/jkpm.v6i3.8729>**ABSTRACT**

Stunting is a growth disorder or a short (dwarf) child's height compared to his age standard. Of the problems that occurred in Cilayung Village, out of 517 toddlers, 12 experienced stunting and delays in thinking processes. This report provides an overview of community empowerment to increase community knowledge and skills in stunting prevention through integrated health promotion programs. This community empowerment program is carried out using a hybrid method. Preparatory activities are carried out offline and online, while extension and training implementation activities are carried out directly or offline. The results of the community empowerment program show that it can increase community knowledge and participation in efforts to prevent stunting in Cilayung Village, Jatinangor District. Much of the increase in public understanding and awareness is related to the importance of exclusive breastfeeding for infants, food processing for toddlers aged 2-5 years, maternal reproductive health and nutritious diets for children, and early stimulation for children in preventing stunting. The integrated stunting prevention health promotion program is expected to become one of the additional programs that aim to prevent stunting in Indonesia by developing capabilities and independence through community empowerment.

Keywords: Community Empowerment, Health Promotion, Integrated Programs, Prevention, Stunting

1. INTRODUCTION

Stunting is a growth disturbance or a short (dwarf) child's height compared to his age standard. The causes of stunting included malnutrition in pregnant women or children, poor parenting patterns, and unhealthy environmental factors (Giri et al., 2013). According to Onis et al. (2018), stunting is a growing problem caused by long-term inadequate nutritional intake, which is exacerbated by disease, especially in the first 1000 days of life (1000 HPK). Stunting has long-term impacts into adulthood, including decreased cognitive and physical development, risk of metabolic disease, and reduced productivity (Reinhardt & Fanzo, 2014).

The prevalence of toddler stunting in Indonesia is the second largest in Southeast Asia after Laos, reaching 43.8%. The results of the 2017 Nutritional Status Monitoring (PSG), the incidence of stunting under five was recorded at 26.6% (UNICEF, 2017). However, in the 2013 Riskeddas

results, the stunting rate fell from 37.2% to 30.8% (Kementerian Kesehatan Republik Indonesia, 2022).

The government has rolled out a national program for dealing with stunting in 2017, especially for rural community areas. The program prioritizes specific and sensitive nutritional management in the first 1000 days of life up to 6 years of age. Interventions include giving iron tablets during pregnancy, supplementary food for pregnant women, fulfilling nutrition, delivery at health workers, exclusive breastfeeding, complementary food for breastfeeding, complete primary immunization and vitamin A, as well as a clean and healthy lifestyle (Nahdlatul & Surabaya, 2019)

Parents have an essential role in fulfilling children's nutrition in preventing stunting problems in children (Munawaroh et al., 2022). Furthermore, Saifah (2019) research revealed that the family has an important role in health promotion related to the introduction and provision of nutritious food and health practices in the family area.

The problem in Cilayung Village is that children under five years old (BALITA) are still have children affected by stunting. Many parents still need help understanding or providing good stimulation to children. The interview results found that most Cilayung Village mothers did not know how to prevent stunting.

We carry out community empowerment which aims to increase people's knowledge and abilities related to stunting prevention through an integrated stunting prevention health promotion program in collaboration with health practitioners and cadres in empowering the community, especially women of childbearing age and mothers with toddlers in Cilayung Village, Jatinangor District, Sumedang Regency. The strategy for the integrated stunting prevention health promotion program that we carry out includes socialization of the benefits of exclusive breastfeeding to pregnant or breastfeeding mothers, ways of processing nutritious food for toddlers aged 2-5 years, early stimulation of child growth and development, as well as toddler nutritional status and parenting patterns.

2. MASALAH DAN RUMUSAN PERTANYAAN

Cilayung is a village in Jatinangor District, Sumedang Regency, West Java Province, Indonesia. Cilayung Village is located in the northernmost part of Jatinangor, a hilly area at the foot of Mount Manglayang, and is about four kilometres from the centre of the Jatinangor sub-district. Cilayung Village is divided into three hamlets: Hamlet I, II, and III. While the 11 neighbourhood units and 31 neighbourhood associations.

Based on the survey results, Cilayung village has a population of 4,429 people, including 2,526 men and 2,403 women, and consists of 1,563 household heads. The number of toddlers in Cilayung Village is 517 people, of whom 12 toddlers are stunting cases where a child has a shorter body than his age and experiences delays in thinking processes.

We compiled four stunting prevention program themes integrated into the health promotion program. This integrated stunting prevention health promotion aims to empower the community, especially women of childbearing age and mothers who have toddlers, to control and prevent stunting.

The formulation of the questions developed in preventing stunting in this community empowerment program is how is the impact of integrated stunting prevention health promotion through community empowerment programs in Cilayung Village, Jatinangor District.

The subjects or targets of this community empowerment program are residents of Cilayung Village, especially mothers who have children aged 2-5 years and pregnant and lactating women. The community empowerment program was located in Cilayung Village, Jatinangor District, Sumedang Regency, West Java. The implementation time is from 7 to 31 January 2022.

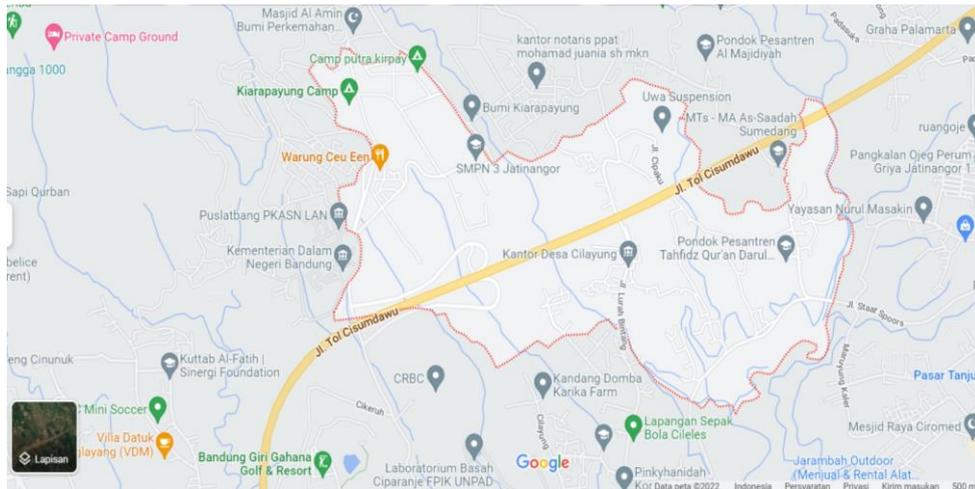


Figure 1 location of community empowerment program

3. STUDY REVIEW

a. The Concept of Stunting

Stunting is a condition in which children fail to thrive due to malnutrition or chronic infection (World Health Organization, 2014). Stunting is a condition of impaired growth in children. Namely, the child's height is lower or shorter (dwarf), and his body development is not normal occurs when children do not get the right amount of nutrition for a long time (chronic) (Giri et al., 2013). Signs and symptoms of stunting include the child's height not according to age, lower body weight not according to his age and slow cognitive development (Kementerian Kesehatan Republik Indonesia, 2022; Onis et al., 2018; and World Health Organization, 2014),

Various internal and external factors cause the incidence of stunting in children. According to research conducted by Kusuma et al. (2013), Internal factors that cause stunting include genetic factors and household and family factors. Therefore, children with stunting will experience various impacts, both in the short and long term. According to World Health Organization (2014), Stunting in children can impact three areas: health, development and the economy. Stunting prevention can be done by ensuring the child's nutritional or nutritional needs from the womb, providing balanced nutrition, early detection, exclusive breastfeeding, and proper care in child health care (S. Astuti et al., 2018; Iswati & Rosyida, 2020).

Stunting prevention can be done in several ways, among others:

- 1) Balanced nutrition is a food composition that includes sources of nutrients concerning food diversity (Kementrian Kesehatan RI, 2016). The nutritional coverage that each individual must fulfil is in the form of macro-nutrients for the formation of energy, such as protein, carbohydrates and fats, as well as micronutrients, such as vitamins and minerals (Munawaroh et al., 2022).
 - 2) Parenting is a series of things applied to nurture, care for, train, and guide. The responsibility for providing parenting in the family is held by parents who role in coordinating stimulation for children (Rita et al., 2019). Parenting is the mother's attitude and behaviour in the form of feeding, personal and environmental hygiene, giving affection, and everything related to the mother's condition in terms of health (Rita et al., 2019). Counselling on the importance of education in parenting is important for parents with toddlers (Rita et al., 2019).
 - 3) Stimulation is an activity to stimulate the basic abilities of children aged 0-6 years so that children grow and develop optimally. Every child needs to receive stimulation for child growth and development, which can be done by mothers and fathers, caregivers, other family members, and community groups. Lack of stimulation can cause deviations in child development and even permanent disturbances (Hati & Pratiwi, 2019). growth is the increase in physical size and body structure in part or whole so that it can be measured in units of length and weight. Development is the increase in the body's structure and function, which is more complex in gross movement, speech and language, socialization and independence. Growth and development occur simultaneously (Kementrian Kesehatan RI, 2016).
 - 4) Exclusive breastfeeding has given when the baby is born up to 6 months. Babies need enough breast milk to increase their intake of nutritional needs during their growth period. Exclusive breastfeeding is essential in the process of growth and development and health of children. There are many benefits to be gained from exclusive breastfeeding, one of which is the prevention of stunting in children (Hizriyani & Aji, 2021; S et al., 2021).
 - 5)
- b. Theory and concept of program planning
- 1) Hybrid or mixed methods are activity methods that combine two activities. Hybrid Learning or Blended Learning refers to a combination of e-learning-based learning methods (electronic learning) with face-to-face learning methods or conventional methods, called online or in the network and offline or outside the network (Fauzan & Arifin, 2020).
 - 2) Data collection is a method used to collect information. There are several techniques in data collection methods, namely interviews, questionnaires, observation, and a combination of the three (Sugiyono, 2015).
 - 3) Socialization is one way to help add knowledge or information to the community. Socialization face-to-face and directly is more effective than through the mass media or leaflets (Lubis et al., 2019). According to Notoatmodjo et al. (2012), several methods can be used, including lecture methods, demonstrations, group discussions, seminars, brainstorming, panels, role-playing, and symposiums.

- c. Community Empowerment
- d. The social role of community empowerment in the health sector includes mutual trust between families and communities, community cooperation, and helping each other. Research by Sulaeman et al. (2015) shows that the role of leadership in community empowerment in the health sector is to disseminate all health information, set an example, raise awareness, motivate, guide, mobilize, and facilitate resources.

4. METHOD

a. Implementation Method

This community empowerment program is carried out in a hybrid manner. Preparatory activities are carried out offline and online, while implementation activities are carried out directly or offline.

b. Preparation Stage

- 1) Team debriefing;
- 2) Preparation of assessment questionnaires;
- 3) interviews and data collection with the local government, cadres, and the community;
- 4) Analysis of the results of the assessment data;
- 5) Visits village health posts;
- 6) Discussion with cadres regarding activity plans;
- 7) Village community meetings;
- 8) Assignment of tasks and preparation of tools.

c. Implementation Stage

Program 1: Exclusive breastfeeding campaign

Socialization is carried out directly for pregnant and lactating women by implementing health protocols to prevent the spread of the COVID-19 virus. This activity targets pregnant women and breastfeeding mothers.

Implementation process:

- 1) Socialization in the form of presentation of exclusive breastfeeding material, question and answer sessions with midwives (speakers), distribution of posters, and games to entertain pregnant and to breastfeed women there, so they do not get too bored.
- 2) After the socialization, it posted posters at several integrated health service centres.

Evaluation related to socialization is carried out with cadres after the activity.

Program 2: Socialization and demonstration of nutritious food processing for toddlers aged 2-5

Socialization and demonstrations are carried out directly to pregnant and lactating women by implementing health protocols to prevent the spread of the COVID-19 virus. The activity targets mothers with toddlers aged 2-5 years in neighbourhood unit 05 and community pillar 06 Cilayung Village.

Implementation Process:

- 1) Determine the time and place for implementing activities that are strategic and easy to reach among residents.
- 2) Prepare the tools and materials needed for cooking demonstrations and making milk pudding which will be distributed to participants who;

- 3) Socialize how to choose nutritious food for children after 2-5 years;
- 4) Demonstrate how to process the right food.

Evaluation related to socialization with cadres after the activity is carried out.

Program 3: Socialization of Reproductive Health and Parenting Patterns socialization is carried out in person or offline with the Target Activities, namely Cadres and all members of Posyandu Rajawali Cilayung Village

Implementation Process:

- 1) Determine the time and place of implementation of activities.
- 2) Prepare tools and activity materials.
- 3) Direct socialization related to the Habit of Parenting Children When Eating and Maintaining the Mother's Reproductive Health

Evaluation related to socialization with cadres after the activity is carried out.

Program 4: Socialization of Early Child Development Stimulation

Socialization and play therapy are carried out directly or offline with the target activity, namely residents of Cilayung Village

implementation process:

- 1) Determine the time and place of implementation of activities.
- 2) Prepare tools and activity materials.
- 3) Socialization by explaining the stages of child stimulation, growth, and development to residents.
- 4) Play therapy with children.

Evaluation: Evaluation related to socialization with partner cadres.

d. Final Stages

- 1) Final evaluation of the results of activities with cadres.
- 2) The final community meeting.
- 3) Develop an activity continuity plan.

5. RESULTS AND DISCUSSION

a. Result

Evaluation of the results of community empowerment activities is carried out by observing and interviewing the community involved in the activity. The achievements of community empowerment activities that have been carried out include:

Program 1 (Exclusive breastfeeding campaign):

- 1) Enthusiasm and understanding of socialization participants can be seen from their presence from start to finish, and they are active in debriefing on interactive quizzes.
- 2) Activity participants can explain the definition and importance of exclusive breastfeeding and some good and correct ways to breastfeed.



Figure 1. Assessment Activities



Figure 2. Preparation and Absence Activities



Figure 3. Implementation of exclusive breastfeeding campaign

Program 2 (Socialization and demonstration of nutritious food processing for toddlers aged 2-5 years):

- 1) Activity participants can answer and explain about good nutritional intake for toddlers aged 2-5 years and its effect on stunting prevention.
- 2) Children seem interested in the food made by their mothers.



Figure 4. Interview



Figure 5. Socialization and demonstration of nutritious food processing for toddlers aged 2-5 years

Program 3 (Socialization of Reproductive Health and Parenting Patterns):

- 1) Participants answer and explain the importance of parenting and reproductive system health for stunting prevention.





Figure 6. Socialization of Reproductive Health and Parenting Patterns

Program 4 (Counseling on Early Stimulation of Child Development):

- 1) Activity participants can answer questions related to early stimulation of child development
- 2) Children can participate in play therapy activities accompanied by their mothers.



Figure 7. Socialization of Early Stimulation of Child Development

b. Discussion

The results of the community empowerment program show that it can increase community knowledge and participation in efforts to prevent stunting in Cilayung Village, Jatinangor District. Furthermore, in line with research by Astuti et al. (2020), it shows that community empowerment programs can increase the role of cadres and the community in stunting screening programs in children.

After the socialization of exclusive breastfeeding was carried out through evaluation through observation and interviews, it was found that there was an increase in public knowledge and awareness about the importance of exclusive breastfeeding for babies. Previous research revealed that after community empowerment, there was an increase in knowledge about exclusive breastfeeding to overcome nutritional problems for infants or toddlers with malnutrition (Rahma & Nuradhiani, 2019).

Another finding in this community empowerment was an increase in parents' knowledge and skills in proper food processing for toddlers aged 2-5 years in preventing stunting after being given interventions related to outreach and direct demonstrations. Research studies support these findings by Siswati et al. (2022), who revealed that after carrying out health education, there was an increase in knowledge and attitudes toward providing healthy food for stunting children's nutrition.

Communities who have been given health promotion can answer and discuss issues related to maternal reproductive health and a nutritious diet in children to prevent stunting. Previous research showed that after

education, there was an increase in the knowledge of pregnant women and breastfeeding mothers regarding balanced nutrition in toddlers (Rahma & Nuradhiani, 2019). Furthermore, studies by Ratnawati et al. (2022) show, In the adolescent population, after health promotion, there is an increase in knowledge related to reproductive health as an effort to prevent stunting.

Socialization regarding the importance of early stimulation to children in preventing stunting can help increase public knowledge and awareness to control stunting. In addition, previous studies showed an effect of educational programs on increasing parental behaviour in stimulating the growth and development of children with stunting (Hati & Pratiwi, 2019).

The integrated stunting prevention health promotion program method carried out using a community empowerment approach is considered to have a positive effect in increasing the knowledge, awareness and skills of the community in efforts to prevent and control stunting.

6. KESIMPULAN

Much of the increase in public knowledge and awareness is related to the importance of exclusive breastfeeding for infants in preventing stunting, food processing for toddlers aged 2-5 years in preventing stunting, maternal reproductive health and a nutritious diet in children in preventing stunting, and early stimulation in children in stunting prevention.

The integrated stunting prevention health promotion program is expected to become one of the additional programs in efforts to prevent stunting in Indonesia by developing the ability and independence of the community. Community service is then expected to involve various partners and institutions that can work together in developing a model of public health institutions that are managed and sustainably used by the community for stunting prevention efforts.

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