

Strategies for Handling Stunting in Nagan Raya Districts

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Abstract

Stunting is when a person's height is less than average based on age and gender. This study aims to determine the strategy of the Nagan Raya Health Office in reducing stunting rates. This type of research used qualitative research. Data collection techniques are observation, interviews, and documentation. Research informants were the Head of the Health Service, Head of Public Health, Head of Family Health and Nutrition, Head of Promotion and Community Empowerment, Head of Environmental Health, Occupational Health, and Sports. Data analysis techniques are data reduction, data management, and concluding. The results showed that the Nagan Raya health department's strategy for reducing stunting rates was quite good. With eight integrated stunting reduction interventions, specific nutrition interventions, and sensitive nutrition interventions collaborated with cross-sectoral involvement. In conclusion, from 8 integrated stunting reduction interventions, the basis is stunting consultation. The obstacles are that it is difficult to use the budget for stunting, uniting stakeholders' perceptions, and the village government lacks knowledge. Supporting resources are sufficient, namely human resources (HR), facilities, and infrastructure, but it is still insufficient in terms of the budget. Suggestions that socialization is given to the village government. It is hoped that the Health Service and government organizations involved will remain consistent and unite their perceptions and maximize their budget.

Keywords: Lowering; Number; Strategy; Stunting

Introduction

Stunting in toddlers needs special attention because it can cause stunted physical growth, mental development, and health status in children (Muliadi et al., 2021). Children who experience stunting impact poor school performance, low levels of education, and low income as adults, are more likely to grow up to be unhealthy and needy adults. Stunting in children is also associated with an increased vulnerability of children to diseases, infectious and non-communicable diseases (NCD), and an increased risk of being overweight and obese. Overweight and obesity in the long term can increase the risk of degenerative diseases. Stunting cases in children can predict the country's low quality of human resources. Stunting causes poor cognitive abilities, low productivity, and an increased risk of disease, resulting in long-term losses for the Indonesian economy (Setiawan. E et al., 2018).

In 2017, 22.2% or around 150.8 million children under five were stunted. However, this figure decreased compared to the stunting rate in 2000, which was 32.6% (Candra, A, 2020).

Data on the prevalence of stunting under five were collected by the World Health Organization (WHO); Indonesia is included in the third country with the

highest majority in the Southeast Asia/South-East Asia Regional (SEAR) region. The average prevalence of stunting under five in Indonesia from 2005-to 2017 was 36.4% (Candra, A, 2020).

Based on Riskesdas's (2018) data, Aceh is a province with many stunting cases, so it must immediately start preventive action. In Aceh, the prevalence of stunting in infants under two years old is relatively high, ranking 3rd out of 34 provinces, reaching 37.9 percent, while the national average prevalence is 29.9 percent. This means that 4 out of 10 babies born in Aceh Province suffer from stunting. Meanwhile, the prevalence of stunting in children under five years (toddlers) is 37.3%, with a national average of 30.8%. The Aceh Health Service noted that 51,496 children in Aceh were stunted. The Aceh government has issued (Pergub) Governor Regulation Number 4 of 2019 concerning Integrated Stunting Prevention and Handling in Aceh to reduce this stunting rate.

Based on research conducted by Saputri, R. A with the title the efforts of the local government in preventing stunting in the Province of the Bangka Belitung Islands. The study results show that, apart from programs originating from the central government, Bangka and West Bangka regencies have their innovation programs to accelerate the reduction/control of stunting in their

regions. However, it still takes time/process for these programs to be seen in actual implementation, and the significance of the results can be seen. For now, stunting prevention programs that have been carried out include; Provision of Supplementary Food (PMT) to infants and pregnant women, Giving Supplemental Blood Tablets (TTD) to adolescent girls and pregnant women, increasing complete basic immunization coverage for infants and toddlers, giving vitamin A to toddlers, and giving zinc in cases of diarrhea, especially in children. For pregnant women and toddlers, these programs should be closely monitored so that the programs implemented can achieve their targets. Meanwhile, regarding the amount and budget allocation, the budget allocated for stunting prevention is considered adequate. It only needs an optimizer in its implementation to see the expected significance (Saputri R.A, 2019).

Initial data obtained at the Nagan Raya Health Office shows the prevalence of stunting in 2019 from 13,621 toddlers, as many as 2,345 toddlers experiencing stunting with 17.22%. The number of stunting rates in the sub-districts, namely in 2019, as many as 746 children under five in Darul Makmur sub-district, 300 under-fives in Tripa Makmur sub-district, 247 under-fives in Kuala Pesisir sub-district, 228 in Seunagan sub-district, 209 under-fives in Tadu Raya sub-district, 200 under-fives in Kuala sub-district, 130 toddlers in Beutong District, 115 toddlers in Suka Makmue District, 111 toddlers in East Seunagan District and 59 toddlers in Beutong Banggala District who suffer from stunting (Dinkes Nagan Raya, 2021).

In 2020 there was a decrease from 12,162 toddlers to as many as 1,097 toddlers who experienced stunting by 9.02%. The total number of stunting in the sub-district is 269 children under five in Darul Makmur sub-district, 171 under-fives in Tripa Makmur sub-district, 85 under-fives in Kuala Pesisir sub-district, 47 under-fives in Seunagan sub-district, 174 under-fives in Tadu Raya sub-district, 164 under-fives in Kuala sub-district, three under-fives in Beutong sub-district. , 25 toddlers in Suka Makmue District, 120 toddlers in East Seunagan District, and 39 toddlers in Beutong Banggala District who suffer from stunting. (Dinkes Nagan Raya, 2021).

Based on the description above, the researcher is interested in conducting research entitled "Analysis of the Strategy of the Nagan Raya Health Service in Reducing Stunting Rates in 2021".

Methods

The research method uses qualitative methods. This research was conducted at the Nagan Raya District Health Office. The study was conducted from April to May 2021. Three primary informants were the health office, the head of public health, and family health and nutrition with five informants. Supporting informants are two people: the promotion and community empowerment section, environmental health section, occupational health, and sports. Primary data sources are data collected directly from the object of research, and secondary data is obtained from data that already exists or has been ordered by the health department. Data collection techniques are observation, interviews, and documentation. Data analysis uses data reduction, presentation, and conclusion drawing/verification.

Results

After conducting interviews with several informants at the Nagan Raya Health Office, the following research results were obtained:

Corporate Strategy

In this case, according to the question regarding the strategy used by the Health Office to reduce stunting rates, the following are the answers of the informants:

Informant	Answer
IU3	<i>"Umm, when asked about strategy in stunting, there is a guide. We have Eight Integrated Actions Interventions to reduce stunting in the district. The first is a situation analysis activity; the second is a stunting consultation activity at the sub-district and district levels. Then, there is an activity plan. There is a Regent/Mayor regulation regarding the role of the Village. There is guidance for human development cadres. A data management system does recording and reporting, including e-PPGBM. There are stunting measurement and publication activities, then the eighth action performance review, so all eight acts."</i>



Program Strategy

Regarding the Health Office program in reducing stunting rates, the following are the answers of the informants:

Informant	Answer
IU2	<i>"Um, a lot. There are sensitive and specific ones. Those sensitive are outside the Health Office, for example, latrines and birth certificates, the main thing is related to stunting reduction, so that's a sensitive one. Specifically, our tasks are services for pregnant women, tablets to add blood and immunizations, etc."</i>

Resource Support Strategy

Regarding the factors of supporting resources in reducing stunting rates, the following are the answers of the informants:

Informant	Answer
IU1	<i>"When asked about the supporting factors, there are resource factors in the workforce, finance, facilities and infrastructure, and technology. Ummm, for health facilities supporting the success of stunting in Nagan Raya Regency, we in Nagan Raya have 14 health centers consisting of 5 inpatient health centers, nine non-inpatient health centers, and one regional general hospital. In Nagan Raya Regency."</i>

Discussion

This study examines how the Nagan Raya Health Service's strategy in reducing stunting rates in 2021 is seen from the aspects of organizational design, program strategy, and resource support strategies. To find out the process carried out by the Nagan Raya Health Service, the researchers referred to 3 aspects, namely:

Corporate Strategy

Based on interviews with all informants about Corporate Strategy (Organizational Strategy), the researchers concluded that the Nagan Raya District Health Office carried out eight integrated stunting reduction interventions, namely as follows.

Situation analysis

Identifying the prevalence of stunting in the district/city area, the availability of programs to be

carried out, and the obstacles experienced in the implementation of integrated nutrition interventions, the performance of which is designing the objectives of implementing a situation analysis, reviewing the results of relevant previous situation analyze and carrying out stunting, situation analysis is also based on action 6, namely the data management system and also see action 7, namely the results of the measurement and publication of stunting and based on action 8, namely by looking at the annual performance review action;

Activity plan

The preparation of an activity plan to improve the implementation of integrated nutrition interventions, the performance of which is the preparation of activity plans, consulting activity designs, disclosing activity designs in stunting consultations;

Rembuk Stunting

Conducted jointly between local governments and non-government institutions to convey the results of the situation analysis and design of stunting reduction intervention plans and declare regional government commitments, agree on an integrated stunting reduction intervention plan and stunting consultations as well as discuss the results of action 7, namely the results of measurements and publications stunting;

Regent/Mayor Regulation on the role of the Village

Provide legal certainty for villages to carry out their roles and responsibilities in integrated nutrition interventions, the implementation of which is to draw up a regent/mayor regulation draft, discuss the current as well as stipulate and disseminate regent/mayor regulations;

Human development cadre development

Ensure the availability and functioning of cadres who assist the Village Government in implementing integrated nutrition interventions at the village level;

Data management system

Improve the data management system at the district/city level to support the implementation of specific nutrition interventions and sensitive nutrition interventions, the performance of which is identifying data needs and gaps, assessing the current system, preparing a data system improvement plan, and reviewing improvements and utilization of data systems, in the data management system this time the health office uses thee-PPGBM data system;

Stunting measurement and publication

Measurement of growth and development in children under five and publication of district/city stunting rates as well as utilizing the results of measurement data to monitor progress;

Performance review

During the past year, it was carried out by identifying data sources and collecting program/activity data, implementing an integrated stunting reduction annual performance review, and cross-departmental organizations. The results of these activities were the preparation of a performance review document. The eight integrated stunting reduction interventions have been carried out, and the ones that have significantly impacted the reduction in stunting rates are all these actions. However, the basis for this is stunting consultations. The Nagan Raya District Health Office cooperates with cross-sectoral efforts to reduce stunting so that the established program can be effective and efficient (Salusu, 2016).

Research conducted by Hermawati and Sastrawan shows that the integrated stunting prevention program has not been entirely run optimally because of the many technical obstacles that occurred during the implementation of the activity program in each OPD in the field (Hermawati, Sastrawan, 2020).

Program Strategy

Based on the results of interviews with all informants about the Program Strategy (Program Strategy), the researchers concluded that the program in reducing stunting rates, namely Specific nutrition intervention, is an activity that is carried out directly to overcome the occurrence of stunting such as infection, maternal nutritional status, food intake, and immunization, intervention The health sector carries out specific nutrition. Sensitive nutrition intervention is an effort to prevent and reduce nutritional problems indirectly. The non-health sector generally carries out this activity. However, the Nagan Raya Health Office carries out one of the sensitive nutrition interventions, triggering STBM (Total Sanitation Based on Health). Society under environmental health.

The obstacles experienced by the Nagan Raya District Health Office in this stunting reduction program include the difficulty of using village funds for stunting and uniting stakeholders' perceptions. Many village governments do not understand stunting, causing incomplete support for this stunting fund and implementing socialization in the community. People listen without executing it.

Based on research conducted by Latifa Suhada Nisa, it is stated that the health sector carries out specific interventions by focusing on the First 1000 Days of Life (HPK) program, while sensitive interventions include providing access to clean water and sanitation. Apart from health, socioeconomic factors are also known to influence stunting, such as poverty, education level, and family income (Nisa, S, L, 2018).

Resource Support Strategy

Based on interviews with all informants about the Resource Support Strategy, the researchers conclude that the factors that support reducing stunting are specific nutrition intervention factors and sensitive nutrition interventions from resource factors in the workforce, finance, facilities, infrastructure, and technology. The best resources in the Nagan Raya Health Office are Human Resources (HR), facilities, and infrastructure.

In reducing the stunting rate, the health office does not have a sufficient budget. In villages experiencing stunting, there are sufficient ones, such as in Seunagan District. There are several villages, and some are still insufficient because village governments still do not support their budget in reducing stunting rates.

The supporting factors for Nagan Raya health facilities are 14 Puskesmas consisting of 5 inpatient health centers, nine non-inpatient health centers, and 1 unit of the Regional General Hospital (RSUD). The funding sources are the Special Allocation Fund (DAK), village funds (APBDesa), Regency APBD, Provincial APBD, and Ministry/Agency funds (APBN). The funding provided is still insufficient due to delays in allocating village funds.

Fatris Rudmini shows that the health department's strategy in overcoming the prevalence of stunting in children under five in Simeulue Regency is limited to providing education and HR training activities for health workers at the district level postage cadres and puskesmas. The Simeulue Health Office has also formed a cross-sectoral collaboration, coordinating with several related agencies to tackle stunting in Simeulue Regency (Rudmini, F, 2020).

Conclusion

Based on the research results conducted by researchers, the following conclusions can be drawn: Corporate Strategy, eight integrated stunting reduction interventions, were carried out, of which eight actions were the basis, namely stunting consultation. Program Strategy specific nutrition interventions and sensitive nutrition interventions are carried out in collaboration with cross-sectoral involvement. The programs have

been implemented, but not all have been achieved. At the same time, the obstacles experienced include the complex budget to use for stunting, uniting stakeholders' perceptions, and the village government, which lacks knowledge about stunting. Resource Support Strategy From the supporting resources it is sufficient, namely human resources, facilities, and infrastructure. However, in terms of the budget at the health office, it is insufficient, while in the Village there are sufficient and some are still insufficient.

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Author Contributions and Competing Interest

Contributing authors for this research are interested in collecting in-depth interview data, analyzing the results, and compiling the manuscript.

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