

## Prevention of Stunting in Children and Pregnant Women Through 4 Healthy 5 Perfect Nutritious Food in Pansor Village

Eliyana<sup>1</sup>, Sapriadi<sup>2</sup>, Atnika<sup>3</sup>, Risnawati<sup>4</sup>, Arina Manasikana<sup>5</sup>, Ican Kanedi<sup>6</sup>, Imam Kusairi<sup>7</sup>, Dendi<sup>8</sup>

Prodi Pendidikan Guru Sekolah Dasar, Sekolah Tinggi Keguruan dan Ilmu Pendidikan Hamzar Lombok Utara

---

### Article Info

#### Article history:

Accepted: 27 September 2024

Published: 08 Oktober 2024

---

### Keywords:

Stunting, Socialization

---

### Abstract

*In Indonesia, one of the health problems that frequently arises is stunting. Currently, Indonesia is ranked 5th in the incidence of stunting in babies in the world. In Indonesia, stunting is called stunting, meaning there are obstacles to physical development and brain development in children. The prevalence of West Nusa Tenggara (NTB) was 24.6%, decreasing to 8.1% compared to information from the Indonesian nutritional status survey (SSGI), where one of the villages, Pansor Village, had 39 standing babies, the aim of carrying out this research activity was To avoid the number of incidents in babies in Pansor village, the approach taken is to provide outreach activities about stunting and its consequences, explaining the dangers of stunting to children to the community, especially mothers with two bodies. Explaining the consumption of nutritious food through demonstration activities for making bonus meals, methods for implementing clean and healthy living behavior through hand washing activities to cadre mothers and mothers of two in the RT. Indeed, 75% of cadre mothers and women with two bodies in Pansor village have undertaken socialization regarding stunting, the result of dedication to the community is that the women of cadres and mothers with two bodies are able to master the movement of washing their hands and making additional food.*

*This is an open access article under the [Creative Commons Attribution-ShareAlike 4.0 International License](https://creativecommons.org/licenses/by-sa/4.0/)*



---

### Corresponding Author:

Eliyana

Sekolah Tinggi Keguruan dan Ilmu Pendidikan Hamzar Lombok Utara

[eliyanaramzi9@gmail.com](mailto:eliyanaramzi9@gmail.com)

---

## 1. INTRODUCTION

Stunting is one of the health problems in Indonesia, currently Indonesia is ranked 5th in the incidence of stunting in babies in the world. In Indonesia, stunting is called stunting, meaning there are obstacles to physical development and brain development in children. Stunting, which is characterized by a size that does not match the child's age, is a chronic problem of nutritional problems. In children, stunting can occur in the first 1000 days of birth and affects many aspects, including social, economic, consumption, food, infections, nutritional status of the mother, widespread disease, micronutrient deficiencies, and environment. and nutrients, (Hidayat Flavia Aurelia, 2019). What is stunting? Stunting is a condition where a person's body size is shorter than the height of another person. Usually, stunting can be caused by several factors, including poor nutrition, lack of knowledge about health and nutrition, limited health services, and lack of access. to nutritious food. (Ramadani Azzahra, Nasution Kei Roger et al, 2023), What are the effects of stunting? The unfavorable consequences that can be caused by stunting include short-

term delays in brain growth, intelligence, obstacles to physical development, and metabolic problems in the body. The body's immunity makes it easy to get sick, and has a big impact on the emergence of diabetes, obesity, heart and blood vessel disease, cancer, skepticism, and disability in old age (For the World Health Organization), the permissibility limit for stunting in an area is 20%. For the 2018 lower health study (Riskesdas) which was carried out by health research and development (litbangkes), the stunting rate that occurred in Indonesia in 2018 reached 30.8%. This means that about 3 Indonesian children face stunting. This figure has decreased from the previous year, namely 37.2% in 2013. Even though it has shrunk, it is still far from the World Health Organization limit.

## **2. IMPLEMENTATION METHOD**

Based on the problems faced by partners, several alternative solutions that can be offered are;

1. Providing outreach to the community about how to prevent stunting in children through parents in Pansor Village
2. Provide outreach to the community regarding the dangers of stunting in children in Pansor Village

The implementation of this program uses a participatory approach, meaning that the fostered partners will be actively involved in each stage and the coaching activities will be carried out through socialization activities about the dangers of stunting, guidance on clean and healthy living attitudes, hand washing demonstrations followed by giving bonus meals to babies who are experiencing it. stunting.

## **3. RESULTS AND DISCUSSION**

The dedication activity was carried out in several steps, namely, observing positions, collecting information on children affected by stunting, carrying out socialization, and providing nutritious food such as vegetables. The socialization was carried out on August 24, 2024. This activity was attended by 30 people

1. Observation of the location and socialization of activities

The position used is a place that has been considered from a strategic location perspective so that it is possible to optimize the arrival of socialization targets. The distance from the KKN post is approximately 1 kilometer which takes approximately 5 minutes by motorbike. The socialization of activities is focused on children affected by stunting and mothers with two bodies, cadres, PKK, and the wider community.

2. Collecting information on children who are stunted

Based on information held by posyandu cadres in Pansor village, a total of 39 children categorized as stunting came from 7 hamlets: Pansor Energi 6 people, Pansor Senginjang 5 people, Pansor Kunijati 5 people, Pansor Barat 3 people, Pansor Tengah 5 people, Pansor lendang galuh 8 people, and pansor side dish 7 people. This number is the real figure for the number of children affected by stunting in Pansor village in 2024, but this figure may change with the birth of children that will occur in the future, either in the next month or year, because Pansor village has a fairly significant rate of early marriage, the majority of children in Pansor village marry when they are still in Early Middle School (SMP) or 13-15 years old, which is still considered child age. This is definitely one aspect of the formation of stunting in children born to mothers who are still at an early age. Because based on a statement from (Doctor. Dian Indah Purnama, Sp. Og in the novel 100+ important things pregnant women should know 2014) explains, the maximum age for women to have two bodies is 20-35 years. Indeed, technically, women can have two bodies and give birth during puberty until menopause, which is around the age of 12 to 51 years.

## **1. Efforts to avoid stunting through outreach activities carried out by KKN STKIP HAMZAR in Pansor village**

As an effort to prevent stunting in Pansor village, socialization activities are carried out as a facility to convey data to residents about the dangers of stunting for children because stunting is a fairly big problem for children's development. How do you know stunting? Firstly, measure PB or TB using standardized infant meter/stadiometer measuring equipment and standardized measurement methods. Second.

By looking at the PB/U or TB/U development curve in the KIA book (World Health Organization curve) whether the child is<- 2SD or<- 3SD. The period of developmental problems, stunting can occur in pregnancy and can continue usually up to the first 2 years after birth. The period from the time of conception until the child is 2 years old (the first 1000 days) has been identified as a very critical period in terms of opportunities for providing intervention. Not just stunting What is a more significant problem is that the process of stunting occurs coincides with the process of creating obstacles to the development and growth of all other organs such as the brain, heart and kidneys. Children who are categorized as stunting have an identity that can be seen in terms of body weight and band size. Stunted children

generally the child's weight is lower than children his age, the child's body size is shorter than appropriate for his age, the child's bone development is delayed, the child's face looks younger than his age, the child's ability to focus and learning memory tends to be poor, children who are stunted also tend to be quieter, Dental development in children slows down, children are more easily affected by inflammatory diseases, and children also feel tired and inactive more easily than children their age.

Stunting action framework. Special nutritional interventions (contribute 30%) interventions directed at children in the first 1000 days of life (HPK). This activity is usually carried out by the health sector with short-term intervention targeting pregnant mothers, breastfeeding mothers and babies. Nutritionally sensitive interventions (contributing 70%) are demonstrated through development activities in the region by the health sector. The target is universal citizens, special action for 1000 HPK. Examples of interventions include the development of clean water, sanitation, and early childhood education.

We created a program as a form of preventing stunting in Pansor Village in the form of socialization and providing nutritious food. which we carried out on August 24 2024, in the socialization of the module delivered by resource person Novita Heni Suryani S. Tr Gz. The dangers of stunting, the identity of stunting and efforts to prevent stunting were explained. Apart from explaining this, the resource person also provided guidance regarding explanations related to simple healthy foods that are available at home, such as rice as a source of carbohydrates, spinach as a source of vitamins, tempeh and tofu. Eggs as protein and milk as a source of calcium. This food can be measured to provide adequate protein to the child so that the taste and nutritional content of the child can be adjusted better, and there are also several types of food that parents can consume, such as fish, eggs, meat, seafood, nuts, grains, milk, cheese, yogurt, and various fruits and vegetables which are rich in vitamins, minerals and fiber which support healthy growth and development, as well as some parental habits that can cause stunting in children such as smoking and consuming alcohol all the time. pregnancy, mental problems in mothers, pregnancies of young children, anemia in mothers, consumption of non-nutritious food for pregnant women and

hypertension. There are also some foods that can cause stunting in children, namely, foods with added sugar, such as drinks or sweet snacks that are not consumed. Recommended to be distributed to toddlers under 2 years old, practical noodles that are often consumed. Apart from observing food, the resource person also conveyed the meaning of healthy living. One method of healthy living that everyone can do is taking a shower, brushing their teeth, dressing nicely, combing their hair, washing their hands with soap and maintaining the cleanliness of the area.

Specific investment in providing food to toddlers at the age of 6 months, starting from the guidance on giving MPASI according to the second KIA novel, if toddlers are given MPASI immediately starting from the age of 6 months, the third, if they have been given MPASI, the value of giving it is whether it contains enough animal protein and a little fiber (vegetables). / fruit) 4th, the amount of MPASI given ( $\frac{1}{2}$  glass or 100 ml per meal and increased according to the baby's ability) 5th, the frequency of giving MPASI (starting from  $\frac{2}{3}$  a day) 6th, the type of MPASI (starting with a fine texture and persist in aggressive levels, nasitim) to 7th provision with responsive feeding (bonding and recognizing hunger signals and distributing food to toddlers on a scheduled basis).

Ages 6-24 months are prone to nutritional deficiencies. After the age of 6 months, breast milk alone is not enough to fulfill nutritional deficiencies in toddlers, ages 4-8 months breast milk decreases 30%, ages 9-11 months decreases 50% and 12 months and above micronutrients (iron and zinc) decrease by 95-97%. The composition of food as a partner for breast milk (MPASI) must contain nutrients such as breast milk which has essential amino acids and 30-40% fat (animal protein has fat whereas vegetable protein does not have fat like the composition of breast milk). The type and amount of nutritional requirements for protein/day come from at the age of 6-11 months: 15 grams of protein 1-2 years: 20 grams of protein 3-5 years: 25 proteins, types of animal protein, one egg (60 grams) = 6 grams, shrimp (50 grams) = 12 gr, one mackerel fish (90-100 gr) = 19 gr, one piece of meat (40 gr) = 13 gr, one piece of liver (30 gr) = 7 gr, one piece of chicken (40-50 gr) = 6.5 gr, one piece of duck (40-50 gr) = 9.5 gr, one more catfish (90-100 gr) = 11 gr, UHT liquid milk 125 ml = 4 gr.

MPASI (breast milk food) is the main food given to toddlers or babies made from animal protein as the main meal (big meal) which is distributed 3 times a day, whereas PMT (giving bonus food) is a snack or snack made from animal protein which is distributed to accompany breast milk and MPASI and is distributed 1-2 times a day, calculation of animal requirements for main meals (MPASI) and local MPT ingredients, animal protein requirements for children 6 months - 11 months/day: 15 gr/day MPASI 7.5- 10 gr, from MPT distributed by 5- 5.7 gr. Animal protein needs for children 1- 2 years: 20 gr/ day MPASI 10- 12.5 gr, from MPT distributed by 7.5 to 10 grams, animal protein needs for children 3-5 years/day: 25 grams/day MPASI 12.5-15 grams of PMT divided into 10-12.5 grams. The module was informed by resource person Novita Heny Suryani S. Tr GZ, the participants or targets of this program were able to master the module well so that at the end of the presentation of the material when the question-and-answer session opened there were several participants asking several questions, among others.

- a. Can stunting in children continue until they become adults?
- b. Can local food cause stunting?
- c. What kind of parenting style can be applied to children who are stunted?

## 2. Providing healthy vegetables by students of the Hamzar Teacher Training and Education College (STKIP HAMZAR).

In addition to delivering the material during the socialization, the activity organizing committee, namely Real Work Lecture (KKN) students at the Hamzar Teacher Training and Education College (STKIP HAMZAR), also provided vegetables as a demonstration of examples of types of food that are healthy for the body, both for health and as helpful food. prevent stunting in children. Even though the quantity or portions are not large, it is hoped that by providing a few examples of these types of vegetables, it can become a reference for parents to always choose healthy types of food and vegetables. In this way, the stunting rate can be prevented from increasing, but this comes back to self-awareness, especially parents.

## 4. CONCLUSIONS AND RECOMMENDATIONS

### Conclusion

Prevention of stunting in the Pansor village area is carried out through several sessions, namely observation, collecting information on children affected by stunting, socialization, and providing healthy food (vegetables) to mothers targeted by the program. From some of these activities it can be concluded 1. Observations were carried out in the first week of implementing real work lectures in Pansor village, accompanied by the village government directly on Tuesday, July 30 2024.2. Collecting information on children affected by stunting was attempted by requesting information from posyandu cadres in Pansor village.3. The socialization was held on Saturday, August 24 2024 at the Pansor village office hall which was attended by 30 people who were the main target of this activity. 4. Providing healthy food (healthy vegetables), these vegetables are prepared by students of the Hamzar Real Work Lecture (KKN) School of Teacher Training and Learning (STKIP HAMZAR).

By using individual student fees instead of using funds from the village. After conducting socialization activities with residents in Pansor village, the target women are able to understand well the modules provided by the resource persons and they are able to explain again about the modules provided, and are able to demonstrate instructions given by the resource person, such as a clean area, washing hands with soap, washing clothes, maintaining parenting patterns, choosing healthy and nutritious food for children, paying attention to everything the child eats and drinks, and so on.

### Suggestion

In implementing stunting prevention, all family members, cadres and community members should be involved so that all levels of society can understand the importance of properly observing the dangers of stunting in children.

## 5. BIBLIOGRAPHY

- Adilansyah, A., Annisya, A., & Argubi, A. H. (2018, September). Terorisme di Bima: Kajian Perubahan Perilaku Individu Biasa Menjadi Teroris. In *Prosiding Seminar Nasional Lembaga Penelitian Dan Pendidikan (LPP) Mandala* (pp. 25-44).
- Asmawati luluk, 2023, pencegahan stunting, melalui ketehnanan lokal bangten serta pengasuhan digital, harian pembelajaran anak umur dini, vol. 7, nomor 6, perihal 28- 29
- Hadi, H., & Subhani, A. (2017, October). Internalisasi karakter peduli lingkungan dan tanggap bencana pada siswa sekolah melalui program Geography Partner Schools. In *Prosiding Seminar Nasional Pendidik dan Pengembang Pendidikan Indonesia* (Vol. 1, No. 1, pp. 176-188).
- Hidayat flavia Aurelia, 2019, upaya penangkalan stunting lewat pemberian santapan bonus serta pelaksanaan pola hidup sehat di PAUD tunas mulia desa pabean kecamatan diragu kabupaten probolinggo, harian abi panca marga, vol. 1 nomor. 1 perihal. 30

- Junaidin, J., Santoso, H., & Argubi, A. H. (2018, September). Revitalisasi Kearifan Lokal Dalam Pencegahan Penyalahgunaan Narkoba Di Kalangan Pelajar Kota Bima. In *Prosiding Seminar Nasional Lembaga Penelitian Dan Pendidikan (LPP) Mandala* (pp. 301-309).
- Munandar, A. (2018, March). Kurikulum sebagai jantung pendidikan. In *Prosiding Seminar Nasional Pendidik dan Pengembang Pendidikan Indonesia* (Vol. 1, No. 1, pp. 52-51).
- Musifa bela, febrianti nurul, misrinah misrinah, 2023, sosialisasi upaya penangkalan stunting lewat pengenalan santapan sehat buat bunda serta bayi di desa kebon daleman kecamatan temanggung, harian bina desa vol. 5 nomor. 4 perihal. 331
- Ramadani azzahra, nasution kei roger dkk*, 2023, bimbingan penangkalan stunting lewat pemberian santapan bergizi program mahasiswa kkn universitas riau, harian dedikasi warga vol. 4 nomor. 4 perihal. 28
- Sari kartika, hariani siti dkk*, 2021, penangkalan stunting lewat pemberdayaan warga dengan komunikasi serta bimbingan di daerah desa candirejo kecamatan ungaran barat kabupaten semarang, harian dedikasi kesehatan vol. 4 nomor. 1 perihal. 34- 35.
- Suryatningsih, H. (2018, September). Dampak Gempa Bumi Lombok Terhadap Prilaku Anak. In *Prosiding Seminar Nasional Lembaga Penelitian Dan Pendidikan (LPP) Mandala* (pp. 262-268).