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Implementation Of The Stunting Prevention Socialization Program And Provision Of PMT In Gunjan Asri Village

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Abstract
Stunting is a chronic nutritional problem that remains a major public health challenge in Indonesia, including at the local level. This study aims to describe the implementation of stunting prevention and management programs in Gunjan Asri Village, North Lombok Regency, focusing on stunting prevention awareness campaigns and the provision of supplementary feeding (PMT). This research employed a descriptive qualitative method with data collected through observation, interviews, and documentation involving posyandu cadres, village officials, health center staff, and parents of children under five. The findings show that the awareness campaign conducted on August 30, 2025, successfully improved community understanding of the importance of balanced nutrition, parenting practices, and child health, although its effectiveness still requires repeated activities to sustainably change behavior. Meanwhile, the supplementary feeding program held on September 6, 2025, contributed positively to improving children's nutritional intake, particularly for six children identified as stunted, but its implementation was constrained by limited funding, resulting in a one-time activity. These findings highlight that awareness campaigns and supplementary feeding can serve as effective strategies in supporting the acceleration of stunting reduction, but greater consistency, budget support, and cross-sector collaboration are required to ensure optimal and sustainable impact.

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1. BACKGROUND

Stunting is a form of chronic nutritional problem characterized by a child's height being lower than the standard for their age due to long-term malnutrition. This malnutrition usually occurs from pregnancy until the child is two years old, known as the First 1,000 Days of Life (HPK), a crucial phase that determines the quality of a child's future growth and development (Atamou et al., 2023). Children who experience *stunting* not only are shorter than their peers, but they are also at risk of various other health problems, such as low immunity, delayed motor development, and impaired brain and nervous system development. As a result, children *stunting* tend to have lower cognitive abilities, difficulty concentrating, and suboptimal academic performance when they enter school age. This condition certainly has an impact on the quality of human resources in the long term, because children who grow up with stunting potentially have low work productivity, limited competitiveness, and a high risk of developing non-communicable diseases such as diabetes, hypertension, and heart disease in adulthood. Therefore, *stunting* is seen as not only a health problem, but also a development problem that can hinder improving the quality of the nation's next generation (WHO, 2023).

Nationally, the prevalence stunting experienced a decline but is still at a figure that

requires attention, the results of the Indonesian Nutritional Status Survey/Health Survey reported a decline in prevalence stunting nationally to 19.8% (2024), from 21.5% in 2023. This decline shows progress, but the figure of ~20% means that almost 1 in 5 toddlers still experience stunting so that large-scale interventions are continuously needed (Ministry of Health of the Republic of Indonesia, 2022). At the provincial level, West Nusa Tenggara (NTB) shows the dynamics of the number of cases. Stunting which fluctuates between years and districts/cities. Provincial/regional public data records variations in prevalence between districts; in particular, North Lombok Regency is recorded as having a high percentage of stunted toddlers (stunting) in the range of tens to twenty percent in recent years' surveys, although some regional reports recorded higher figures in previous years, indicating inequities and the need for specific local interventions.

Gunjan Asri Village was chosen as the research location because it has characteristics that are relevant to the problem stunting at the local level. This village still faces challenges of Social issues closely related to the practice of child marriage, influenced by the strong role of customary law. This situation has implications for the increased risk of teenage pregnancy, which is not supported by physical readiness or nutritional knowledge, potentially resulting in the birth of children with suboptimal nutritional status. Furthermore, data availability regarding six children identified as experiencing child malnutrition is lacking stunting Based on reports from village integrated health post (Posyandu) cadres, targeted interventions are needed. Support from the village government, schools, community health centers, and local community organizations also creates a conducive environment for program implementation, such as outreach on child marriage prevention and outreach on child marriage prevention and management of stunting, as well as supplementary feeding (PMT).

Based on this background, this study aims to describe the implementation of prevention and handling programs stunting in Gunjan Asri Village. Specifically, this study describes the planning and implementation process of prevention outreach stunting and providing PMT to toddlers, presenting descriptive data related to the number of children stunting in the village, and identifying obstacles faced in program implementation. This study also provides recommendations for strengthening prevention interventions of stunting sustainably at the village level.

PROBLEM SUMMARY

The problem formulation in this study focuses on how to implement the prevention socialization program *stunting* and the provision of additional food (PMT) in Gunjan Asri Village was implemented, as well as the obstacles faced in efforts to reduce the number *stunting* which are still found in the village.

THEORETICAL BASIS

Stunting

Stunting is a chronic nutritional problem that occurs frequently in developing countries, including Indonesia. According to WHO (2023), *stunting* is a condition of stunted growth in toddlers due to chronic malnutrition that persists over a long period of time. This condition is characterized by a child's height being below the average growth standard for children their age. *Stunting* usually occurs due to a combination of low nutritional intake, repeated infections, and inadequate health care.

The Indonesian Ministry of Health (2022) also defines stunting as a disorder of growth and development in children due to chronic malnutrition that occurs from the fetal period to early childhood. A child's life, especially during the golden period of the First 1,000 Days of Life (HPK), which includes pregnancy until the child is two years old. During this period, nutritional needs are crucial to support a child's physical growth and brain development. Malnutrition during this period will have serious consequences and be difficult to correct in subsequent phases. In addition to affecting physical growth, children who experience malnutrition of stunting are also

at risk of experiencing cognitive development disorders, motor delays, and decreased body immunity (UNICEF, 2021). This means that stunting is not only a health problem, but also a long-term development problem because it will affect the quality of human resources in the future. Therefore, WHO places stunting as an important indicator in measuring the nutritional and health status of children in a country.

According to Anwar et al. (2022) the impact stunting is not only seen in the child's physical condition, but also includes aspects of health, cognitive development, and long-term quality of life. Short-term impacts, children stunting are more susceptible to infectious diseases, both mild and severe, because their immune systems are not optimally developed. In addition, stunting can inhibit the development of the brain and nervous system, which has implications for delayed cognitive, motor, and language development. Children who experience stunting tend to have difficulty concentrating and learning, so their academic achievement is lower than that of children with normal nutritional status.(Primasari & Keliat, 2020). Long-term impact, stunting has serious consequences for the quality of human resources. Children who grow up with stunting are at risk of having low work capacity and productivity in adulthood, thus affecting the competitiveness of the workforce at the national and global levels. In addition, stunting Increased vulnerability to non-communicable diseases (NCDs) in adulthood, such as type 2 diabetes mellitus, hypertension, and heart disease (Pratiwi et al., 2021). These impacts not only affect individuals' quality of life but also create social and economic burdens for families and the nation.

Causative factor *Stunting*

Stunting is a condition influenced by various interrelated factors, both direct and indirect. The most dominant direct factor is a lack of adequate nutritional intake in children. Inadequate nutritional intake, especially during the first 1,000 days of life (HPK), will inhibit the growth of children's body cells and brains (Ministry of Health of the Republic of Indonesia, 2022). Inappropriate feeding practices, such as Delays in providing complementary foods (MP-ASI) or poor-quality MP-ASI contribute to this worsening condition. Furthermore, repeated infections, such as diarrhea and acute respiratory infections, can interfere with nutrient absorption, making children susceptible to stunted growth (Komalasari et al., 2020).

Indirect factors that contribute to stunting This includes suboptimal parenting patterns and childcare practices. According to Nirmalasari (2020), parenting patterns that do not pay attention to nutritional needs, growth and development stimulation, and child hygiene are closely related to high rates of child malnutrition stunting an unhealthy living environment, particularly poor sanitation and limited access to clean water, is a significant risk factor because it increases a child's likelihood of recurrent infections. Furthermore, the mother's health during pregnancy also plays a significant role. Poor maternal nutritional status, anemia during pregnancy, young maternal age due to child marriage, and closely spaced births can increase the risk of having a low birth weight (LBW) baby, which can be the beginning of a cycle of miscarriage *stunting* (Wulandari & Arianti, 2023). Thus, *stunting is* not only a child's problem, but is also closely related to maternal health, family behavior, and broader environmental factors.

2. RESEARCH METHODS

This study used a qualitative descriptive method and was conducted in Gunjan Asri Village, North Lombok Regency in 2025. Research informants included integrated health post (Posyandu) cadres, village officials, community health center (Puskesmas) staff, and several parents of toddlers. Data were collected through observation, interviews, and documentation, then analyzed qualitatively using descriptive data reduction, data presentation, and conclusion drawing.

3. RESULTS AND DISCUSSION

Results of the Prevention Socialization Program *Stunting*

Prevention socialization program *stunting* event in Gunjan Asri Village was held on August 30, 2025, at Karya Lotara Junior High School/Senior High School. This activity was a collaboration between KKN students, the village government, the Bayan Community Health Center (Puskesmas BLUD) Technical Implementation Unit (UPTD BLUD), and local community organizations. The target audience included students, their parents, and the community, who were invited to receive education about stunting. The socialization material was delivered by a nutritionist from the Bayan Health Center, with an emphasis on understanding regarding stunting, causal factors, long-term impacts on child growth and development, and preventive measures through nutrition balanced and improved parenting. Participant enthusiasm was high, evident in the students' active participation in the discussion and Q&A sessions. To increase participation, the committee provided door prizes for participants who actively asked questions, making the event more interactive.

The results of this activity show that socialization is able to increase the community's basic knowledge regarding stunting and building awareness of the importance of the family's role in prevention. Furthermore, cross-sectoral involvement, including from schools, village officials, and community health centers, underscores the importance of multi-stakeholder collaboration in supporting community health programs at the village level. However, effective outreach still requires follow-up, including repeated activities and consistent information dissemination, to truly drive long-term community behavior change.

Implementation of PMT Provision

The supplementary feeding program (PMT) was implemented at the integrated health post (Posyandu) activities in Gunjan Asri Village, precisely on September 6, 2025, with the main target being children who were identified as experiencing stunting and other children as a form of prevention. Based on data from Posyandu cadres, six children were identified stunting in the hamlets of Riset Sari and Mekar Asri. This data served as a reference in determining the quantity and type of PMT provided. The PMT distributed consisted of simple, nutritious foods readily available to the community, including boiled eggs, milk, and bananas. These foods were chosen because they contain animal protein, calcium, vitamins, and minerals essential for child growth. The preparation process was carried out by KKN students and Posyandu cadres, and then distributed directly during Posyandu activities.

The community, particularly parents, responded positively, as this activity was seen as helping provide additional nutrition for their children. Furthermore, the distribution of PMT provided an indirect educational opportunity, showing parents examples of nutritious foods that children should consume regularly. However, the program's implementation faced limitations, including the limited number of PMT provided, which was limited to the budget, and the single-day implementation of the program. Therefore, while PMT provides short-term benefits, its sustainability is highly dependent on the support of the village government, community health centers, and the active participation of the community.

4. DISCUSSION

The supplementary feeding program (PMT) in Gunjan Asri Village was implemented during integrated health post activities on September 6, 2025, targeting identified children *stunting* and other children as a form of prevention. Based on data from Posyandu cadres, there are six children stunting in the hamlets of Riset Sari and Mekar Asri, which are priority recipients. The PMT provided includes boiled eggs, milk, and bananas, which contain essential macro and micronutrients to support child growth (Sihite & Rotua, 2023). PMT activities align with national policy stipulated in Presidential Regulation Number 72 of 2021 concerning the Acceleration of Malnutrition Reduction. *Stunting* Presidential Decree emphasizes the importance of specific

nutrition interventions through the provision of nutritious food during the first 1,000 days of life (HPK), as well as nutrition-sensitive interventions through cross-sectoral activities such as community empowerment and education on consumption patterns (Ichsan et al., 2022). The PMT program implemented in Gunjan Asri Village can be categorized as a specific nutrition intervention because it focuses on providing direct nutrition to children *stunting*.

The implementation results demonstrated enthusiasm from parents, as PMT not only provided additional nutritional benefits but also served as an educational tool for children to learn about healthy food choices that can be applied daily. However, budget constraints were encountered, which meant PMT could only be provided once during the program. This implies that, despite its benefits, the program's sustainability requires integration with village policies, support from integrated health posts (Posyandu), and ongoing coordination with community health centers (Puskesmas).

5. CONCLUSION AND SUGGESTIONS

Conclusion

Based on the research results, the prevention socialization program *stunting* A village-based study demonstrated increased community understanding of the importance of balanced nutrition, parenting, and child health care. The implementation of supplementary feeding (PMT) also had a positive impact in helping meet toddler nutritional needs, although there were still limitations in menu sustainability and variety. These results align with national policy stipulated in Presidential Decree No. 72 of 2021 concerning the Acceleration of Malnutrition Reduction. *Stunting*, which emphasizes cross-sector collaboration and strengthening specific and sensitive nutrition programs. Thus, it can be concluded that socialization and PMT are an effective strategy, but still needs improvement in terms of consistency, monitoring, and active community participation.

Suggestion

Based on the research results, it is recommended that village governments strengthen budget support and conduct ongoing monitoring of the supplementary feeding program (PMT) to ensure its implementation is more consistent and varied. Integrated service post (Posyandu) cadres and health workers are expected to increase the intensity of outreach through more interactive methods to encourage more active community involvement in prevention activities of *stunting* is also hoped that the public will become more aware and proactive in implementing a balanced, nutritious diet and independently maintaining children's health. Furthermore, future researchers are advised to expand their research focus to evaluate the long-term impact of PMT on children's nutritional status to provide more comprehensive results and enrich academic references and practical applications.

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