

Implementation of the Accelerated Stunting Handling Program

Ginung Pratidina¹, Cecep Wahyudin^{2*}, Rita Rahmawati³, Ratu Ulfah Zakiah⁴,
Yeni Handayani⁵, Regita Noviani Alya Putri⁶

¹²³⁴⁵⁶Public Administration Study Program, Universitas Djuanda, Indonesia.

*Corresponding author, email: cecep.wahyudin@unida.ac.id

Abstract

The East Bogor District Government implemented an accelerated stunting handling program to reduce stunting. This research aims to evaluate the effectiveness of implementing the acceleration program for handling stunting in the East Bogor Regency. The research method used is descriptive quantitative research. Data was collected through interviews and questionnaires given to respondents. The collected data was analyzed using the Weight Mean Score (WMS) method to calculate the average score of respondents. The research results show that the program accelerates treatment stunting in East Bogor District, Bogor City, which is very good. The dimensions of communication, resources, attitude of implementers, bureaucratic structure, and provision of PMT and MPASI show an average score of 87%, included in the perfect criteria. In the PMT and MPASI dimensions, the average score reached 90%, indicating the program's success in terms of PMT and MPASI. These results show that the East Bogor District Government firmly understands the importance of appointing bureaucrats/program implementers, providing work motivation incentives, and responding well to statutory regulations. This research can be a basis for developing and improving treatment programs that are more effective in the East Bogor District and contribute to efforts to overcome problems in the region.

Keywords:

acceleration; East Bogor; implementation program; stunting handling

Introduction

Stunting is a critical nutritional issue, especially in countries with high poverty levels that are developing. Stunting results from linear growth disorders in children under five, which is caused by dietary deficiencies that last for an extended period, from pregnancy to 24 months of age. Lack of nutritional intake during a child's early growth period can hinder physical development, increase the risk of disease, hinder cognitive development, and even be fatal. Children who experience stunting are at risk of decreasing intellectual abilities and productivity and potentially face the risk of degenerative diseases in the future. According to the World Health Organization (WHO), child growth standards are based on body length index compared to age (PB/U) or height index compared to age (TB/U), with a limit of (z-score) less than -2 SD. Stunting, or shortness in toddlers, can be detected when the child's length or height is measured and then compared with standards, and the measurement results are within the range considered normal by the Ministry of Health of the Republic of Indonesia (Norsanti, 2021)

According to the Indonesian Nutrition Status Survey (SSGI) of the Ministry of Health, 2022, the prevalence of children under five in Indonesia reached 21.6%. This figure decreased by 2.8 points compared to the previous year (Rokom, 2023). East Nusa Tenggara (NTT) remains the province with the highest figure 35.3%. Even though it is still in the top position, the prevalence of toddler stunting in NTT has decreased from 37.8% in 2021. Furthermore, West Sulawesi is ranked second in the prevalence of children under five, a stunning 35%. Followed by West Papua with a figure of 34.6% and West Nusa Tenggara with a figure of 32.7%. There are 18 provinces above the national average regarding the prevalence of children under five stunting. Meanwhile, 16 provinces are below the national average. On the other hand, Bali has a prevalence of toddlers which is lowest in all of Indonesia. The percentage is only 8%, far below the figure-stunting national in 2022 (<https://databoks.katadata.co.id/datapublish/2023/02/02/daftar-prevalensi-balita-stunting-di-indonesia-pada-2022-provinsi-mana-teratas>).

There are differences in data regarding the number of stunting in Bogor City between data issued by the central government and data held by the Bogor City Health Office. According to significant government data, statistics in Bogor City increased to 18.7%. However, the Bogor City Health Service recorded figures stunting only 3.5% based on the Toddler Weighing Month (BPB) in August 2022. Data differences like this can occur due to different data sources, data collection methods, or data interpretation and processing differences. This can be a challenge in effectively identifying and resolving the problem of stunting. Even though Bogor City's economic growth is above average, there is still an increase in numbers stunting in the last two years from 16% to 18.7%. This shows that work still needs to be done to treat stunting in Bogor City.

Based on toddler coverage data in February 2023, some children experience stunting, as many as 222 children for the scope of East Bogor District, Bogor City. Various efforts are made by the East Bogor District Government of Bogor City to handle cases of stunting. This is by implementing an accelerated handling program stunting, which focuses on addressing pregnant women, health care at health center, and providing additional food to accompany breast milk. In this case, East Bogor District through the Friday Fish Eating (JUMANI) and Supplementary Food Providing (PMT) programs as an effort to accelerate the reduction in the number of stunting (Source; East Bogor District).

JUMANI is one of the prevention programs in East Bogor District that provides toddlers in East Bogor District with food in the form of fish, vegetables, milk, and eggs. With this program, it is hoped that toddlers in the East Bogor District will receive balanced nutrition and good health to speed up case handling. Stunting in the community of East Bogor District. For the JUMANI (Fish Eating Friday) program to continue, East Bogor District received assistance from PT. Through CSR in the form of fish, vegetables, eggs, and milk, Ceva is provided regularly every Friday. The

final assistance will be provided until November 2022. Food distribution is also carried out at Posyandu at least once a month.

The Supplementary Food Providing Program (PMT) is an activity of providing additional food such as formula milk, UHT milk, and biscuits in collaboration with UPTD Pulo Armyn Health Center, East Bogor Health Center, PKK members, and Pokja IV cadres, as well as related public sectors.

This research was conducted to evaluate the extent to which the accelerated treatment program stunting, which was implemented in East Bogor District, has successfully dealt with the problem of stunting. This research aims to assess the program's implementation, its effect on reducing the number of stunting, and its impact on children's health conditions and development in East Bogor District. This evaluation involves assessing the implementation of the program, its impact on reducing the number of stunting, and its impact on the health conditions and development of children in the sub-district.

Identifying inhibiting and supporting factors: This research was also conducted to identify factors that influence the success of the stunting management program in the East Bogor District. This includes inhibiting factors hindering program implementation, such as lack of resources, ineffective coordination, or public awareness. Apart from that, this research will also look for supporting factors that play a role in the program's success, such as active community involvement, cross-sector collaboration, or adequate policy support.

Providing recommendations for program improvement: Based on the research results, another objective is to offer constructive recommendations for improving the stunting management program in East Bogor District. These recommendations may include improving program implementation, overcoming barriers, increasing community participation, or optimizing available resources. Thus, this research can be a basis for developing and enhancing programs that are more effective in dealing with stunting in the East Bogor District, Bogor City.

Methods

This research is descriptive quantitative research carried out to analyze data by describing or describing data collected as the data without the intention of making generalizations. The data collection technique for this research uses interview and questionnaire methods by going directly to the East Bogor District, Bogor City, and processing the resulting data by calculating the average value using the Weight Mean Score (WMS) method. The data collection technique used interviews to find the source of the problem that must be researched and also utilized a questionnaire data collection technique, which is one of the techniques for collecting research data that is carried out by giving several questions or written statements to respondents

regarding the things the researcher wants to research. Then, the respondent will answer according to what the respondent knows or experiences (Abderrahmane et al., 2020).

Results and Discussion

The connection between handling and the government's efforts to address problems that arise in society is an attitude taken to overcome or control an existing problem. This treatment can be government services for public needs or improving public services. The handling carried out by the East Bogor District is to accelerate the decline in numbers. Stunting is an effort to solve problems in people's lives, namely in the health sector. This is in line with the research results of Farisni & Zakiyuddin (2020), which said that a Preventive Group (KP) could minimize the increase in stunting.

To find out how to handle stunting through the Friday Fish Eating (JUMANI) and Supplementary Food Providing (PMT) programs using theories from Edward III, 2012 as research indicators through several approaches including, communication, resources, attitudes of implementers, and bureaucratic structures (Kusuma & Simanungkalit, 2022).

By using policy implementation theory according to Edward III, it is possible to measure implementation in solving stunting effectively and efficiently.

The following is to calculate the general trend of respondents' scores based on Likert Scale calculations using the average calculation method (Weight Mean Score). This technique's calculations are intended to determine each item by specified criteria or benchmarks. The following lists the WMS grouping criteria for the average score of each possible answer.

Table 1.
Questionnaire Indicator Criteria

No.	Percentage (%)	Criteria
1	0 - 20	Very Not Good
2	21 - 40	Not good
3	41 - 60	Pretty good
4	61 - 80	Good
5	81 - 100	Very good

Source: Sugiyono (2011)

Table 2.
WMS Calculation Results
Variables for the Implementation of the Accelerated Handling Program Stunting

Dimensions	Indicator	Score		Present	Average Percentage	Criteria
		Maximum	Rate	Indicator		
Communication	Transmission	210	186	89%	87%	Very good
	Information	210	182	87%		
	Consistency	210	179	85%		
Resource	Staff	210	182	87%	87%	Very good
	Information	210	185	88%		
	Facility	210	182	87%		
Implementer's Attitude	Appointment of Bureaucrats	210	178	85%	86%	Very good
	Incentives	420	369	88%		
Bureaucratic Structure	SOP	210	182	87%	86%	Very good
	Responsibility	210	180	86%		
PMT	Food	420	371	88%	90%	Very good
	Health	630	576	91%		
PAIN	The child's interest in complementary foods	630	539	86%	86%	Very good

Source: Data processed by researchers (2023)

Table 2 shows that program implementation in the communication dimension shows an average result of 87%. In the sense that there is communication that involves various cross-sectors, stunting can be minimized. This is the opinion Fitrauni et al. (2022), who stated that cross-sector involvement could accelerate stunting reduction.

In the resource dimension, it can be seen that the average results show 87% of the acceleration of handling stunting, which can be done with the involvement of staff, both in terms of communication and with complete facilities so that there is a good formula or strategy for accelerating the reduction of stunting. An effective strategy to accelerate stunting reduction in rural areas is to combine proactive strategies, optimizing specific and sensitive nutritional interventions to encourage improvements in the quality of life and quantity of care models for children under five years old (Priyono, 2020).

In implementing attitudes and organizational structure, the calculation results were 86%, so with the appointment of bureaucrats who are given incentives and SOP and responsibilities, the resolution of stunting can be accelerated. In this way, the attitude of implementers, especially community understanding, can support the acceleration of stunting resolution (Shauma, Nabila, Purbaningrum, 2022).

In the PMT dimension, a result of 90% is seen, where food and health factors are the main

components in preventing stunting (Lolan & Sutriyawan, 2021).

In the MPASI dimension, there is a result of 86%, so the factor of children's interest in additional food can accelerate the reduction in stunting. As nutritional improvements based on modifications to breast milk substitute products (MP-ASI) are attractive, cost-effective, and beneficial for improving children's health, the stunting rate can be reduced (Nasrullah & Mundakir, 2020).

Collecting data regarding the implementation of the handling acceleration program represented by six dimensions and nineteen indicators. The results of Likert Scale calculations using the WMS technique, Communication Dimensions, Resources, Implementing Attitudes, Bureaucratic Structure, PMT, and MPASI show an average of 87%. After consulting the questionnaire indicator criteria table, the communication conditions in transmission, information, and consistency in implementing the handling acceleration program are stated to be perfect criteria.

The highest average value in the Supplementary Feeding (PMT) dimension occurred during the implementation of the accelerated handling program In East Bogor District; Bogor City is at a food and health indicator of 90%, meaning that the East Bogor District government, together with community health center and cadres provide four healthy five perfect food consumption and provide good quality food in the accelerated treatment program. Stunting in the East Bogor District has been implemented well. The East Bogor District government and community health center and cadres carry out routine weight and height checks, provide vitamin A to children, and complete immunizations for children in an accelerated treatment program that has been implemented very well.

The lowest average value in the dimensions of Implementing Attitudes and Bureaucratic Structure that occurred in implementing the accelerated stunting handling program in East Bogor District, Bogor City, was in the indicators of appointing bureaucrats, incentives, SOPs, and responsibilities at 86%. This means that the East Bogor District government, in setting bureaucrats/executors to produce employees who have a strong understanding, provides incentives as work motivation by statutory regulations so that the attitude of the implementers runs well and has an excellent response to the Fish Eating Friday (JUM'AT Fish) program and Providing Supplementary Food (PMT) that has been created, there is an SOP that regulates the flow in implementing the JUMANI and PMT programs. Officials interested in these regulations provide their roles with responsibility for achieving the goals of the JUMANI and PMT programs in implementing the accelerated handling program. It can be said to be very good, but it still needs improvement.

In this way, supporting and inhibiting factors can be identified that can influence the

implementation of the accelerated treatment program stunting in East Bogor sub-district, Bogor city, namely:

First, the supporting factors that influence are classified into several things, including:

1. Support from various related sectors: To address budgetary issues, the East Bogor District Government must review the Fish Eating Friday (JUMANI) regulations and Supplementary Food Providing (PMT) programs to avoid burdening the community. Providing additional food for toddlers comes from self-help or business actors.
2. Corporate Social Responsibility (CSR): The East Bogor District Government carries out activities with PT. Ceva and Foodbank of Indonesia (FoI) as a form of attention to improve welfare and positively impact society.
3. Society participation: Community participation, incredibly enthusiastic mothers of toddlers and their families took part in classes and education about balanced diet nutrition from the TP PKK, guided by nutritionists from the Pulo Armin Health Center and East Bogor Health Center, Posyandu administrators and PKK Pokja IV members.

Second, the inhibiting factors that influence are classified into several things, including:

1. Several PMT consumption targets from CSR are not only for toddlers.
2. The presence of infectious diseases or comorbidities: Infectious disease factors are related to stunting in children under five in rural and urban areas. The most frequent health problems in children are diarrheal infections, upper respiratory tract infections, worms, and other diseases related to chronic health problems.

Conclusion

East Bogor District has increased in the last two years from 16% to 18.7%. Within the scope of East Bogor District, there are 222 children experiencing stunting. Based on the results of the research that has been carried out, it can be concluded as follows:

1. Implementing an accelerated reduction program stunting in East Bogor District, Bogor City, is the government's effort to solve public health problems.
2. Based on Likert Scale calculations using the WMS technique, it shows that the implementation of the JUMANI and PMT programs shows perfect communication conditions with an average score of 87%, and the highest average score is in the PMT dimension with a score of 90%, indicating that this program has been implemented well in providing healthy and quality food consumption for children.
3. Some factors influence the implementation of the accelerated treatment program stunting in East Bogor District, Bogor City, such as supporting factors, namely support

from various related sectors of Corporate Social Responsibility (CSR) through a partnership with PT. Ceva and Foodbank of Indonesia (FoI) provide support and improve community welfare, and active community participation is essential for the success of this program. There are factors inhibiting the implementation of this program, namely several PMT consumption targets from CSR, which are not only for toddlers, and the presence of infectious diseases or comorbidities, such as diarrhea infections and upper respiratory tract infections, can also influence the program's success.

Thus, implementing the Handling Acceleration Program Stunting in East Bogor District has positively impacted solving stunting problems. Although this program has been implemented well in several aspects, several aspects need to be improved to increase the effectiveness and success of the program. Support from various related sectors and active community participation remain essential factors in the success of this program.

References

- Abderrahmane, H., Noubel, G., Lahcene, Z., Akhtar, Z., & Dasgupta, D. (2020). Weighted quasi-arithmetic mean based score level fusion for multi-biometric systems. *IET Biometrics*, 9(3), 91–99. <https://doi.org/10.1049/iet-bmt.2018.5265>
- Anta Kusuma, I. G. K. C. B., & Simanungkalit, Y. T. S. (2022). Implementasi Insentif Pajak Menurut Model G Edward III. *Jurnal Pajak dan Keuangan Negara (PKN)*, 3(2), 236–248. <https://doi.org/10.31092/jpkn.v3i2.1523>
- Choliq, I., Nasrullah, D., & Mundakir, M. (2020). Pencegahan Stunting di Medokan Semampir Surabaya Melalui Modifikasi Makanan Pada Anak. *Humanism: Jurnal Pengabdian Masyarakat*, 1(1), 31–40. <https://doi.org/10.30651/hm.v1i1.4544>
- Farisni, T. N., & Zakiyuddin, Z. (2020). Pembentukan KP-Stunting (Kelompok Preventif Stunting) Sebagai Intervensi Berbasis Upaya Kesehatan Masyarakat Di Kabupaten Aceh Barat. *LOGISTA-Jurnal Ilmiah Pengabdian Kepada Masyarakat*, 4(2), 94. <https://doi.org/10.25077/logista.4.2.94-103.2020>
- Fitrauni, R., Muchlis, N., & Arman. (2022). Strategi Percepatan Penurunan Stunting di Kabupaten Gorontalo. *Journal of Muslim Community Health (JMCH)*, 3(4), 193–209.
- Lolan, Y. P., & Sutriyawan, A. (2021). Nutrition Knowledge and Parental Attitudes about Parenting Patterns of Nutritious Food with Stunting Events. *Journal of Nursing and Public Health*, 9(2), 116–124.
- Norsanti. (2021). Efektivitas Program Percepatan Penurunan Stunting di Kecamatan Batumandi

- Kabupaten Balangan (Studi Kasus Pada Desa Mampari dan Desa Banua Hanyar). *Jurnal Administrasi Publik Dan Pembangunan*, 3(1), 10. <https://doi.org/10.20527/jpp.v3i1.3825>
- Priyono. (2020). Strategi Percepatan Penurunan Stunting Perdesaan (Studi Kasus Pendampingan Aksi Cegah Stunting di Desa Banyumundu, Kabupaten Pandeglang). *Jurnal Good Governance*, 16(2), 149–174. <https://doi.org/10.32834/gg.v16i2.198>
- Shauma, U. N., & Purbaningrum, D. G. (2022). Implementasi Kebijakan Percepatan Pencegahan Stunting. *Jurnal Kebijakan Publik*, 13(2), 97–104.