

Implementation of Sensitive Interventions in Efforts to Prevent Stunting of Toddlers in Sigaol Simbolon Village, Palipi District, Samosir Regency in 2023

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Abstract. This study explains the implementation of sensitive intervention policies in handling stunting in Sigaol Simbolon Village referring to Samosir Regent Regulation No. 67 of 2022 concerning the Acceleration of Stunting Reduction in Samosir Regency. The research was conducted in Sigaol Simbolon village. This study aims: To determine the implementation of sensitive interventions in efforts to prevent stunting in toddlers in Sigaol Simbolon Village, Palipi District, Samosir Regency in 2023. This research uses descriptive methods and qualitative approaches. Informants in this study were used with purposive techniques, consisting of: Village Head, Village Officials, Chairman of TP-PKK, Village Midwives, and Masyarat Data obtained from research results through literature studies and field studies, namely, documentation and interviews conducted with informants. The results of this study The implementation of interventions in households that use access to clean water is quite good, the implementation of interventions in households that use access to sanitation has not been optimal, The implementation of interventions for assisting families at risk of stunting has run optimally, The implementation of interventions for poor and vulnerable families who receive conditional cash transfers has not been optimal, The implementation of interventions in Contribution Assistance Recipients (PBI) of National Health Insurance has been Optimal. Conclusions and Suggestions: it is necessary to increase the activities of sensitive intervention services in all services by communicating effectively both to the stunting acceleration team, as well as to the community so as to achieve a reduction in stunting prevalence in Sigaol Simbolon village.

1. INTRODUCTION

Optimal child growth and development is an indicator that reflects the nutritional status and health of the population of a region and is one of the indicators of the quality of human resources. As a sensitive indicator to determine the nutritional status of the community is the nutritional status of toddlers. Stunting is a condition caused by chronic malnutrition, so stunting in children under five can be a key indicator of maternal and infant health. Linear growth is impaired, and body length does not correspond to age and can cause delays in child growth and development. This linear growth deficit is caused by the accumulation of nutrient intake and nutrients that are not optimal in the first 1,000 days of life (Rukmana & Briawan, Dodik, 2016).

The golden period is the period of occurrence of only one time in the phase of human life, expressed as the Golden Age because at least 100 billion cells contained in the brain are ready to receive stimuli so as to make intelligence develop optimally. This golden age occurs in the first 1000



days of the child whose counting begins from the time the child is in the womb until approximately 2 years old. This period also results in children's growth and cognition (Maharani et al., 2019)

Short toddler problems describe chronic nutritional problems that are influenced by the condition of the mother / mother-to-be, fetal period, and infancy / toddlerhood, including diseases suffered during toddlerhood and other problems that indirectly affect health (Ministry of Health, 2016). According to the Global Nutrition Report 2018, there are 150.8 million (22.2%) stunted children worldwide. The World Health Organization (WHO) has set a goal of reducing stunting by 40% by 2025. The World Bank calculates that if there is no action to address stunting in a country, the per capita income of the population can be reduced by 7% and reduce per capita income by around 9-10% (UNICEF & WHO, 2018)

The prevalence of stunting in Indonesia based on Riskesdas in 2018 was 30.8 percent, this decreased by around 7.2 percent from 37.2 percent of stunting prevalence nationally in 2017 but this figure is still below the target set by WHO, which is below 20 percent. North Sumatra Province as one of the provinces contributing to the national stunting rate of 24.6% and Samosir Regency is one of the priority locus districts for stunting intervention in Indonesia in 2022, there are 24.6 percent of stunting toddlers in Samosir Regency. This requires serious handling from the government and community in an integrated manner, both at the village, sub-district and district levels (Ministry of Health, 2018)

Saputri & Tumangger (2019) added in their journal that the long-term impact of adolescents who have experienced stunting as infants will have a shorter posture than the average adolescent in general. In addition, it can also increase the potential for obesity, degenerative diseases, health, reproduction, capacity, and suboptimal learning performance during school years, as well as limited productivity and work capacity due to imperfect cognitive development at 1000 HPK (Saputri & Tumangger, 2019).

Intervention is needed in tackling the incidence of stunting. Prevention can be done during the First 1000 Days of Life (1000 HPK). Children who have passed 1000 HPK by being given adequate nutrition and nutrition and maintaining good sanitation reduce the risk of stunting. Research conducted in Burkina Faso, West Africa concluded that an unmanaged environment and incorrect feeding are associated with stunting in children (Zogara & Pantaleon, 2020). Accelerating the reduction in maternal mortality and stunting is a strategic priority project of the RPJMN (National Medium-Term Development Plan) 2020 – 2024. The target of reducing maternal mortality is expected to reach 183 per 1000 live births, while reducing the prevalence of stunting in toddlers is expected to be 14% by 2024 (Perpres, 2021). Similarly, the Strategic Plan (Renstra) of the Ministry of Health for 2020-2024 stipulated by the Regulation of the Minister of Health of the Republic of Indonesia Number 21 of 2020 that in public health programs priority is prioritized on reducing maternal and infant mortality, reducing the prevalence of stunting and wasting in toddlers and increasing the Healthy Living Community Movement (GERMAS). (Ministry of Health, 2022)

In order to realize healthy, smart, and productive human resources, as well as the achievement of sustainable development goals, efforts are made to accelerate stunting reduction. The acceleration of stunting reduction is carried out holistically, integratively, and with quality through coordination, synergy, and synchronization among ministries/agencies, provincial local governments, district/city local governments, village governments, and stakeholders (Perpres, 2021). This encourages the acceleration of stunting reduction, the Central Government makes policies stating that stunting reduction requires synergy of various parties including specific nutrition interventions and sensitive nutrition. This was then stipulated by Presidential Regulation Number 72 of 2021 concerning the Acceleration of Stunting Reduction (Perpres, 2021). In line with this, the Samosir Regency Government has established a movement to accelerate stunting reduction in Samosir Regency through Samosir Regent Regulation Number 67 of 2022 concerning the acceleration of stunting reduction in Samosir Regency (Perbup Samosir, 2022). Stunting mitigation is carried out with a two-intervention approach, namely sensitive interventions and specific interventions. Sensitive interventions are activities related to indirect causes of stunting that are generally outside of health problems. Sensitive

interventions are divided into 4 types, namely the provision of drinking water and sanitation, nutrition and health services, increasing awareness of care and nutrition and increasing access to nutritious food (Perbup Samosir, 2022).

Samosir Regency in 2022 has set 11 priority focus locus villages for stunting reduction, one of which is Sigaol Simbolon village, Palipi District. Sigaol Simbolon Village has an area of 685.0 m² Ha. With a population of 335 families (1336 people) and is divided into 3 hamlets. Sigaol Simbolon Village, which according to the results of BPB (Toddler Weighing Month) in 2022, has high stunting toddler data, namely there are 15 stunting toddlers (18.7%). If it is associated with indirect causes of stunting related to the provision of drinking water and sanitation, there are still around 4.4% of households in Sigaol Simbolon Village do not have healthy latrines and there are 8.9% of households that do not have a clean water source. Based on an initial survey conducted by researchers from interviews with village officials, the program to accelerate stunting reduction in this village was carried out with existing village funds but has not been maximally utilized, then an interview was conducted with a mother who has a stunting toddler and said that the family assistance team had never visited her home.

2. METHOD

This research is a qualitative approach. The location of this research is Samosir Regency where the type of research is qualitative research, a case study on the implementation of sensitive interventions in efforts to prevent stunting under five in Sigaol Simbolon Village, Palipi District, Samosir Regency. The research time in the study was carried out within six months starting from December 2022 to July 2023. The informants interviewed are informants who are well aware of the issues regarding sensitive interventions in efforts to prevent stunting in toddlers in Sigaol Simbolon village to be studied. Informants who will be the subject of research include;

- a. Village Head Sigaol Simbolon;
- b. Village officials of Sigaol Simbolon Village;
- c. Chairman of TP-PKK Sigaol Simbolon Village;
- d. Midwife of Sigaol Simbolon Village;
- e. 2(two) communities/families of toddlers in Sigaol Simbolon Village.

In this study, secondary data were obtained from documents from Puskesmas, Sigaol Simbolon Village and references related to sensitive interventions in efforts to prevent stunting under five

Data collection techniques in this study;

- a. Observation
observations made by researchers by visiting directly the village office, the home for stunting toddlers in Sigaol Simbolon Village using observation sheets as a list of points. Furthermore, documentation data was collected using documents provided by the Head of Sigaol Simbolon Village related to Sensitive intervention data and annual evaluation results.
- b. Interview
Interview with question and answer communication conducted with informants to obtain information and information on the implementation of sensitive interventions in stunting prevention efforts in Sigaol Simbolon village. So that researchers know directly what researchers want to know.
- c. Documentation
Study Documentation by documenting the implementation of sensitive interventions in stunting prevention efforts in Sigaol Simbolon village.

3. RESULTS AND DISCUSSION

Sigaol Simbolon Village has an area of 685.0 m² Ha. The total population in Sigaol Simbolon Village is 1336 people with details of the male population of 676 people with a female population of 660 people.

Table 1. Education Level of Sigaol Simbolon Village Residents in 2022

No	Education Level	Total	
		Person	Percentage
1	Ages 3 - 6 years who have not entered kindergarten	54 people	4,04
2	Age 3 - 6 years old who are in kindergarten/play group	13 people	0,97
3	Ages 7 - 18 who are in school	361 people	27,02
4	Ages 18 - 56 years old never went to school	34 people	2,54
5	Age 18 - 56 years old once SD but not finished	6 people	0,45
6	Graduated from elementary school / equivalent	171 people	12,81
7	Graduated from junior high school/equivalent	117 people	8,75
8	High school graduation/equivalent	371 people	27,77
9	Graduated D-1/equivalent	6 people	0,45
10	Graduated D-2/equivalent	2 people	0,15
11	Graduated D-3/equivalent	30 people	2,25
12	Graduated S-1/equivalent	34 people	2,54
13	Graduated S-2/equivalent	1 people	0,08
14	Not in School and Not in School	136 people	10,18
Total		1.336 people	

Data collection was carried out using interview guidelines for informants who were used as research resource persons. The number of informants in this study was 6 people. The informants were 1 Head of Sigaol Simbolon village, 1 Head of PKK Sigaol Simbolon Village, 1 village midwife (Person in charge of health data as well as Head of the Family Pendamping Team (TPK) in Sigaol Simbolon Village). 2 community members including a toddler family in Sigaol Simbolon Village

Table 2. Characteristics of research informants.

No	Informants	Gender	Education Last	Position
1	Reported 1	Man	S1	Village Chief Sigaol Simbolon
2	Reported 2	Woman	S1	Chairman of TP-PKK Sigaol Simbolon Village
3	Reported 3	Woman	DIII	Apparatus Desa Sigaol Simbolon
4	Reported 4	Woman	DIII	Midwife of Sigaol Simbolon Village
5	Reported 5	Woman	SLTA	People of Sigaol Simbolon Village
6	Reported 6	Woman	SLTA	People of Sigaol Simbolon Village

Sensitive intervention in stunting prevention efforts in Sigaol Simbolon Village.

The results of this study show a summary of informants' answers regarding the implementation of sensitive interventions in efforts to prevent stunting under five in accordance with Samosir Regent Regulation No. 67 of 2022 concerning the Acceleration of Stunting Reduction. In accordance with the concept of implementing the stunting reduction acceleration policy, especially sensitive interventions based on informant responses to accelerate stunting reduction in Sigaol Simbolon village

Table 3. Nutrition-Sensitive Intervention Service Activities in Sigaol Simbolon Village

No	Activities	Target
1	Increase the number of households with access to clean water	All houses in Sigaol Simbolon Village
2	Increase the number of households with access to sanitation	All houses in Sigaol Simbolon Village
3	Assistance for families at risk of stunting	Families at risk of stunting
4	Increase the number of poor and vulnerable families receiving conditional cash transfers;	poor family

5 Recipients of National Health Insurance Contribution poor family Assistance (PBI)

Based on the table above, it can be seen that 5 indicators of sensitive activities with predetermined targets have become the responsibility of the district government and village government in providing interventions in the hope that the prevalence of stunting in Sigaol Simbolon village will decrease. In this village, sensitive intervention service activities have been carried out since Sigaol Simbolon Village was designated as a stunting focus location in 2022, as for these activities, including:

- a. Socialization of Samosir Regent Regulation No. 67 of 2022 concerning the Acceleration of Stunting Reduction.
- b. Village stunting bootcamp was conducted
- c. Conducting counseling

Households with access to clean water

Access to adequate drinking water is households that use protected drinking water sources. Based on information obtained by Sigaol Simbolon Village in 2022, from 335 households, there are 299 households (89.3%) using water sources from protected springs and rainwater reservoirs. Based on the results of the study, in-depth interviews were conducted by researchers to village head Sigaol Simbolon and other informants with questions about how to implement interventions in households that have access to clean water.

From the results obtained from informants, that the implementation of sensitive interventions in clean water access services in this village is good enough, researchers found that the implementation of sensitive interventions in Sigaol Simbolon village shows that an understanding of the purpose of the intervention has been known by the village head and the implementers of interventions in this village, by communicating through coordination meetings in the village regularly between the implementers called stunting booths with the aim Problems can be overcome together and also so that the implementers are able to perform tasks and functions in increasing access to clean water in this village, it can be seen that there is an increase in clean water users in this village for sources of funds in access to clean water, there is assistance from the PUTR office and also village funds.

Households with access to sanitation

Access to proper sanitation is one of the basic infrastructures to encourage the quality of public health. However, not all households in Indonesia have access to proper sanitation, as is the case in Sigaol Simbolon village. Based on information obtained by Sigaol Simbolon Village in 2022, out of 335 households, there are 326 households (97.3%) using proper sanitation by using gooseneck latrines and cemplung toilets, for 2.7% of people still open defecation

From the results obtained from informants that the implementation of access to sanitation in this village has not been optimal, the efforts made did not arouse the community to build latrines, the village head provided a solution but could not be ascertained because until the interview results were completed, the technical instructions for the regional budget had not been completed.

Assistance for Families at Risk of Stunting

Based on information obtained by Sigaol Simbolon Village in 2022, out of 335 households, there are 70 families with stunting risk (19.1%). Those who are at risk of stunting include families of couples of childbearing age there are pregnant women, there are stunting toddlers including underprivileged families, do not have proper sanitation, families have difficulty accessing clean water and poor home environmental conditions. From the results obtained from informants that the implementation of family assistance at risk of stunting in this village has been optimal, it can be seen that the community has given a positive response. The village head monitors the family assistance team.

poor and vulnerable families receiving conditional cash transfers;

Based on information obtained by Sigaol Simbolon Village in 2022, out of 335 households, there are 50 families (14.08%). From the results obtained from informants that the implementation of the number of poor and vulnerable families who receive conditional cash transfers in this village has not been optimal, the village does not have full authority to determine or change the recipients of assistance so that assistance can be right on target.

Recipients of National Health Insurance Contribution Assistance (PBI)

Based on information obtained by Sigaol Simbolon Village in 2022, out of 1336 villagers, there are 1101 residents (82.41%). After Samosir district became a Universal Health Universal (UHC) district. So the facilities are obtained by residents including the village of Sigaol Simbolon. The top priority to get PBI is the underprivileged community with the categories of elderly, pregnant women, toddlers and residents suffering from diseases. From the results obtained from the informant above that the implementation of the National Health Insurance Contribution Assistance Recipients (PBI) in this village has been optimal, it can be seen that the obstacles have been above by bringing the population office and mobile civil registration closer to the community of Sigaol Simbolon village.

Performance Results of Sensitive Intervention Service Activities in Sigaol Simbolon Village

Measurement of the implementation of sensitive intervention service activities in accelerating stunting reduction is evaluated every semester in the current year, evaluation by looking at the achievements of sensitive intervention service indicators in all Samosir districts which were discussed in the District Stunting Reduction Acceleration Team Meeting. The Sigaol Simbolon Village Stunting Reduction Acceleration Team must intervene in sensitive services in its village as well as interview data and add secondary data from Sigaol Simbolon village, village midwives, family planning extension workers, Family Assistance Teams and cadres in this village conducting evaluations in the Sigaol Simbolon Village community.

Table 4. Performance Achievement on Sensitive Service Indicators in Sigaol Simbolon Village

Indicator	Year 2022	Year 2023 (June conditions)
Number of households with access to clean water	229	326
Number of households with access to sanitation	321	326
Families at risk of stunting	190	70
Number of poor and vulnerable families receiving conditional cash transfers	50	51
Number of National Health Insurance Contribution Assistance (PBI) Recipients	1101	1124

Based on the table above, this service activity obtained sensitive interventions in Sigaol Simbolon village there was an increase in the number of achievements of each indicator, including: The number of households that get access to clean water increased by 97 families, the number of households that get access to sanitation increased by 5 families. The number of families at risk of stunting who need assistance decreased by 120 families, the number of poor and vulnerable families receiving conditional cash transfers increased by 1 family and the number of recipients of National Health Insurance Contribution Assistance (PBI) increased by 23 people. The success of the policy can be seen through the calculation of the number of stunting cases in Sigaol Simbolon village as follows;

Table 5. Conditions of Stunting Cases in Sigaol Simbolon Village

Year	Case	Data sources
2021	18	ePPGBM
2022	15	ePPGBM

Based on the table above, there has been a decrease in stunting cases by 3 toddlers, which is currently all stunting toddlers are under intervention, including getting food from the dashat kitchen, which is one of the nutrition improvement programs for stunting toddlers and pregnant women.

Discussion

Implementation of sensitive interventions in efforts to prevent stunting of toddlers in Sigaol Simbolon Village, Palipi District, Samosir Regency.

Stunting is very important to be addressed because it concerns the quality of human resources. Stunting in children reflects the condition of failure to thrive in children under five. Stunting is a condition of failure in children under five years old due to chronic malnutrition and recurrent infections, especially in the First 1000 Days of Life (HPK) period. In addition, stunting is at risk of stunting physical growth and susceptibility of children to disease, other things can cause inhibition of cognitive development that will affect the level of intelligence and productivity of children in the future.

Sigaol Simbolon Village is the focus of stunting in 2020 and 2023 which has a fairly high prevalence of stunting toddlers in the surrounding area in Palipi District in 2021, it was found that 21.69% of stunting toddlers decreased to 18.07%. In order to accelerate the reduction in stunting rates in Samosir district, for this reason, the Samosir district government stipulates Samosir Regent Regulation No. 67 of 2022 concerning the Acceleration of Stunting Reduction. In this Regent Regulation in article 6 there are Sensitive intervention service activities aimed at related regional assembly organizations with villages/kelurahan throughout Samosir district. Sensitive intervention service activities among others Carry out activities to increase the amount of access to clean water. Increasing access to proper sanitation, assisting families at risk of stunting, increasing the number of poor and vulnerable families receiving conditional cash transfers and activities to increase the number of recipients of National Health Insurance Contribution Assistance (PBI).

The results of this study show a summary of informants' answers regarding the implementation of sensitive interventions in efforts to prevent stunting under five in accordance with Samosir Regent Regulation No. 67 of 2022 concerning the Acceleration of Stunting Reduction. In accordance with the concept of policy implementation to accelerate stunting reduction, especially sensitive interventions based on informant responses, the acceleration of stunting reduction in Sigaol Simbolon Village is largely not optimal, as seen from the increase in the results of these sensitive intervention indicators.

Table 6. Improved Achievement on Sensitive Service Indicators in Sigaol Simbolon Village

No	Indicator	Year 2022	Year 2023 (June conditions)	Increased
1	Number of households with access to clean water	229	326	97
2	Number of households with access to sanitation	321	321	None
3	Families at risk of stunting	190	70	120
4	Number of poor and vulnerable families receiving conditional cash transfers	50	51	1
5	Number of National Health Insurance Contribution Assistance (PBI) Recipients	1101	1124	23

Households that have access to clean water.

Sigaol Simbolon Village is the focus location for accelerating stunting reduction in Samosir Regency. Since it was set as the focus location for accelerating stunting reduction in 2022. This village has been very active in making improvements, especially improvements in accelerating the increase in the number of households that get access to clean water. The standard and policy objective is Samosir Regent Regulation No. 67 of 2022 concerning the Acceleration of Stunting Reduction in sensitive intervention services, one of which is to increase the number of households that get access to clean water in priority locations. In implementing a sensitive intervention related to access to clean water, dissemination of this regulation has been carried out to village elements, including the Sigaol Simbolon village community.



For resources in carrying out sensitive interventions using various sources of funds including village funds, funds from regional apparatus organizations such as the Public Works Office in the construction of pamsimas and there is the construction of habitable houses with rainwater collection. The budget in accelerating the increase in the number of households using clean water is used from village funding sources in 2022 but for 2023 it has not been implemented until now and certainly they will try again to increase the number of residents to access clean water. Human resources in this village are already available with the presence of the family assistance team as an agent of behavior change, it is expected to be able to change the behavior of the community into users of clean water.

From the results obtained from the informant above that the implementation of sensitive interventions in clean water access services in this village is quite good, researchers found that the implementation of sensitive interventions in Sigaol Simbolon village shows that an understanding of the purpose of the intervention has been known by the village head and the implementers of interventions in this village, by communicating through coordination meetings in the village regularly between the implementers called stunting booths besides communication Through whatshapp media is also carried out in facilitating communication to the implementers of these intervention activities. with the aim that problems can be overcome together and also so that the implementers are able to perform tasks and functions in increasing access to clean water in this village, it can be seen that there is an increase in clean water users in this village for sources of funds in access to clean water, there is assistance from the PUTR office and also village funds.

Various efforts have been made by the village head and village officials to increase the amount of access to clean water in this village, such as conducting village crumbs and further conducting socialization about clean water. From the results obtained from various informant sources in Sigaol Simbolon Village, households with access to clean water increased from the previous year, which was 97 households using access to clean water. People in this village have access to clean water from protected springs with pamsimas and rainwater collection. With the availability of clean water in households, one of the factors causing stunting can be controlled so that stunting reduction can achieve the expected target.

Factors that influence the incidence of stunting are factors of inadequate water and sanitation including inadequate drinking water sources, inappropriate water treatment, sanitation use of latrine facilities, ownership of latrines, open defecation behavior, and fecal disposal of toddlers not in latrines are associated with an increase in the incidence of stunting in toddlers in Indonesia. The results of Aguayo & Zul Fikar's research explain that children can get diarrhea due to microorganisms in water and other chemicals and cause stunting due to fluid loss and a number of nutrients that are essential for the body (Zul, 2019).

Households with access to sanitation.

Policy standards and objectives in increasing households to get access to sanitation are contained in Samosir Regent Regulation No. 67 of 2022 concerning the Acceleration of Stunting Reduction in sensitive intervention services, one of which is to increase the number of households that get access to sanitation in priority locations. dAs a focus location for accelerating stunting reduction. The village head together with village elements socialized this regulation to all elements and people of Sigaol Simbolon village. The purpose of this policy is to increase the number of households getting access to sanitation, from data obtained from 335 households there are still 12 more households that do not have latrines.

In improving sanitation access, villages have a source of funds from the village fund budget for sanitation improvement. Communication in the implementation of this activity is carried out with stunting crackdowns. The implementers of this village began activities to make several efforts to increase the amount of sanitation. Together with village midwives and TPK, PKK cadres continuously provide counseling and education to the general public and approach families who do not have healthy latrines and do not encourage the community to build their latrines to work. Currently the village head is looking for improvement efforts in the APBDesa technical guidelines are in the

opening budget for the construction of latrines, this year it is planned to build latrines on the 12 houses. But it cannot be ascertained because until the results of the interview are completed, the technical instructions for the APBDes have not been completed.

From the results obtained from the informant above that the implementation of sanitation access in this village is not optimal because families do not have healthy latrines are still found and there is no increase in households using healthy latrines. Basic sanitation is one of the risk factors for stunting. Hygiene practices are one of the important things in maintaining children's health. Washing hands with running water, washing food before processing, washing hands when processing food, washing hands before breastfeeding, and washing hands after defecation is one of the benchmarks that measure the clean living behavior of each individual. Washing hands with running water is associated with stunting and diarrhea prevention in children (Hafid & Razak Thaha, 2015)

Assistance for families at risk of stunting.

The standards and policy objectives in implementing this intervention are contained in Samosir Regent Regulation No. 67 of 2022 concerning the Acceleration of Stunting Reduction in sensitive intervention services, one of which is Assisting families at risk of stunting. The purpose of this activity has been well understood by the implementers of the intervention. In 2023 there will be TPK training in Palipi District in an effort to increase knowledge in implementing interventions. Resources in the implementation of this activity are all accommodated in the Budget Implementation Document at the Office of Women's Empowerment and Child Protection as well as Population Control and Family Planning. Communication is carried out between the village government and the implementers with monthly meetings with TPK by evaluating families at risk of stunting.

From the results of interviews with informants, this activity went well and the benefits were felt by the community, especially the understanding of stunting and how stunting prevention efforts in the family, the ultimate goal of this assistance is a change in behavior from the community being accompanied. Village assistants perform their duties and functions as stated in the Village Head's Decree. Many efforts have been made by the Sigaol Simbolon village government to carry out this activity, providing data on families at risk of stunting to TPK so that the implementation of assistance runs according to the expectations of the goal of stunting families in this village decreasing in number. According to data from the head of Sigaol Simbolon village, there has been a significant decrease in the number of families at risk of stunting. This proves that the assistance of families with stunting is optimal.

The theory says stunting in toddlers needs special attention because it can cause stunted physical growth, mental development and health status in children (trihono, atmarita, dwi hapsari, 2015). Recent studies have shown that stunted children are associated with poor school performance, low levels of education and low income as adults. Children who are stunted have a greater likelihood of growing into unhealthy and poor adult individuals. Stunting in children is also associated with increased susceptibility of children to diseases, both infectious diseases and Non-Communicable Diseases (NCDs) as well as an increased risk of overweight and obesity. Overweight and long-term obesity can increase the risk of degenerative diseases. Cases of stunting in children can be used as a prediction of the low quality of a country's human resources. The state of stunting causes poor cognitive abilities, low productivity, and increased risk of disease resulting in long-term losses for the Indonesian economy (Nugroho et al., 2021). Experts say health and nutrition is one of the essential needs of early childhood that must be met, with this it is expected that children can grow and develop optimally according to age groups. Attention to the fulfillment of child nutrition should begin from the first 1,000 days of a child's life, starting from the beginning of pregnancy until the child is 2 years old, this period is called the golden age, which is a time when there is rapid growth and development in children. After children are over 2 years old, fulfillment of nutritional intake must still be considered because toddler age is an age that is prone to various diseases and nutritional problems. Water, sanitation, and poor behavior can trigger diarrhea, intestinal worms or enteropathy, infections in the intestine that have an impact on the nutritional status of children. Infections in this condition directly



affect nutritional status through loss of appetite, poor digestion, malnutrition, chronic immune activation, and infections that divert nutrient and energy use.

Poor and vulnerable families who receive conditional cash transfers.

The standards and objectives of this research policy are contained in Samosir Regent Regulation No. 67 of 2022 concerning the Acceleration of Stunting Reduction in sensitive intervention services, one of which is the number of poor and vulnerable families who receive conditional cash transfers. The village government together with the implementers conducted socialization to the community and collected data on families at risk of stunting. The source of funds for this activity comes from APBN funds with the supervision of the Social Service and the village government of Samosir Regency. Efforts have been made by the Sigaol Simbolon village government to increase the number of poor and vulnerable families who receive conditional cash transfers but have not succeeded so that there are still many families at risk of stunting not receiving assistance, but efforts will continue to be made by the village government with the hope that families at risk of stunting will be a priority to receive conditional cash assistance.

Deep communication has been carried out by the Sigaol Simbolon village government with the implementers every month through stunting workshops. Furthermore, the implementers of this activity, collect data on poor families after that submit to the Social Representative Office in Palipi District to be subsequently registered at DTKS. This effort has not been maximized because poor families who are increasingly getting assistance are very minimal.

From the results obtained from the informant above, the implementation of the number of poor and vulnerable families who receive conditional cash assistance in this village has not been optimal, the village does not have full authority to determine or change the recipients of assistance so that the assistance can be right on target. One of the poverty alleviation programs based on DTKS is the Family Hope Program (PKH) which is an assistance program to very poor families (decile 1) with conditions: having pregnant/postpartum/breastfeeding mothers, and/or having children under five or children aged 5-7 years who have not entered elementary education, and/or having children of elementary and/or junior high school age and/or children aged 15-18 years who have not completed basic education. If there are elderly people in the family, elderly people and people with disabilities. Even though a family is actually classified as poor and included in the DTKS but does not meet at least one of these conditions, it is not entitled to be the target recipient of PKH assistance. The Family Hope Program is a social aid program to improve people's welfare by involving the participation of beneficiary groups in maintaining health and sending their children to school.

Recipients of National Health Insurance Contribution Assistance (PBI).

The standards and policy objectives of Samosir Regent Regulation No. 67 of 2022 concerning the Acceleration of Stunting Reduction in sensitive intervention services, one of which is to increase the number of recipients of National Health Insurance Contribution Assistance (PBI). Socialization was carried out to all underprivileged communities of Sigaol Simbolon village to register themselves as PBI participants to the Puskesmas. Budget resources for this activity are contained in the Budget Implementation Document at the Samosir District Health Office. In an effort to accelerate the increase in the number of PBI, a village stunting workshop meeting was held to find solutions to the problems of people who could not register as PBI. Furthermore, the implementers of the intervention carried out continuous socialization to the community to want to register themselves as PBI participants, especially families at risk of stunting. In this village, PBI's priorities are the elderly, pregnant women, toddlers from underprivileged families.

From the results obtained from the informant above that the implementation of the National Health Insurance Contribution Assistance Recipients (PBI) in this village has been optimal, it can be seen that the obstacles have been above by bringing the population and civil disability office of Samosir Regency closer to the Sigaol Simbolon community known as "Dukcapil Mobile". In connection with the issuance of the declaration of the universal health Coverage samosir UHC district bringing benefits to the community, through village midwives can register PBI which then midwives



will submit to the puskesmas for direct registration so that residents do not need to go directly to the BPJS office. It's just that the community is educated to immediately take care of their population administration so that they can be registered as PBI.

Efforts have been made to continue to increase the number of poor families becoming PBI participants, villages approach families who are incomplete population administration. By helping to find solutions for complete population administration so that they can become PBI participants. At present in Indonesia, the National Health Insurance (JKN) is applied in health services to make it easier for people who are in the lower middle class to be reduced in terms of costs, especially for people who have JKN PBI (Contribution Assistance Recipients). National Health Insurance (JKN) is a health protection system so that participants get health maintenance benefits and protection in meeting their basic health needs.

4. CONCLUSION

The implementation of interventions in households that use access to clean water is the dimension of the community using clean water in their daily lives. It can be concluded that Sigaol Simbolon's implementation has been quite good with the increase in households using clean water in the last 2 years. The implementation of interventions in households that use sanitation access is the dimension of people having healthy latrines in their homes. In Sigaol Simbolon village, the implementation has not been optimal, there is no increase in houses that do not have latrines to have latrines. The implementation of the intervention to assist families at risk of stunting is dimensional, TPK conducts assistance according to the mentoring schedule and there is a change in status from families at risk of stunting to not at risk of stunting. In Sigaol Simbolon village, the implementation has been optimal, it can be seen that the community has given a positive response. The village head monitors the family assistance team. The implementation of interventions for poor and vulnerable families who receive conditional cash transfers in the dimensions of poor families, including families at risk of stunting, receiving conditional cash transfers in this village has not been optimal, this is because villages do not have full authority to determine or change aid recipients so that assistance can be right on target. The implementation of interventions on National Health Insurance Contribution Assistance Recipients (PBI) from the results obtained from the informants above that the implementation of National Health Insurance Contribution Assistance Recipients (PBI) in this village has been optimal, it can be seen that the obstacles have been above by bringing dukcapil closer to the Sigaol Simbolon community.

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