

Tuha Peut's Empowerment Strategy Through the Implementation of Qanun Concerning the Prevention of Cakes to Pregnant Women in Macah Village, Suka Makmue District, Nagan Raya Regency

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ABSTRACT

Pregnancy is the dream of humans for the future. In the next period, nutrition is a serious factor for pregnant women that will be faced by the Indonesian people, namely the problem of SEZ in pregnant women, women who are affected by diabetes will affect their pregnancy in prospective babies. Empowerment of Tuha peut in implementing Qanun in maintaining KEK for all pregnant women in Nagan Raya. This study applies a work method that is centered on interviews, observation and document utilization which is called descriptive qualitative. Handling of cakes in the village of Nagan Raya has been running as it should which can help pregnant women to avoid SEZ problems with a program that runs regularly and continuously. Treatment strategies are needed so that treatment can be maximized.

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1. Introduction

Often human quality is measured from the period of pregnancy that has been running and ongoing, the presence of adequate nutrition has a good impact on the life of pregnant women. The poor nutrition provided has a negative impact on maternal health, the solution to overcome this is to provide adequate nutrition according to the needs of adults. 3.5 million deaths per year or about 11% of diseases globally are malnutrition or in other words KEK.

Maternal health concerns are not limited to the question of how mothers and newborns can give birth in a safe environment. Even though the quality of maternal health is the most important factor in determining the formation of superior human resources. This can be achieved by pursuing policies that are enacted by fully utilizing the functions and potentials offered by existing resources in society. Delay in recognizing danger signs of pregnancy and making decisions is one of the most basic causative factors that lead to the still high maternal mortality rate (MMR) in Indonesia.

Chronic energy deficit is a condition experienced by pregnant women who experience continuous (chronic) food shortages. This condition is associated with various health problems that may arise in pregnant women. Women who are pregnant and suffer from CED will experience detrimental effects, not only for themselves but also for the baby they are carrying. Women who are pregnant and suffer from CED have an increased risk of having an abortion, giving birth to a baby with birth defects, giving birth to a dead baby, or giving birth

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to a baby with low birth weight (LBW). According to the World Health Organization (WHO), poor countries are more likely to have a prevalence of chronic energy deficit (KEK) pregnant women than industrialized countries. This condition is also known as "CED."

According to the World Health Organization (WHO), the prevalence of chronic energy deficiency increases dramatically by 35-75 percent during the third trimester of pregnancy compared to the first and second trimesters of pregnancy. According to the Global Health Observatory (WHO, 2016), the findings of the Nutrition Status Monitoring Survey conducted by public health showed that the prevalence of CED in Indonesia in 2017 was 14.8 percent (WHO).

According to statistical data from the Indonesian Health Profile (2018), the percentage of pregnant women of childbearing age who are at risk of CED between the ages of 15 and 19 is 38.5%, while the percentage of women who are not pregnant is 46.6%. Up to 30.6% of people have it between the ages of 20 and 24. Also, 20.9% of women between the ages of 25 and 29 are not pregnant. and 14.2% of women aged between 15 and 19 years were pregnant, while 21.4% of women between 30 and 34 years were pregnant. For seven years, this shows that the percentage of WUS (Women of Reproductive Age) who are at risk of developing SEZ has increased.

Aceh has the highest rate of SEZ in Indonesia, with 11.3% of pregnant women affected by the disease in 2018. A special cause of SEZ is the inability to expend as much energy as is consumed. The results of the 2018 Riskesdas show that chronic energy deficiency is a focus of attention for all parties and is an indicator of the performance of health promotion programs; this despite the fact that chronic energy deficiency remains a major nutritional problem.

Cases of chronic energy deficiency in Nagan Raya Regency were reported by pregnant women who experienced KEK in 2020 as many as 5.2% with a total of 158 cases and in 2021 as many as 4.6% with 21 cases while the District level in 2020 was 12.5% with a total of 21 cases, and in 2021 13.2% with a total of 22 cases. (Nagan Raya Health Office, 2022).

From several the explanation above is the Strategy for empowering tuha peut through the implementation of the Qanun Concerning the Prevention of KEK in Pregnant Women in Nagan Raya Village

2. Method

This investigation uses a qualitative methodology, namely a research problem solving strategy by analyzing information in the form of narratives obtained from interviews, observations, and document excavation. The main objective of this research is to find out the health initiatives and programs that have been carried out as part of the tuha peut empowerment strategy through the implementation of the Qanun on the Prevention of SEZs for Pregnant Women in Macah Village, located in Suka Makmue District. Nagan Raya district in Indonesia. Research subjects include primary informants and triangulation informants. The main informants included the Head of Macah Village in Suka Makmue District, as well as four Tuha Peut people from Macah Village and three people from the community represented by health cadres, according to the research locus. The triangulation informants included puskesmas officers in selected villages and problem solving program holders. nutrition in society.

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To determine the scope of the problem and potential solutions, the researcher chose a qualitative approach that relied on in-depth interviews with the responses of the community, cadres and health workers, as well as triangulation of informants from related OPDs. This time, we decided to go the qualitative route. The first in the research process is to set topics, set goals, and set research strategies. Methods of reducing responses, grouping answers, and efforts to extrapolate answers from the minor premise to the main premise are also necessary data collection and analysis procedures. The narrative construction process culminates in a pattern. matching leads to deductions that can be used to solve questions.

3. Results and Discussion

Overview of Macah Village

Gampong Macah is located in the western part of Nagan Raya, Aceh Province. Gampong Macah can be reached by taking the land route from the South, West, North and river using either two-wheeled or four-wheeled vehicles and using rafts (especially two-wheeled) from the east via the village of Suak Bilie along the river road. From the south, through the Meulaboh Highway through Meureubo Kuala District, Nagan Raya Regency, and from the North through Alue Buloh Village, Meureubo District, West Aceh Regency.

Gampong Macah has an area of 425.87 hectares, consisting of hamlets, namely: Maju Jaya Hamlet, Pulo Tengaoh Hamlet and Blang Kubu Hamlet. with a population of 385 inhabitants. The triangulation informants served as selected village health center officers and handled nutrition problems for the community holding the program, as well as the results of in-depth interviews with the main informants, namely the Head of Macah Village, Suka Makmue District, 4 Tuha Peut villagers from Macah village, and 3 community members (representing health cadres) were analyzed .

DISCUSSION

Definition of Chronic Energy Deficiency (SEZ)

When mothers do not eat regularly, they enter a state of malnutrition known as chronic energy deficiency (CED), which can exacerbate or even cause total damage to their bodies depending on the deficient nutrition.

It's common for people who suffer from chronic fatigue to feel sick and tired. The sensation persists, even after you rest. There are a variety of possible causes for this condition, and identifying the root cause is the first step to treating it effectively.

A chronic lack of energy can be caused by a number of factors or diseases. Symptoms of persistent fatigue, or chronic fatigue (chronic fatigue syndrome). CED in pregnant women can be triggered by several factors, including emotional disturbances, viral infections, immune system disorders, and hormonal imbalances.

Chronic Energy Deficiency (KEK) in Pregnant Women in Macah Village

Article 67 paragraph 2 letter b number 6 of the 2014 Village Law seems to imply that villages have a responsibility to improve the standard of living of their people. In improving the quality of human resources from an early age, the government of Gampong Desa Macah has village-scale local authority on the aspect of public health. Macah Village has the responsibility to guarantee public health from an early age, especially for pregnant women in the village, efforts to prevent chronic energy deficiency need to be made. One of the Macah village programs established a Gampong Qanun on Guidelines for the Prevention and

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Handling of Chronic Energy Deficiency or KEK for Pregnant Women in the Gampong area of Macah Village, Suka Makmue District, Nagan Raya Regency.

The Empowerment Program for preventing SEZs for pregnant women in Nagan Raya Village, has been sufficient and good considering that the program is implemented routinely and development has been carried out in a sustainable and continuous manner, and there is adequate financial support, namely APBD funds and other village income sources according to the village's financial capacity.

Maternal Mortality Rate (MMR) Empowerment Program activities to prevent KEK in pregnant women in Macah Village to tackle infant mortality (IMR). The SEZ prevention strategy for pregnant women in Macah village is managed by Tuha Peut and involves other health stakeholders, and works with cross-sectoral partners so that pregnant women can give birth to healthy babies.

SEZ empowerment activities in Macah village for pregnant women include several programs including: Empowerment of health cadres in tackling the prevention of CED for pregnant women, Assistance for pregnant women by health cadres, provision of PMT for pregnant women of CED, pregnant women have insurance for health services, Households with drinking water are needed for proper pregnant women and healthy jamba, and Management of mothers pregnant KEK by the village midwife.

Strategy Planning for Empowerment Prevention of KEK in Macah Village

Technical guidelines for preventing KEK in pregnant women, namely Qanun Gampong Desa Macah guidelines for preventing and handling Chronic Energy Deficiency in pregnant women in the Gampong area of Macah Village, Suka Makmue District, Nagan Raya Regency, have been included in the program planning stage.

Several points in SEZ prevention planning include the following activities:

1. Formation of a prevention and response team
2. Mapping the status of pregnant women
3. Mapping village food potential
4. preparation of team work plans

Before the SEZ prevention empowerment program activities for pregnant women were carried out, Tuha Peut and other health stakeholders who were potential recipients of the SEZ prevention program for pregnant women had to take part in the socialization of the KEK prevention program for pregnant women in Nagan Raya District Village. Tuha Peut needs more adequate socialization regarding the health of pregnant women in order to make it easier for Tuha Peut to handle the prevention and management of KEK in pregnant women. In this activity, Tuha Peut and other health stakeholders also received socialization regarding the tasks and technical guidelines of the Qanun on the prevention and treatment of SEZs for pregnant women in Macah Village, Suka Makmue District, Nagan Raya Regency.

Implementation of the SEZ prevention strategy for pregnant women in Macah Village, Nagan Raya Regency

Implementation of the prevention program strategy in Macah Village that has been routinely carried out includes: Examination of the upper arm circumference of pregnant women at each Posyandu activity, Body weight measurement is mandatory for pregnant women at each Posyandu activity, Examination of the abdominal circumference is mandatory

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for pregnant women at each Posyandu activity, Examination of hemoglobin (Hb) levels in pregnant women at each Posyandu activity, Pregnant women receive 90 iron tablets Blood since the first time they were found pregnant, Monitoring the health of pregnant women by midwives and village cadres (-4x ANC according to trimester), Counseling regarding the importance of meeting the nutritional needs of pregnancy by midwives and health cadres, Provision of clean water and healthy latrines for catin and pregnant women.

In empowering the prevention and control of KEK in pregnant women, it requires organization from various parties to establish policies regarding the health of pregnant women. In Macah Village, there is already a Gampong Qanun policy regarding the prevention and management of SEZs in pregnant women in maximizing the health of pregnant women. The role of Tuha Peut is needed in terms of supervising and implementing the Qanun. Cross-program and cross-sector collaboration between the community and the government who are in direct contact as policy makers is aimed at determining the success of the program that has been determined. Based on this, Tuha Peut has a responsibility to prevent KEK in pregnant women, so that pregnant women get good health services and can give birth to healthy babies.

Empowerment program activities for preventing and handling SEZs for pregnant women in Macah Village, Nagan Raya Regency, have been carried out in previous years, the usual activities are by examining the upper arm circumference of pregnant women at every posyandu activity, BB measurement is mandatory for pregnant women at every posyandu activity, Examination of abdominal circumference is mandatory for pregnant women at every posyandu activity, Checking hemoglobin (Hb) levels in pregnant women at every Posyandu activity, Pregnant women get 90 iron tablets (Blood Enhancing Tablets) since they are first known to be pregnant, and Monitoring the health of pregnant women by midwives and village cadres (-4x ANC according to trimester).

Empowerment strategy for preventing KEK for pregnant women in Macah Village, Suka Makmue District, Nagan Raya Regency

Based on the description of the magnitude of the problem of KEK in pregnant women above, and various empowerment programs for preventing and handling SEZs in Macah Village, Suka Makmue District, Nagan Regency in general, a strategy for Empowerment Prevention of SEZs for pregnant women in Macah Nagan Raya Village can be developed through 4 strategies, namely:

SO SO (Strategy to increase the strength of the stunting management program by taking advantage of existing opportunities) (Strategy to strengthen the strength aspects of the stunting management program by taking advantage of existing opportunities).

Opportunities and initiatives to avoid CED in pregnant women were developed as part of a strategy called SO (Strength Opportunities), which aims to strengthen the strength of the Tuha Peut Empowerment program in this area.

In order to accelerate the prevention of SEZs for pregnant women in Macah Village, collaboration between the government, the business world, universities, the industrial community and the community within their respective scopes of authority is required.

Empowerment programs targeted at preventing KEK in pregnant women must be implemented with greater cooperation from large and medium scale manufacturing industries and home industries in Nagan Raya district. Utilization of mass media as well as electronic and social media that can be used in KEK prevention campaigns in pregnant mother.

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1. Use of social media applications built for Android, which can be used to improve coordination in areas that are difficult to do due to physical constraints. and useful for efficiency and effectiveness as well as Qanun guidelines for the prevention and control of KEK in pregnant women will be used to evaluate how effective the SEZ empowerment program is. Macah Village in Suka Makmue District, Nagan Raya Province.
2. Drivers of community potential such as youth organizations, PKK, Youth Family Development, etc. Most of them are advancing the KEK prevention empowerment program for pregnant women in Macah Village, Suka Makmue District, Nagan Raya Regency.

WO Strategy to reduce the shortage of stunting programs by taking advantage of existing opportunities.

Based on the results of the research, it can be concluded that the WO (Weakness Opportunities) Strategy is a strategy to reduce the deficiencies of the empowerment program to prevent SEZs for pregnant women in Macah Village by taking advantage of existing opportunities, namely:

Increase Village long-term perception activities for the prevention of KEK in pregnant women.

Technical training to equip cadres in preventing CED in pregnant women should be accompanied by ongoing safari activities to increase awareness of the urgency of preventing CED in pregnant women and equip cadres with the tools needed to do so.

Strengthening community potential such as youth organizations, PKK, Youth Family Development, etc. Can help pattern coordination across locations, where understaffing and a lack of strategic health workers (village midwives) pose challenges.

Massive campaigns for several remote village loci with geographic conditions through the use of Android-based social media.

ST (Strategy directing the strength of the KEK prevention empowerment program for pregnant women in Macah Village, Suka Makmue District, Nagan Raya Regency to minimize the threat of the program).

Based on the results of the research that has been carried out and the results of the SWOT analysis, what has been compiled can be concluded as a strategy (Strenght-Treath), namely a strategy that mobilizes the strength of the stunting management program to minimize the threat of the program is as follows:

1. strengthening awareness and commitment that has been established through various activities will minimize differences in public concern that occur between the regional government and village government regarding the urgency of preventing KEK in pregnant women in Macah Village so that it narrows the disparity in the gap in the pattern of empowerment prevention of KEK in pregnant women in Macah village which is quite far away related to the pattern of policies adopted, budget support, human resources, and the concentration of accelerated development activities.
2. Routine programs and development related to empowering prevention of KEK in pregnant women have been continuously carried out, that before implementing the declaration program for Prevention of KEK in Macah Village, Suka Makmue District,

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Nagan Raya Regency, prevention of KEK will narrow differences in levels of education, knowledge and understanding of prevention of KEK and will approach the translation of various local government programs such as Empowerment of health cadres in tackling the prevention of KEK in pregnant women, Assistance of pregnant women by health cadres, provision of PMT for pregnant women of KEK, Households with pregnant women have health service insurance, Households with pregnant women have access to drinking water decent and healthy jamba, and management of pregnant women with KEK by village midwives.

3. Strengthening the skills of KEK prevention cadres will narrow differences in levels of education, knowledge, age, training experience and understanding of KEK prevention in pregnant women among cadres so as to speed up data sharing.

WT Strategy for controlling the threat of stunting management programs by taking into account the weaknesses of the threat itself.

The WT (Weakness Treaty) strategy is a strategy to control the threat of the empowerment program to prevent SEZs in pregnant women by taking into account the weaknesses of the threat itself, namely:

1. Central public unification through various apperception activities to empower programs to prevent and treat SEZs in pregnant women.
2. Strengthening the role of Tuha Peat Desa in coordination with OPD Leading sectors and across sectors in improving the skills of cadres for preventing KEK in pregnant women.

Analysis of the needs of Tuha Peat and health workers in the field of nutrition in overcoming limited human resources.

4. Conclusion

Based on the discussion above, the following conclusions can be drawn: The empowerment program for the prevention and treatment of KEK for pregnant women in Macah Village, Suka Makmue District, Nagan Raya Regency is actually quite good considering the continuity of routine programs and development has been carried out continuously in accordance with the guidelines Qanun on Prevention and Handling of SEZs for pregnant women in Macah Village, Suka Makmue District, Nagan Raya Regency, and is supported by adequate funds, which come from the regional budget and provincial budget. The newest program is the formation of a team to handle KEK for pregnant women with the aim of reducing the prevalence of MMR and IMR in Nagan Raya Regency. Health efforts and programs that have been carried out upstream and downstream covering Macah Village are verbal commitments made by the local government related to the Empowerment Strategy for preventing KEK in pregnant women. Tuha Paet has also made good efforts to coordinate and consolidate the SEZ prevention empowerment program for pregnant women. Information was also obtained from the role of the OPD leading the sector, in this case the Health Office in the Empowerment program for preventing KEK in pregnant women, which was quite good, the intervention was carried out by the OPD Health Office. Supervision of KEK prevention in pregnant women is carried out by Tuha Peut gampong, to facilitate monitoring and assessment carried out by Tuha Peut gampong involving other health stakeholders. Empowerment strategies to prevent CED in pregnant women can be carried out by strengthening the SO, WO, ST, WT. The SO strategy is a strategy to strengthen the strength aspect of the KEK prevention empowerment program for pregnant women by taking

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advantage of the opportunities that exist. The WO strategy is to reduce deficiencies by taking advantage of existing opportunities, the ST strategy directs the strength of the KEK prevention empowerment program for pregnant women to minimize the program's threats, and the WT strategy controls the threats to the KEK prevention empowerment program for pregnant women by paying attention to the weaknesses of the threat itself.

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