

Policy Implementation of Stunting Prevention in Solok Selatan Regency

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ABSTRACT

This study aims to analyze the implementation of stunting prevention policies in Solok Selatan Regency. This study uses a descriptive qualitative approach with primary and secondary data. This research was carried out in Solok Selatan Regency, to be precise, in all Regional Apparatus Organizations (OPDs) involved in preventing malnutrition. Data collection techniques were carried out through interviews and documentation. The results of the study show that stunting prevention policies are implemented by all OPDs based on their authority. However, this policy has not succeeded in realizing the achievement of policy objectives. This is due to economic, and educational factors, low communication and cooperation between OPDs, and the absence of system development by the regional government. This study concludes that local governments need to formulate local policies that can boost the people's economy. In the educational aspect, innovation programs to increase specific knowledge about quality nutritional intake are needed which can be developed by utilizing available natural resources. Meanwhile, in the bureaucratic aspect, it is necessary to increase the joint commitment of OPDs and open bureaucratic resources between OPDs to implement stunting prevention policies.

KeyWords: Policy, Implementation, Stunting, Solok Selatan Regency.



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INTRODUCTION

Until now, the problem of stunting is a problem that the local government has not been able to overcome. This is due to the lack of implementation of management according to the mandate of Presidential Decree No. 72/2021. The local government has attempted to implement various programs to overcome stunting through policies and programs from the provincial, Sub-District to *Nagari* levels. But so far it has not been successful. This is partly due to the weak implementation of stunting prevention procedures. Governance, namely activities or efforts to help, serve, facilitate, or manage all activities in achieving goals (Sudarwan, 2010). Presidential Decree No. 72/2021 mandates stunting prevention which must be carried out by local governments. However, in reality, there are still many regions experiencing stunting problems because they have not implemented this management system properly. Some of the factors that cause weak implementation of governance are the lack of coordination between various levels of government, low community participation, and limited resources. Therefore, there is a need for joint efforts to improve the quality of stunting prevention procedures by the presidential decree.

Based on Presidential Decree No. 72/2021, the national strategy to accelerate the reduction of stunting includes five (5) pillars, namely: 1) Increasing leadership commitment and vision at all levels of government and stakeholders; 2) Improving communication and behavior change as well as community empowerment to prevent and deal with stunting; 3) Improve and converge specific and sensitive nutrition interventions

that are holistic, integrative and of high quality in all related sectors; 4) Improving food and nutrition security at the individual, family, community and national levels, and; 5) Strengthen and develop systems, data, information, research, and innovation to support the acceleration of stunting reduction.

In Indonesia, the stunting prevention policy has been established through the Regulation of the Minister of Health of the Republic of Indonesia No. 29/2019 concerning Stunting Management for Children Due to Disease. This rule was formed with the aim that children in Indonesia can grow and develop properly so that the problem of stunting in Indonesia can find an effective way to deal with nutritional problems as well as a form of action to tackle nutritional problems. This is also supported by Presidential Decree No. 72/2021 concerning accelerating the reduction of stunting explains that the target set by the central government is 14% in 2024. However, in its implementation, it has not succeeded in reducing stunting sufferers in Indonesia.

West Sumatra Province is in 17th place out of 20 provinces with a stunting prevalence that exceeds the national prevalence rate. Based on data from the results of monitoring the Nutritional Status of West Sumatra in 2013, the nutritional prevalence of children under five (age 24-19 months) experiencing stunting was 39.2%. The prevalence of stunting in West Sumatra Province in 2018 reached 30% with two areas designated by the Indonesian BAPPENAS as stunting-prone areas, namely Pasaman Regency and Pasaman Barat Regency. Then in 2019, there was one more vulnerable area that was included in the stunting-prone category, namely Solok Regency (Fathur, 2019). West Sumatra Province has a high prevalence of stunting among other provinces in Indonesia. According to 2013 data, 39.2% of toddlers in this province are stunted. In 2018, the prevalence of stunting reached 30%, with Pasaman Regency and Pasaman Barat Regency as stunting-prone areas. In 2019, Solok Regency is also categorized as prone to stunting (Fathur, 2019).

Likewise in Solok Selatan Regency. This area is ranked fourth in West Sumatra Province after the Mentawai Islands, Pasaman, and Solok Regencies (Ministry of Health, 2019). Based on data from the Solok Selatan Health Service in 2016, the percentage of short and very short toddlers reached 21.6%, up from 17.5% in 2015. This figure is still below. The national average shows an increasing trend. PSGKADARZI data for 2016 also shows that 33.3% of toddlers are short. The coverage of low birth length increased from 0.7% in 2015 to 1.2% in 2016. Meanwhile, the coverage of exclusive breastfeeding in infants decreased from 84.4% in 2015 to 79.2% in 2016. Findings authors at the Solok Selatan Regency Health Office found that 8 toddlers experienced malnutrition, 52 toddlers experienced malnutrition, and 25.7% of toddlers experienced stunting (see Table 1).

Table 1. Nutritional Status of Under-fives Based on Height/U Index According to the Sub-Sub-District and Public Health Centers of the Solok Selatan Regency Health Office in 2020.

No	SubSub-District	Public health center	Number of Toddlers 0 59 The Month That Measuring Height	Short/Stunting Toddlers (TB/U)	
				N	%
1	2	3	4	5	6
1	KPGD	Sungai Kalu	863	181	21,0
2	KPGD	Pakan Rabaa	296	12	4,1
3	Sungai Pagu	Muara Labuh	748	224	29,9
4	Pauh Duo	Pakan Selasa	155	42	27,1
5	Sangir	Lubuk Gadang	2266	61	2,7
6	Sangir Jujuan	Bidar Alam	860	119	13,8
7	Sangir Balai Janggo	Mercu	834	144	17,3
8	Sangir Balai Janggo	Talunan	220	43	19,5
9	Sangir Batang Hari	Abai	736	79	10,7
10	Sangir Batang Hari	Lubuk Ulang Alung	107	66	61
Jumlah			7085	971	13,7

METHODS

This study uses a descriptive qualitative approach with primary and secondary data. The research locations included several OPDs in Solok Selatan Regency, namely The National Population and Family Planning Board (BKKBN) of West Sumatra Province, the Office of Population Control, Family Planning, Women's Empowerment and Child Protection (DP2KBP3A), the Office of Health, the Office of Agriculture, Food Security and Fisheries, the Office of Social Affairs, the Office of Education, Ministry of Religion, Muara Labuh Health Center, Sungai Pagu Sub-District, *Nagari* staff, *Posyandu* cadres, family planning cadres, village midwives, elementary school teachers, and the community. Data collection techniques using interviews and documentation studies. Data validity was tested by source triangulation and method triangulation.

RESULTS

Solok Selatan Regency has not succeeded in achieving its policy objectives to prevent malnutrition, even though it has implemented various policies for a long time. Some of these policies include Regulation of the Minister of Health No. 23/2014 concerning efforts to improve nutrition, Regulation of the Minister of Health No. 14/2019 concerning the technical implementation of nutritional surveillance, and Presidential Decree No. 72/2021 concerning accelerating the reduction of stunting. One form of specific intervention carried out is a nutritional surveillance program (Sari & Yusran, 2022).

The stunting prevention policy has been implemented by each OPDs according to their authority. BKKBN for West Sumatra Province conducted data collection and examination of the target group which included adolescents, couples about to marry, pregnant women, postpartum mothers, and toddlers. This activity includes collecting data on potentially vulnerable families from various sources, home visits to vulnerable families, collecting data on targets who have chronic diseases or other disorders, recording risks and cases in a register of vulnerable families, and conducting case recapitulation.

Then the Office of DP2KBP3A implemented the family planning program. According to Law No. 20/1992 (regarding population development and building a prosperous family), is an effort to increase awareness and community participation through maturing the age of marriage (PUP), birth control, fostering family resilience, and increasing the welfare of small, happy and prosperous families. KB is a government program designed to balance the needs and population. Furthermore, the Health Office implemented the *Posyandu* Program. *Posyandu* which is routinely held every month in rotation in various jorongs. The Puskesmas acts as the representative of the health office in implementing this program. The Department of Agriculture, Food Security, and Fisheries implements the Supplementary Feeding Program which is healthy food, such as green beans, milk, eggs, and others that are useful for fulfilling children's nutrition. The social service implements the Family Hope Program (PKH) which provides food social assistance worth IDR 150,000 in non-cash every month to PKH families. The Department of Education is campaigning the Slogan Four Healthy Five Perfect to raise students' awareness about healthy food. The Regional Office of the Ministry of Religion of Solok Selatan Regency carries out a Premarital Education Program which provides knowledge and religion and prayers for couples who are about to get married.

One of the challenges in building public awareness of stunting prevention is the

existence of social issues related to nutrition and health. For example, in Sungai Pagu, early marriage is considered normal and not wrong by society, without considering the risks that may arise in the future. Another issue is pregnancy out of wedlock which can potentially exacerbate the nutritional and health conditions of mothers and children. Marriage at a young age and pregnancies outside of marriage can increase the risk of stunting in children (Vir, 2016) Although various efforts to prevent stunting have been made, the prevalence of stunting in Solok Selatan Regency is still high. These findings indicate that the implementation of stunting prevention policies has not been successful. Several factors hampered the implementation of this policy, among others:

First, Economic Factors. This factor relates to the community's ability to meet their needs and adequate nutritional intake. Local governments experience difficulties in reducing extreme poverty (Deputy Regency Head of Solok Selatan Regency) (Efi, 2023). The economy in Solok Selatan Regency is not yet stable and there is an income gap between the upper middle class and lower middle class. This causes some people to be unable to buy healthy and nutritious food, such as milk, eggs, vegetables, and fruit.

Second, Education Factor. Education is one of the factors that cause stunting in Solok Selatan Regency is the lack of public knowledge about health and nutrition. on average 54.6% of family heads in Solok Selatan Regency did not attend school or only graduated from elementary school (Deputy Regent of Solok Selatan Regency) (Efi, 2023). This affects community participation in stunting prevention programs carried out by the government and health workers. For example, people don't want to go to *Posyandu*, don't pay attention to nutrition in the womb, and so on. These things become obstacles for health workers in dealing with stunting problems in the field.

Third, low communication and cooperation between OPDs. It is necessary to increase solidarity in the implementation of programs and activities that involve many OPDs in handling stunting and communication must always be ongoing if there are programs that have not been implemented, convey them directly so that the government can find a solution together, (Regent of Solok Selatan (Khairunas, 2023). Based on Presidential Decree No. 72/2021, there are seven agencies involved in tackling stunting in the regions, namely BKKBN, DP2KBP3A, Health Office, Agriculture Service, Food Security and Fisheries Service, Social Service, Education Office, and Ministry of Religion City Districts. However, communication and coordination between departments is still not optimal. Each agency is still focused on its program and there is no intense cooperation. This is caused by sectoral ego which hinders the achievement of common goals. The handling of stunting is one of the priority programs of the district and central governments. The government certainly cannot do it alone, therefore the government hopes for the concern of all parties to participate in efforts to accelerate stunting prevention in Indonesia. Mainly national and multinational companies through the corporate social responsibility (CSR) program," (Vice President Jusuf Kalla, 2019). Only that, a clean and healthy lifestyle (PHBS), one of the health indicators of the program, is massively disseminated across sectors (Secretary of *Nagari* Muara Labuh) (Yulitdra, 2021). However, this has not been able to reduce the stunting rate in Solok Selatan.

Fourth, there is no system development by the Regional Government. Several ministries have also introduced technology-based innovations that were built to support the acceleration of stunting prevention. The innovations introduced include, first, the Healthy Children application belonging to the Ministry of Communication and Information Technology. Second, the e-PPBGM (Community-Based Nutrition Recording and Reporting) application belonging to the Ministry of Health. The three e-HDW (Humas Development Worker) applications belong to the Ministry of Villages, Development of Disadvantaged Regions, and Transmigration (PDTT). (Vice President, Jusuf Kalla, 2019).

The factor hindering the prevention of stunting in Solok Selatan Regency is the absence of system development by the Regional Government. The local government only plans to create a complaint website that can be accessed by the public and the stunting and malnutrition response team, but nothing has materialized yet. Meanwhile, existing data collection applications still come from BPS which are used for various needs such as health, social, education, and others.

CONCLUSION

This study concludes that regional governments need to formulate local policies that can boost the community's economy. For the educational aspect, innovation programs to increase specific knowledge about quality nutritional intake are needed which can be developed by utilizing available natural resources. As for the bureaucratic aspect, it is necessary to increase the joint commitment of OPDs and open bureaucratic resources between OPDs to implement stunting prevention policies. In addition, for the long term, regional government efforts are needed to link various programs that have been initiated by OPD at a practical level that can provide opportunities for the community to access the programs and services provided.

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