

Threat of Stunting in Early Childhood

Cindi Ambar Puspitasari
Early Childhood Education
Universitas Negeri Yogyakarta
Yogyakarta, Indonesia
cindiambar.2018@student.uny.ac.id

Suparno
Early Childhood Education
Universitas Negeri Yogyakarta
Yogyakarta, Indonesia
suparno_plb@uny.ac.id

Abstract : *Stunting is a height index according to age below minus two standard deviations based on WHO standards (World Health Organization). Stunting is a problem in early childhood which is very worrying in developing countries. Stunting is a form of growth failure due to the accumulation of nutritional insufficiency that lasts from pregnancy to the age of 24 months. This situation is exacerbated by inadequate catch up growth (catch up growth) is adequate. The Ministry of Health of the Republic of Indonesia in 2018 revealed that Indonesia experienced a double triple nutritional problem including Stunting, Wasting and Overweight. Poor nutrition and malnutrition in Indonesia reached*

17.7%, Stunting 30.8%, anemia in pregnant women 48.9%, over nutrition in infants 8%, while over nutrition population aged > 18 years as much as 28.9% . The healthy community movement or commonly abbreviated as GERMAS from the Ministry of Health of the Republic of Indonesia issued a policy and strategy to combat stunting in Indonesia. Where in the policy there are several concepts including SUN (Scaling Up Nutrition) National Nutrition Awareness Movement in Order to Accelerate Nutrition Improvement in the First 1000 Days of Life.

Keywords: *Stunting, Malnutrition, Childhood*

I. INTRODUCTION

Problems that exist at an early age are not only problems in terms of gratitude, the surrounding environment, and the learning process in Early Childhood Education but there are also those that discuss the nutritional intake obtained by children. Society in general does not understand proper nutrition for children. Lack of information will require this nutrition which makes people less concerned with children's nutrition. Malnutrition can hamper children's development in other sectors including physical and psychological child. therefore must know more information about stunting.

The Ministry of Health of the Republic of Indonesia in 2018 revealed that Indonesia issued triplicate about nutrition due to Stunting, Wasting and Obesity. Malnutrition and Malnutrition in Indonesia reached 17.7%, Stunting 30.8%, anemia in pregnant women 48.9%, Over nutrition in infants 8%, while over nutrition in populations > 18 years by 28.9% (Izwardy, Doddy et al, 2019). Indonesia is the fifth country with the highest number of infants or toddlers experiencing stunting after Pakistan (Izwardy, Doddy et al, 2019). Stunting or what we often know as a child growing stunted (short children). Stunting is a high body index by age below minus two standard deviations based on WHO (World Health Organization) standards. Stunting is a condition where children grow abnormally, it

is characterized by body parts that are not appropriate for their age, as well as delays in various things (Bukusuba, Jhon. H et al, 2017. Dekker et al., 2010. Izwardy, Doddy et al, 2019).

The Indonesian Ministry of Health cites stunted growth in children under five because of malnutrition because children are short for their age (malnutrition occurs since the baby is in the womb and in early life after birth, but only after 2 years). Growth retarded growth (unsteady growth) is due to insufficient nutrition that lasts long from the age of 24 months (Hoffman et al, 2000; Bloem et al, 2013).

TABLE 1 DATA STUNTING FOR CHILDREN UNDER FIVE IN INDONESIA

Year	Prevalence (%)
2007	36,8
2010	35,6
2013	37,2
2016	33,6
2018	30,8

(Source of Riskesdas, in Germas 2018)

II RESEARCH METHODS

The method used in this article is a literature study or literature study on the protection of stunting in early childhood in Indonesia. data sources obtained from several library sources both from articles from reputable journals and several articles from Indonesia, as well as some data obtained from the Ministry of Health of the Republic of Indonesia. This article will be reviewed and used to discuss some of the problems with stunting, factors that affect stunting include internal and external factors, and how improvements are made to prevent stunting in early childhood.

III. RESULTS AND DISCUSSION

Stunting becomes a problem that needs to be addressed and resolved immediately in an effort to overcome stunting in early childhood. Therefore, before trying to overcome stunting, it is necessary to know what factors cause stunting. There are several factors that affect stunting itself, and according to WHO in 2014 there are several direct causes that affect stunting and stunted growth in children, following several factors that affect stunting based on factors from the mother (1) Nutritional status and expenditure; (2) Short mother stature; (3) infection; (4) Pregnancy in adolescence; (5) Mental health; (6) Restriction of growth and birth to children born prematurely; (7) Distance between short births; (8) Hypertension, In addition to factors from mothers, there are factors from the environment related to the home: (1) Lack of stimulation

and activities in children; (2) Poor childcare practices; (3) Inadequate water supply; (4) Food approval; (5) Unequal distribution of food in underprivileged families; (6) Low education of mothers besides child care givers; (7) The level of household finances; (8) Short father stature; (9) Short mother and father; (10) Dense houses.

While there are external factors that affect poor food quality, food and beverage safety, protection for children. Factors that are above Internal factors that influence stunting while external factors that influence social factors where there are economic and political factors related: (1) Food prices and trade policies governed by the government may be unstable; (2) Marketing policies; (3) Political stability in a country; (4) Poverty is still prevalent in most countries, income and welfare levels of society are still far below average; (5) Jobs and livelihoods are hard to find. Indonesia, if seen from the economic status of a developing country with a dense population, this makes economic stability in Indonesia still unable to be said to be advanced in other words still developing. If viewed in terms of and health services there is still a lack of health services in remote areas so that existing health facilities cannot yet be enjoyed by all parties. There are so many factors that influence stunting starting from internal factors where the health of pregnant women also determines stunting. Eating and drinking patterns that make nutritional intake well absorbed or not also determine stunting in children. Factors influencing the occurrence of stunting have been explained above so how do you deal with stunting? Indonesian government actually also strive to prevent the occurrence of stunting in early childhood.

With the existence of a movement commonly called GERMAS (Healthy Living Community Movement) issued by the Indonesian Ministry of Health. There is a SUN (Scaling Up Nutrition) national nutrition awareness program, in which the first 1000 days of life are the focus of the government for children and pregnant women. In addition to several programs that have been planned to reduce stunting in children, according to the Ministry of Health RI 2018, there are two efforts, namely specific nutrition interventions and sensitive nutrition interventions. Where specific nutrition interventions are focused on meeting the more specific nutritional needs of both pregnant women and children including: (1) Provision of supplementary food and vitamins for pregnant women; (2) Blood supplement tablets for women who are anemic or lacking blood; (3) Consumption of iodized salt; (4) Exclusive breastfeeding for children for 6 months; (5) Providing breast milk until the age of 2 years and accompanied by complementary foods for breast milk; (6) Immunizations according to the age range of children; (7) Zinc supplementation in children; (8) Fortification of iron into food in children and mothers; (9) Provision of worming for 6 months; (10) Vitamin A; (11) Management of malnutrition; (12) Prevention of malaria; (13) Prevention and treatment of diarrhea; (14) How to wash hands properly. Sensitive nutrition interventions are interventions that must be carried out to support specific nutrition including: (1) Clean water and sanitation; (2) fortification of food security; (3) Access to health services and family planning; (4) National Health Insurance (JKN), Jampersal and Jamsos;

(5) Parental parenting education; (6) Integrative Holistic Early Childhood Education; (7) public nutrition education; (8) Education on sexual and reproductive health, and nutrition for adolescents; (9) Cash-intensive programs.

The programs designed by the government have been running in accordance with the existing conditions so that stunting in Indonesia has decreased. The existence of these various programs makes Indonesia increasingly literate and aware of the importance of maintaining children's growth and development. Children's health and nutrition are a priority for all groups, not only parents but the community and the government also contribute. Efforts to prevent stunting can be done if all parties are involved in this effort. Parents, the community, and all those who support the prevention of stunting support the community movement for a healthy life. The development and growth of children are also influenced by good health and nutrition conditions.

IV. CONCLUSION

Stunting is a problem that is often experienced by developing countries. Stunting is a condition in which a child grows abnormally, this is marked by a part of the body that is incompatible with his age, as well as delays in various ways. Indonesia has experienced a decline in stunting from initially in 2016 by 33.6% in 2018 to 30.8%. Factors that influence stunting very much are not only internal factors but can also be external. The influence of nutrition that is not in accordance with the needs of children can lead to growth and development of children is not optimal so that the occurrence of stunting or other nutritional problems. The Indonesian government actually also strives to prevent stunting in early childhood. With the Gremas (Healthy Community Movement) issued by the Indonesian Ministry of Health. SUN (Scaling Up Nutrition) nutrition awareness national movement, where in the first 1000 days of life the focus of the government to children and pregnant women.

REFERENCES

1. Bukusuba, Jhon, dkk. 2017. Predictors of Stunting in Children Aged 6 to 59 Months: A Case Control Study in Southwest Uganda. *Food and Nutrition Bulletin* 2017, Vol. 38(4) 542-553.
2. H. Dekker, dkk. 2010. Stunting associated with poor socioeconomic and maternal nutrition status and respiratory morbidity in Colombian schoolchildren. *Food and Nutrition Bulletin*. vol. 31, no. 2 2010, The United Nations University.
3. Izwardy, Doddy. 2019. Kebijakan Dan Strategi Penanggulangan Stunting Di Indonesia. Kementerian Kesehatan Republik Indonesia.
4. Mitra. 2015. Permasalahan Anak Pendek (Stunting) dan Intervensi untuk Mencegah Terjadinya Stunting (Suatu Kajian Kepustakaan). *Jurnal Kesehatan Komunitas*, Vol. 2, No. 6, Mei 2015.
5. Nahar, Shamsun and Pillai Vijayan K. 2019. Girls Child Discrimination and Child Stunting in India : What can be Done?. *The International Journal of Community and Social Development*. SAGE Journals.
6. Nasrul. 2019. Pengendalian Faktor Risiko Stunting Anak Baduta Di Sulawesi Tengah. *Jurnal Kesehatan Masyarakat*.
7. Sarma, Haribondhu, dkk. 2017. Factors Influencing the Prevalence of Stunting Among Children Aged Below Five Years in Bangladesh. *Food and Nutrition Bulletin* 2017, Vol. 38 (3) 291-301.
8. Setiawan, Eko, dkk. 2018. Faktor-Faktor yang Berhubungan dengan Kejadian Stunting pada Anak Usia 24-59 Bulan di Wilayah Kerja Puskesmas Andalas Kecamatan Padang Timur Kota Padang Tahun 2018 . *Jurnal Kesehatan Andalas*. 2018; 7(2).