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PENA EMAS: A MODEL OF COMMUNITY EMPOWERMENT AND INDEPENDENT PARTICIPATION IN HANDLING STUNTING

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ABSTRACT

Various national efforts and programs have been launched to overcome the problem of stunting. However, the incidence of stunting still cannot be resolved optimally. One real effort to overcome the problem of stunting is to empower the community itself. In implementing this community empowerment activity, the PRA (Participatory Rural Appraisal) method is used because this method emphasizes the full involvement of partner communities in the program to be carried out. The three program priorities that will be implemented are providing additional food (PMT) to stunted toddlers and toddlers as well as pregnant women with chronic energy deficiency (KEK), increasing knowledge of partner communities through information communication and education (KIE) activities for target groups, and economic empowerment. family. The aim of implementing this activity is to provide assistance and trigger partner communities in overcoming the stunting problem that occurs. A total of 16 people attended the Ecoprint Workshop, and 15 people attended catfish cultivation training. The output targets targeted in implementing this activity include reducing the number of toddlers and toddlers with stunting, increasing hemoglobin levels and upper arm circumference in pregnant women who experience chronic energy deficiency, publishing articles in national journals, and documenting the implementation of community empowerment activities with stunting problems.

Keywords: *Empowerment, Pregnant Women with chronic energy deficiency, Toddlers and stunting children*

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INTRODUCTION

Health development as a part of national development in Indonesia is still faced with complex and complicated problems. This is at least influenced by two main factors, namely the readiness of human resources and the readiness of supporting resources (Mediani, 2020). On the human resources side, to achieve development targets in the health sector, one of the things that requires a strong foundation in terms of human resources. One threat to this foundation is the occurrence of stunting among toddlers in Indonesia. A toddler who is stunted will certainly have a long-term impact on the health condition of the toddler later (Mugianti et al, 2018). Stunted conditions that are not treated seriously will trigger the status of very short toddlers (severely stunted) or often synonymously known as stunting.

The results of the 2022 National, Provincial and Regency/City Level Study of Indonesian Nutritional Status (SSGI) by collecting data in 33 provinces and 486 regencies/cities involving 334,848 toddlers issued by the Ministry of Health of the Republic of Indonesia stated that based on the 2022 SSGI results the stunting rate was nationally experienced a decline from 24.4% in 2021 to 21.6% in 2022 (Kemenkes RI, 2023). The Mojokerto District Health Service reported that by the end of 2022 the number of stunted toddlers in the Mojokerto Regency area was 1,669 toddlers. The highest number of toddlers was in the working area of the Sooko Community Health Center, Mojokerto Regency, namely 190 toddlers (Dinkes Kab Mojokerto, 2023).

Nutritional problems in toddlers, especially stunting experienced by

toddlers, have the risk of hampering the growth and development of toddlers, especially if the stunting condition turns into stunting. Some of the impacts that short (stunted) toddlers can experience during their lives are a decrease in intellectual abilities, vulnerability to non-communicable diseases, a decrease in productivity in productive age / when entering productive age so that it can cause poverty and low family income and the potential to give birth to babies with similar conditions and even stunting (Dasman, 2019).

Overcoming short-lived events (stunted) is one of the achievement targets in SDGs 2030, namely the social pillar with the target of achieving no hunger. In SDGs 2030, it is stated that one of the national development targets in Indonesia is by 2030, eliminating hunger and ensuring access for all people, especially the poor and those in vulnerable conditions, including babies, to safe, nutritious and sufficient food throughout the world year.

One of the indicators for the 2030 SDGs target is the reduction in the prevalence of stunting experienced by toddlers in Indonesia (Wardoyo, 2021). The increase in stunting in children under five can be reduced if risk factors in each region are controlled and eliminated.

According to UNICEF, basically a child's nutritional status can be influenced by direct and indirect factors, direct factors related to stunting, namely the child's characteristics in the form of male gender, low birth weight, food consumption in the form of low energy intake and low protein intake, factors Other direct factors include the health status of infectious diseases, respiratory infections and diarrhea. Parenting patterns without exclusive breastfeeding, health services in the form of incomplete

immunization status, and family characteristics in the form of parents' work, parents' education and family economic status are indirect factors that influence stunting (Ulfah, 2020).

One of the national programs initiated to accelerate the reduction in stunting incidents is the BAAS (Foster Care of Stunting Children) Program. This program is a mutual cooperation movement of all elements of the nation in accelerating the reduction of stunting which directly targets families at risk of stunting. The priority targets for this program are stunting toddlers, pregnant women from families at risk of stunting, prospective brides, couples of childbearing age who are planning a pregnancy from families at risk of stunting, and stunting toddlers over 2 years old, non-stunting toddlers from poor families (high risk of stunting).

OBJECTIVES

General Purpose

The aim and focus of implementing community-based empowerment activities with the theme PENA EMAS Program (Community Assistance with Stunting Problems) as a Model of Community Empowerment and Independent Participation in Handling Stunting.

Special Purpose

1. Socialization of the PENA EMAS program (community assistance with stunting problems) in the community
2. There is an organizational movement that focuses on managing catfish cultivation and creating ecopriting.
3. Delivery of assistance provided by the community with stunted children is in accordance with the target

4. Reducing the incidence of stunting in the working area of the Sooko Community Health Center, Mojokerto Regency.

PLAN OF ACTION

Strategy Plan

In implementing this community empowerment activity, the PRA (Participatory Rural Appraisal) method was used. This method was chosen because it emphasizes the full involvement of partner communities in the program that will be implemented. This method also involves partner communities in planning activities, monitoring activities and at the same time implementing agreed activity programs.

Implementation

In the initial stage, partner communities will be invited to discuss through FGD activities regarding the real conditions faced by the community regarding stunting incidents and the risk of stunting incidents. Then the partner community will be stimulated to be able to plan a program where this program will later be carried out independently by the partner community with assistance from the activity implementation team. The three program priorities that will be implemented are providing additional food (PMT) to stunted toddlers and toddlers as well as pregnant women with chronic low energy (KEK), increasing knowledge of partner communities through information and education communication (KIE) activities in target groups, and empowering the family economy. through training in ecopriting and catfish cultivation training.

Setting

Implementation of community service activities was carried out in Sooko Village,

Mojokerto Regency.

Target

The target of this activity is residents of Sooko Village, Mojokerto Regency.

RESULTS AND DISCUSSION

The activity of providing additional food was carried out in conjunction with the provision of information communication and education about stunting carried out by health cadres in collaboration with the Sooko Community Health Center and the Sooko Village Government to stunted children and toddlers as well as pregnant women with KEK. Providing PMT and Information and Educational Counseling is carried out simultaneously with POSYANDU activities. The training activity for making ecoprinting batik was carried out in collaboration with Naratama Kriya. The activity was held on October 3. A total of 16 women attended the training activity and workshop for making ecoprinting. The activity started at 08:15 starting with a speech from the Village Head, materials and continued with a workshop on making ecoprinting batik. The activity ended with a symbolic handover of ecoprinting batik making equipment to partners.

Training activities regarding raising catfish using round tarpaulin ponds. The activity was opened by the Head of Sooko Village, starting with the material and continuing with a participant discussion regarding catfish farming. The activity ended with a symbolic handover of catfish cultivation equipment, namely 3 sets of ponds with 6,000 catfish seeds and fish food to partners.

CONCLUSION

The implementation of the PENA EMAS Program (Community Assistance with Stunting Problems) as a Model of Community Empowerment and Independent Participation in Handling Stunting which was implemented in Sooko Village, Mojokerto Regency has been carried out well and received a positive response from local community partners and the Sooko Village government. Through activities providing additional food, KIE, training in making ecoprinting batik and training in catfish cultivation, we can increase community knowledge about stunting and its prevention. Increasing people's purchasing power for needed food sources, especially protein, can be realized as a form of implementing community economic empowerment.

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