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ACCELERATE STUNTING REDUCTION THROUGH THE ROLE OF RELIGIOUS INSTITUTIONS WITH AN ENVIRONMENTAL PURPOSE APPROACH TO RISK GROUPS

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ABSTRACT

The availability of quality human resources determines the progress of a nation because by having quality human resources, a nation will be able to use and develop the latest technology to increase productivity on all fronts to realize the nation's prosperity. To achieve this, Indonesia is faced with an urgent problem to solve, namely stunting. The Indonesian government is aware of these problems and has taken several steps to solve them holistically by involving various approaches. However, there is no role model for religious institutions to accelerate the reduction of stunting prevalence in Indonesia. From this problem, the research design aims to build a model of the Islamic approach and environmental piety in increasing the convergence of accelerating stunting reduction in the community, as well as developing a model for accelerating stunting reduction through proper clean water and safe sanitation. The research design presented is expected to be material for joint discussion to contribute to improving the quality of human resources, Primarily by reducing the prevalence of stunting.

Keywords: failure to thrive, chronic malnutrition, stunting.

ABSTRAK

Ketersediaan sumber daya manusia yang berkualitas menentukan kemajuan suatu bangsa karena dengan memiliki sumber daya manusia yang berkualitas, suatu bangsa akan mampu menggunakan dan mengembangkan teknologi terkini untuk meningkatkan produktivitas di segala lini guna mewujudkan kemakmuran bangsa. Untuk mencapai hal tersebut, Indonesia dihadapkan pada masalah yang mendesak untuk diselesaikan, yaitu stunting. Pemerintah Indonesia menyadari permasalahan tersebut dan telah mengambil beberapa langkah untuk menyelesaikannya secara holistik dengan melibatkan berbagai pendekatan. Namun, belum ada role model bagi lembaga keagamaan untuk mempercepat penurunan prevalensi stunting di Indonesia. Dari permasalahan tersebut, desain penelitian bertujuan untuk membangun model pendekatan Islam dan kesalehan lingkungan dalam meningkatkan konvergensi percepatan pengurangan stunting di masyarakat, serta mengembangkan model percepatan pengurangan stunting melalui air bersih yang layak dan sanitasi yang aman. Rancangan penelitian yang disajikan diharapkan dapat menjadi bahan diskusi bersama untuk berkontribusi dalam peningkatan kualitas sumber daya manusia, terutama dengan menurunkan prevalensi stunting.

Kata kunci: gagal tumbuh, kekurangan gizi kronis, stunting.

INTRODUCTION

Indonesia is faced with several problems in this regard, including the issue of stunting, namely the abnormal physical growth suffered by children under five years (toddlers) in the form of failure to grow so that their height is short or stunted. (Secretary of the Vice President of the Republic of Indonesia, 2018). The contributing factors are diet, environmental sanitation, maternal health, breastfeeding, mother's education level, infectious diseases, and socioeconomic status (Rosiyati et al., 2019). In addition, non-exclusive breastfeeding for the first 6 months, low household socioeconomic status, premature birth, long Short birth



weight, height, and low maternal education are the causative factors *stunting* very decisive children in Indonesia (Beal et al., 2018). The stunting prevalence and nutritional status of Indonesian children under five in 2021 are presented in Table 1.

Table 1. Prevalence of Indonesian Toddler Nutritional Status

No.	Toddler	SSGBI 2019	SSGBI 2021
	Nutritional Status		
1.	stunted	27.7%	24.4%
2.	Wasted	7.4%	7.1%
3.	Underweight	16.3%	17.0%

Source: SSGI 2021

Stunting can cause illness and death, poor child growth and low learning abilities, risk of infection and non-communicable diseases, susceptibility to fat accumulation, decreased workability, and imperfect reproduction of mothers in adulthood (Soliman et al., 2021). The long-term impact of stunting on economic productivity in people who were stunted in childhood, as studied by McGovern et al. (2017), shows substantial financial returns to linear growth and stunting reduction at the individual level. While psychologically, children who experience stunting have a higher risk of psychosocial dysfunction than normal children, such as low self-esteem, eased anxiety and depression, hyperactive behavior, and low cognitive power (Erfanti et al., 2016).

In Indonesia, health research shows that stunting is the biggest nutritional problem in children under five. The 2018 Basic Health Research reports that children under five years of age who experience stunting in Indonesia have a proportion of 30.8%. While baduta (under two years old) with concise body size, the proportion is 29.9%. The research also reports that other nutritional deficiencies related to stunting are pregnant women with Chronic Energy Deficiency or KEK (17.3%), anemia in pregnant women (48.9%), premature babies (29.5%), and weight of the baby. Low birth or LBW (6.2%), toddlers with poor nutritional status (17.7%), and anemia in toddlers. Meanwhile, the 2021 Indonesian Toddler Nutritional Status Study (SSGBI) reported that although there was a decline compared to 2019, the prevalence of stunting under five in Indonesia is still quite high, at 24.4% (Kemenkes RI, 2021).

The Indonesian government views the problem of stunting as a national issue. This is evidenced by the issuance of Presidential Regulation (Perpres) No. 72 of 2021 concerning the Acceleration of Stunting Reduction. The government targets Indonesia's stunting prevalence in 2024 to drop to 14%.

To achieve this target, the government prepares a National Strategy whose implementation is "holistic, integrative, and quality through coordination, synergy, and synchronization among ministries/agencies, provincial governments, district/city governments, village governments, and stakeholders" (Perpres No. 72 of 2021). The National Strategy was prepared based on the fact that stunting



prevention programs that had been implemented previously had not been effective because they did not provide adequate results (Secretary of the Vice President of the Republic of Indonesia, 2018). In addition, based on a study conducted by the World Bank and the Indonesian Ministry of Health, it is known that most pregnant women and children under the age of two years (baduta) do not receive adequate essential services. Humans need some or several institutions to regulate their daily lives, one of which is religious institutions. Religion, for its adherents, is teaching with the highest absolute truth related to human existence and guidelines for living happily in the world and the hereafter. Religious adherents are bound to their religion through a full and robust belief so that faith is formed from that belief, which gives birth to obedience to religious institutions (Setiadi & Kolip, 2011). In Islam, the belief that religion is a perfect institution for humans to be implemented in various areas of life is based on the Qur'an Surah Al-Maidah verse 3 as follows:

"... on this day I have made Islam the perfect religion for you. I have given My guidance to you perfectly. I accept Islam as your religion." (Surat al-Maidah: 3)

In society, Islamic religious institutions are carried out by 3 (three) things, worship, mosques, and congregations. Worship can have a narrow meaning, namely according to the origin of the word 'abada ya'budu' worship, which means worshiping Allah SWT, or broadly meaning as all forms of outer and inner actions to get closer to Allah SWT by doing all his orders and staying away from his prohibitions, both It is an act in the form of a ritual or other good deed and is blessed by Allah SWT (Sunaryo, 2015). A mosque is a place of worship for Muslims with the primary function as a place to perform worship rituals such as prayer and i'tikaf and a supporting function as a center for education, information, health, socializing, and siyasa. Each mosque has its congregation. An environmental piety approach is needed to accelerate the reduction in the prevalence of stunting by using Islamic religious institutions. Environmental piety is instilled through self-awareness or persuasive communications by religious leaders. The essence of environmental piety is good morals (akhlaqul karimah) towards the environment (KemenLH & Majlis LH PP Muhammadiyah, 2011).

Environmental piety can play a role in improving environmental conditions, both the social environment, the health environment, and the residential environment. Environmental piety can be raised in religious communities, such as in areas in Indonesia, such as Bogor Regency. Acceleration Of Stunting Reduce Through The Role Of Religious Institutions With Environmental Poverty Approach To Groups That Are At Risk In Bogor District Year 2022, various spiritual, emotional, and intellectual socio-religious interventions are needed for at-risk groups. The groups consist of 1) families at risk, 2) prospective brides, 3) couples of childbearing age, 4) toddlers aged 0-59 months, and 5) groups related to sanitation and unsafe

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drinking water.

Stunting is a problem that is being faced by the Indonesian nation in its efforts to create quality human resources. One of the sectors that can play a role and actively participate in accelerating the decline in the prevalence of stunting in Indonesia is the religious sector. The use of religious institutions to reduce the prevalence of stunting requires environmental piety. However, there is no known model for using religious institutions with an environmental piety approach to minimize stunting prevalence rates and a roadmap for accelerating stunting reduction through drinking water treatment and safe sanitation. The questions asked in the designed research are as follows: a) What is the model of the approach of religious institutions in increasing the convergence of accelerating stunting reduction in the community? b) What is the road map for efforts to accelerate stunting reduction through drinking water treatment and safe sanitation? and c) How is the environmental piety model integrated into strengthening the community in accelerating stunting reduction?

In general, this dissertation research aims to examine the use of Islamic religious institutions to help accelerate the reduction in stunting prevalence through an environmental piety approach in Bogor Regency.

Several theories form the basis of the research designed. And more specifically (specifically) the objectives of this research are as follows: a. Building a model for the approach of religious institutions in increasing the convergence of accelerating stunting reduction in the people of Bogor Regency; b. Build a road map of efforts to accelerate stunting reduction through safe drinking water and sanitation in Bogor Regency; c. Building an integrated model of environmental piety in strengthening the community in accelerating stunting reduction in Bogor Regency. These theories are: a) legal theory, namely Article 28H Paragraph (1) of the 1945 Constitution, b) stakeholder theory to understand the role of participation of several stakeholders, namely: religious leaders, congregations, and community members, c) behavioral change theory, especially cognitive theory social cognitive theory, in order to understand changes in the behavior of risk groups through interventions carried out using Islamic religious institutions with an environmental piety approach, d) behavioral change mediation theory, namely reinforcement theory, to understand the role of mediators in mediating behavior change, e) theory sustainable development is the basis for providing interventions, namely by considering the social, ecological, and economic aspects of the congregation and the community, and f) intellectual, emotional, and spiritual theories as the basis for understanding the types of intelligence that the community needs to possess regarding social change to reduce the prevalence of stunting.

METHOD

The research design is a field research with a descriptive-qualitative approach. The study carried out is holistic. The data collection technique for primary data is through observation and interviews, while



secondary data is taken using documentation techniques.; using various types of data, the analysis is carried out inductively, and the research process is designed to develop and change flexibly according to field conditions. The population of the research object is a group at risk of stunting in Bogor Regency, with the following inclusion criteria: a) children under five who have been stunted since birth, b) households that have problems with access to drinking water and unsafe sanitation, c) households that have economic problems, and d) Households that have problems related to proper and safe sanitation in their environment. The sample selected was a risk group in Cijeruk District, considering that the stunting prevalence rate in that sub-district was the largest in Bogor Regency, which was 19.67%. The conceptual framework that illustrates the stages of the research is presented in the diagram in Figure 1.

In general, research is designed to be carried out in several stages. These stages, along with the estimated time required, can be described as follows:

a. Stage 1: Intervention

At this stage, the intervention was carried out on religious institutions consisting of clerics, mosques, and congregations. The clerics were given an intervention by providing material related to stunting and the steps to overcome it. The mosque was given an intervention by creating a mosque as a spiritual safe house. The congregation was given intervention in the form of socialization about stunting through ta'lim assemblies. At the end of this stage, measurements were made of the three religious institutions related to their ability and readiness to persuade risk groups about efforts to prevent and reduce stunting prevalence rates. The estimated time to carry out phase 1 is 1-2 months.

b. Stage 2: Persuasion

At this stage, religious institutions using an environmental piety approach provide persuasion to groups at risk of stunting with the intention that these groups can make behavioral changes to prevent and reduce prevalence rates.

At the end of this study, the measurement of stunting prevalence in risk groups after intervention by clerics for approximately 1 (one) month. The estimated time for implementation of stage 1 is 1-2 months.

c. Stage 3: Modeling

Based on the results of stage 1 and stage 2, a model for the role of religious institutions was developed in accelerating the reduction of stunting prevalence using an environmental piety approach. In addition, the model of efforts to accelerate the reduction of stunting is made by the researchers themselves through drinking water treatment and safe sanitation. Estimated time needed 1-2 months.

The estimated time required and the research schedule are presented in Table 2.



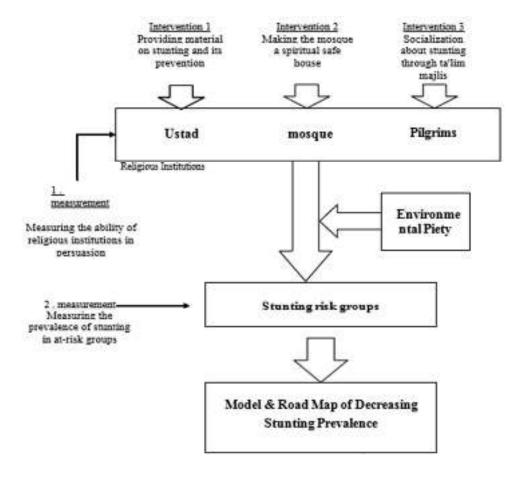


Figure 1. Research Conceptual Framework

Table 2. Estimated research time

N	Activity	The month						
Number		1	2	3	4	5	6	
1.	Stage 1: Intervention in religious institutions and measuring the ability of religious institutions to perform persuasion to risk groups							
2.	Stage 2: Persuasion of religious institutions towards risk groups and measurement prevalence of stunting in risk groups							
3.	Stage 3: Modeling the role of religious institutions in accelerating the reduction in stunting prevalence rates and making roadmaps for efforts to accelerate stunting reduction through: Drinking water treatment and safe sanitation.							

CONCLUSION AND SUGGESTION

This research is designed Building a model for the approach of religious institutions in increasing the convergence of accelerating stunting reduction in the people of Bogor Regency, Build a road map of



efforts to accelerate stunting reduction through safe drinking water and sanitation in Bogor Regency, and Building an integrated model of environmental piety in strengthening the community in accelerating stunting reduction in Bogor Regency.

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