

The Role of Village Midwives in Reducing Stunting Rates in Children Under Two Years Old (BADUTA)

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ABSTRACT

On the empirical fact that Gampong Ara succeeded in reducing the stunting rate in badutanya, in 2017, there were 13 cases and decreased to 4 cases in 2019 and in 2020 there were no more. The purpose of the study was to determine the role of village midwives in reducing stunting rates in children under two years old (baduta) in Gampong Ara, Kembang Tanjong District, Pidie Regency. This research uses a qualitative type of research with a case study design. The sample informants were 6 people, namely the Midwife of Ara Village, the Village Head or Keuchik Gampong Ara, the Cadre of the Gampong Ara Posyandu, 2 beneficiary communities (1 person with a history of stunting children and 1 more person with the risk of stunting) plus the Head of the Kembang Tanjong Health Center. The research time was held in April 2022. The results showed that village midwives in Gampong Ara have carried out their role in reducing stunting rates, but there are several aspects that are still not met. The conclusion is that the village midwife has carried out her role as an executor, manager, educator and researcher in the stunting reduction program in Gampong Ara, but not all of them are like helping childbirth, because the village midwife does not live in place and holds 3 villages as her midwife. Advice to policymakers, can work on development for the residence of village midwives in Gampong Ara, so that village midwives can carry out their total roles such as helping childbirth and allocating other village midwives so that Gampong Ara village midwives no longer hold 3 villages as their midwives, so that they can focus more on carrying out their role as village midwives in Gampong Ara. The midwife of Gampong Ara village is expected to continue to increase her role as a midwife.

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INTRODUCTION

According to the World Health Organization (WHO) 2018, the prevalence rate of short toddlers in the world will be a health problem for the public, if the prevalence rate is around 20% or more.

And globally in 2016, 22.9% or 154.8 million children in the world under the age of five were stunted.

In Indonesia, stunting is currently still the center of health problems with a national prevalence rate of 20.1%. ([Nutritional Status Monitoring, 2017](#)). Of the 10 children in Indonesia, around 3-4 children under five are stunted ([Zahraini, 2013](#)). Indonesia is one of the 3 countries with the highest stunting prevalence rate in the Southeast Asian region.

The results of the Basic Health Research Survey (Riskesdas) in 2018, on stunting in toddlers, Aceh Province was ranked 3rd out of 34 provinces in Indonesia with a stunting prevalence rate of 37.3%, higher than the national average of only 30.8%. Looking at this, it can be interpreted that 1 in 3 children under five in Aceh Province suffer from stunting. One of the districts with a very high stunting prevalence rate is Pidie Regency, which is 38%. ([Pergub Aceh, 2019](#)).

Babies with low birth weight have a higher risk of becoming stunted. Another factor related to stunting is exclusive breastfeeding intake in toddlers, toddlers who do not get exclusive breastfeeding for 6 months are at high risk of stunting. ([Fikadu, 2014](#)).

The reduction of stunting in Pidie Regency focuses on addressing the causes of nutritional problems, namely factors related to food security ([Harun et al., 2020](#)), especially family access to nutritious food needs (food), and is supported by a social environment related to how to provide food to infants and children. (care), family access to health services for prevention and treatment needed (health), as well as improving environmental health which includes the availability of clean water and sanitation facilities for the family (environment) ([Omarova et al., 2018](#)). The four factors above can influence nutritional intake and health status for the mother and child ([Larqué et al., 2019](#)). With the existence of this understanding of these four factors, it is hoped that these activities can prevent nutritional problems, both deficiencies and overnutrition that are sustainable in Pidie County. ([Perbup Pidie no.77, 2017](#))

RESEARCH METHOD

Researchers use a qualitative type of research with a case study design. In this study, the researcher took sample informants in Gampong Ara, namely the Ara Village Midwife ([Mayasari¹ & Resley, 2020](#)), the Village Head or Keuchik Gampong Ara, the Gampong Ara Posyandu Cadre, 2 beneficiary communities (1 person with a history of stunting children and 1 more person with a risk of stunting) plus the Head of the Kembang Tanjong Health Center. The location of penelitian ini dilaksanakan in Gampong Ara, Kembang Tanjong District, Pidie Regency ([Fitrah et al., 2020](#)). While the research time is on April 1 to April 30, 2022.

RESULTS AND DISCUSSIONS

The Role of Village Midwives in Reducing Stunting Rates in Children Under Two Years Old (Baduta) in Gampong Ara, Kembang Tanjong District, Pidie Regency

Stunting reduction program in Gampong Ara, Gampong Ara Village Midwife has a role as an implementer in stunting reduction activities in Gampong Ara ([Oktarina et al., 2022](#)), namely supporting nutrition improvement activities for toddlers, pregnant women and adolescents which are held once a week by cooking nutritious food to stunted toddlers and pregnant women, carrying out immunization activities for toddlers and pregnant women and adolescents, family planning services and also improved nutrition for toddlers and pregnant women.

The midwife of Gampong Ara Village also carries out the role of a manager by cooperating in team activities at posyandu activities or other stunting reduction activities with the people of Gampong Ara, health cadres and officers from the Kembang Tanjong Health Center and several related parties, both from village officials, the Kembang Tanjong District, the Kembang Tanjong Police Station, the Kembang Tanjong Koramil, the PKK of Kembang Tanjong District,

Coordinator of Family Planning Extension, Kembang Tanjong District, Kembang Tanjong Health Center, Pidie Regency Health Office, Pidie Regency PKK and Aceh Province PKK.

The midwife of Gampong Ara Village has also performed the role of an educator, by conducting socialization and counseling to the community about stunting and prevention efforts, so that their knowledge and insights increase about stunting and providing guidance to our cadres, about the steps of activities that will be carried out in an effort to reduce stunting, so that cadres are more independent in carrying out their activities in coordination with related parties such as PLKB officers, environmental health workers, immunization officers, health and nutrition promotion officers in providing counseling on family planning and childcare patterns, immunization, environmental health as well as improving family nutrition and others.

The midwife of Gampong Ara Village has also carried out the role of a researcher in activities with health cadres in Gampong Ara by conducting an introspection survey (SMD) to find out the profile of public health and the environment in Gampong Ara related to stunting problems, after that held a village community deliberation (MMD) to explain the results of the study, then after obtaining results, then make a decision on what to do as an alternative to solving the problem. For the course of the disease, they continue to monitor the state of health status in the people of Gampong Ara, so that if there is a disturbance, a solution can be found.

Based on the results of the researcher's observations in Gampong Ara for 1 month, from April 1 to 30, it was found that:

In stunting reduction activities in Gampong Ara, village midwives only receive reports from health cadres about the results of data on monitoring child growth and development, if there is a problem, then the village midwife will carry out the function of collaboration or dependence (referral). As for monitoring the health of pregnant women and adolescents, village midwives carry out functions that are carried out independently at the time of posyandu, in addition to helping with childbirth, because village midwives do not live in place and hold 3 villages as their midwives.

The team consisting of village midwives, kesling officers, immunization officers, health and nutrition promotion officers and others work in socializing and providing counseling in accordance with their respective fields, as well as conducting surveys or disease monitoring whose activities are reported every month to the puskesmas, except for extraordinary events that must be reported within 24 hours, as well as carrying out introspection surveys and surveys of clean and healthy living behaviors (PHBS) carried out every month once a year

Based on the observations of researchers in Gampong Ara for 1 month, from 1 to 30 April 2022, it was found that "In stunting reduction activities in Gampong Ara, it can be seen that the team from the Kembang Tanjong Health Center participated in facilitating these activities and carrying out their roles in their respective fields both at posyandu and Rumoh Gizi Gampong as well as other activities under the direction of the Head of the Kembang Tanjong Health Center".

There is a stunting reduction program in Gampong Ara, the Gampong Ara Health Cadre has carried out stunting reduction activities in Gampong Ara in the form of growth and development in stunted children in Rumoh Gizi Gampong (RGG) and made home visits, as well as reported the results to the village midwife. They also took part in mothers' classes and posyandu and participated in cooking healthy food for stunting sufferers and pregnant women at Rumoh Gizi Gampong (RGG). The midwife of Gampong Ara Village has given directions to the Gampong Ara Health Cadre and evaluated stunting reduction activities in Gampong Ara. Gampong Ara Health Cadres have also been given socialization, counseling and direction on reducing stunting in Gampong Ara by the Midwife of Gampong Ara Village. The Gampong Ara Health Cadre has also conducted a self-introspection survey (SMD) and village community deliberations (MMD) with the Midwife of Gampong Ara Village and monitored the state of the disease that occurred in their community

Based on the results of the researcher's observations in Gampong Ara for 1 month, from April 1 to 30, 2022, the results were obtained that: In stunting reduction activities in Gampong Ara, the Gampong Ara Health Cadre plays a very active role in carrying out these activities, not only in posyandu and gampong nutrition rumah (RGG) activities, but also in monitoring people's homes, related to improving family nutrition and monitoring diseases.

The obstacles found in the implementation of the stunting reduction program in Gampong Ara are factors such as lack of knowledge and economy. The midwife of Gampong Ara Village has carried out the role of an educator by providing socialization and counseling about stunting to the community in Gampong Ara and getting a good response. The village apparatus facilitated village community deliberation activities (MMD) related to the results of the introspection survey (SMD) conducted by village midwives and Gampong Ara Health cadres and received reports related to stunting to be followed up.

Based on the results of the researcher's observations in Gampong Ara for 1 month, from April 1 to 30, 2022, the results were obtained that: In stunting reduction activities in Gampong Ara, keuchik Gampong Ara was seen taking his wife and grandchildren to posyandu and asked the village midwife and Gampong Ara health cadre about the obstacles in the activity and checked the nutrition improvement menu that had been provided using the village fund budget whether it met the expected standards.

In the stunting reduction program in Gampong Ara, people with a history of stunting children have received improved nutrition and monitoring of growth and development to their children. Lack of knowledge and economy are obstacles and obstacles that greatly affect the implementation of the stunting reduction program, but with the socialization and counseling from village midwives, premature birth and insufficient nutritional intake that affect the occurrence of stunting in Gampong Ara can be overcome properly.

Based on the results of the researcher's observations in Gampong Ara for 1 month, from April 1 to 30, 2022, the results were obtained that: In the implementation of posyandu activities, it appears that village midwives and health cadres are measuring the weight and height of these children and conducting examinations on pregnant women. If a problem is found, cadres will provide counseling and collaborate with village midwives in providing treatment.

In the stunting reduction program in Gampong Ara, people at risk of stunting children have received improved nutrition and monitoring of growth and development for their children. Economic factors are obstacles and obstacles that greatly affect the implementation of the stunting reduction program, but with the socialization and counseling from village midwives, they understand better about how to prevent and overcome stunting.

Based on the results of the researcher's observations in Gampong Ara for 1 month, from April 1 to 30, 2022, the results were obtained that: In the implementation of posyandu activities, it appears that village midwives and health cadres are measuring the weight and height of these children and conducting examinations on pregnant women. If a problem is found, cadres will provide counseling and collaborate with village midwives in providing treatment.

CONCLUSION

The conclusion of the research are : (1) The Village Midwife has carried out her role as an implementer of the stunting reduction program in Gampong Ara, by carrying out independent tasks, collaboration and dependency tasks. However, not all of these tasks have been carried out properly, such as obstetric care for maternity mothers, obstetric care for postpartum mothers and obstetric care for newborns, because the village midwife does not live in place and holds 3 villages as her midwife. To monitor the growth and development of toddlers, health cadres play more of a role in the implementation of these activities. (2) The role of village midwives as managers has been carried out in the stunting reduction program in Gampong Ara, by carrying out development tasks for health services and participating in the team. (3) The role of village midwives as educators

has been carried out in the stunting reduction program in Gampong Ara, by carrying out their duties as educators, health extension workers and also trainers for cadres. (4) The role of village midwives as researchers has been carried out in the stunting reduction program in Gampong Ara, by carrying out duties as researchers and investigating health profiles in their work areas.

It is hoped that it will continue to increase its role as an implementer of the stunting reduction program in Gampong Ara by carrying out independent tasks, collaboration and dependence tasks, without neglecting the role of managers, educators and researchers.

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