

KUTA PARIT VILLAGE ZERO STUNTING: A SUCCESSFUL STRATEGY FOR EARLY STUNTING PREVENTION

Muhammad Alfarido¹, Nazwa Chairunnisa Hamid Siagian², Bayhaqi Yasri³, Bambang Heri Sugiantoro⁴, Zulpahmi Lubis⁵

^{1,2}Program Studi Sistem Informasi, Fakultas Sains dan Teknologi, Universitas Islam Negeri Sumatera Utara Medan, Medan, Indonesia

³Program Studi Pendidikan Matematika, Fakultas Ilmu Tarbiyah dan Keguruan, Universitas Islam Negeri Sumatera Utara Medan, Medan, Indonesia

⁴Program Studi Biologi, Fakultas Sains dan Teknologi, Universitas Islam Negeri Sumatera Utara Medan, Medan, Indonesia

⁵Program Studi Perbandingan Mahzab, Fakultas Syariah dan Hukum, Universitas Islam Negeri Sumatera Utara Medan, Medan, Indonesia

Correspondence Email: nnzet81@gmail.com

ABSTRACT

Stunting prevention socialization is one of the important efforts to improve the nutritional quality of pregnant women and toddlers. This study aims to determine the village government's strategy, the role of Posyandu cadres, the support of midwives, and the participation of parents in the zero-stunting program in Kuta Parit Village. The method used was qualitative interviews with key informants including the village head, village officials, Posyandu cadres, village midwives, sub-district health workers, and parents of toddlers, as well as field observations during the socialization activities. The results showed that the main strategy of the village was the provision of supplementary food (PMT) and nutrition education for pregnant women and toddlers, supported by village fund allocation and regular coordination with the community health center (puskesmas). Posyandu cadres played a role in routine monitoring and nutrition education, while midwives provided nutrition consultations and regular pregnancy check-ups. Parents of toddlers acknowledged the benefits of PMT, cadre guidance, and student community service (KKN) socialization in increasing their knowledge about balanced nutrition and stunting prevention. Based on these findings, the stunting prevention program in the village can be strengthened through enhanced socialization, cadre training, and cross-sectoral coordination.

Keywords: stunting; prevention; nutrition; socialization; Posyandu; Kuta-Parit-Village.

INTRODUCTION

Stunting is a chronic growth failure condition characterized by a child's height being lower than the standard for their age—due to long-term malnutrition, recurrent infections, or suboptimal parenting practices. This condition not only affects physical development but also cognitive development and the productivity of future generations (Dermawan et al., 2022). According to the results of the 2024 Indonesian Nutrition Status Survey (SSGI), the prevalence of stunting decreased from 21.5% in 2023 to 19.8% in 2024—a achievement that slightly exceeded the national target of 20.1% for that period (Ministry of Health of the Republic of Indonesia). However, the government is targeting a further reduction to 18.8% in 2025 and 14.2% in 2029 in accordance with the RPJMN (Hutabarat, 2022). This decline was triggered by the implementation of the National Strategy for the Acceleration of Stunting Prevention and Reduction (Stranas P3S), which focuses on interventions from the prenatal period through 11 specific interventions and 9 sensitive interventions—including improving the quality of Posyandu implementation, micronutrient supplementation, and nutrition education (Nugraheni, 2024).

Various studies show that the success of stunting prevention is greatly influenced by environmental factors (clean water, sanitation), access to balanced nutrition, and the active role of village governments in providing support in the form of supplementary food and nutrition education (Hadina et al., 2022). However, most of the literature focuses on areas that still face high stunting rates; studies on villages that have successfully achieved “zero stunting” are still very limited. Efforts to reduce stunting require cross-sectoral synergy, not only from the health sector, but also from education, economy, and basic infrastructure development. Factors such as family food security, availability of clean water, access to health services, and mothers' knowledge about nutrition have a significant contribution to children's nutritional status (Imamah et al., 2024).

Therefore, stunting prevention needs to be viewed as an integral part of sustainable development that emphasizes the involvement of all levels of society (Shauma & Purbaningrum, 2022). In addition to structural factors, parenting and nutrition education at the household level are important foundations in reducing the risk of stunting. Children who receive exclusive breastfeeding, nutritious complementary foods, and a balanced family diet tend to have better nutritional status than children who do not (Sutraningsih et al., 2021). Family-based interventions that combine the promotion of clean and healthy living behaviors (PHBS) and improved nutrition literacy have been proven effective in reducing stunting rates in various regions. Furthermore, government support through national policies and regional regulations also plays a central role. Specific intervention programs focusing on the first 1,000 days of life (HPK) and the integration of sensitive intervention programs such as poverty alleviation, increased access to education, and improved sanitation have shown positive results in recent years. This combination of interventions shows that reducing stunting cannot rely on a single approach, but requires consistent and sustainable multisectoral collaboration (Fajrillah et al., 2023).

RESEARCH METHOD

This study uses a qualitative approach with a descriptive method. This approach was chosen because it is able to describe in depth the social phenomena that occur in the field, particularly the stunting prevention strategies implemented by the village government and the local community. Descriptive qualitative research allows researchers to understand reality in a contextual, factual manner that is consistent with the direct experiences of informants (Hanyfah et al., 2022). Data collection techniques were carried out through participatory observation, in-depth interviews, and documentation. Observations were made to directly observe environmental conditions, community lifestyles, and available health facilities. In-depth interviews were conducted with parties directly involved in stunting prevention, such as village officials, health workers, posyandu cadres, and parents of toddlers. Documentation techniques were used to obtain supporting data, such as activity reports, health program records, and village archives related to stunting prevention (Fitriani et al., 2022).

The data obtained was then analyzed using the stages of data reduction, data presentation, and conclusion drawing as proposed by Saadah (2022). Data reduction was carried out by selecting important information relevant to the research focus, data presentation was carried out in the form of descriptive narratives, while conclusions were drawn to find patterns, themes, and strategies that were key to the success of stunting prevention. To maintain data validity, this study used source and method triangulation techniques. Source triangulation was carried out by comparing information from various sources, while method triangulation was carried out by combining the results of

observations, interviews, and documentation (Susanto & Jailani, 2023). In this way, the data obtained can be verified and scientifically accounted for.

RESULTS AND DISCUSSION

The results of the study show that in 2025, Kuta Parit Village successfully maintained its status as a zero stunting village. Unlike previous studies in Jangkurang Village (Raesalat et al., 2024), which still faced high stunting prevalence and had to optimize strategies based on Regent Regulations, Kuta Parit Village has become a successful example of early prevention. This condition shows that case studies in villages with good achievements are also important because they can provide lessons learned for replication. Environmental factors are the main foundation. Kuta Parit Village has adequate access to clean water, healthy toilets, and a culture of mutual cooperation in maintaining cleanliness. This condition is in stark contrast to Jangkurang Village, which, according to Raesalat's (2024) study, still faces limitations in access to clean water and sanitation. As stated by the WHO, proper sanitation and access to clean water are important determinants in the prevention of stunting. The village government's strategy in supporting community nutrition has proven to be effective. The village head said:

"We regularly allocate village funds for supplementary feeding (PMT) for toddlers and pregnant women, as well as supporting posyandu cadres in carrying out monitoring."

This practice is in line with UNICEF recommendations that emphasize the importance of specific nutritional interventions. The difference is that while Jangkurang Village still focuses on treating cases of stunting, Kuta Parit Village focuses on prevention so that the prevalence can be reduced to zero.

Posyandu cadres are the main drivers of success. One cadre said:

"Every month we monitor children's growth and development, weigh them, measure their height, and educate parents about nutrition. Thank God, all the children are growing well and there are no signs of stunting."

This reinforces Istiqomah's (2024) findings that repeated education from cadres increases family nutrition awareness. While community participation in Posyandu is still low in Jangkurang Village, the attendance rate of mothers with toddlers is relatively high in Kuta Parit Village, allowing for maximum intervention.

Cross-sector collaboration is a hallmark of the village's success. The village midwife explains:

"We don't work alone, but always coordinate with village officials, cadres, and even sub-district health workers. That way, problems can be anticipated more quickly."

This collaboration model is similar to the multi-stakeholder strategy implemented in Jangkurang Village, but the difference is that in Kuta Parit, the focus is on sustaining healthy lifestyles, not just reducing prevalence rates.

The results of the socialization carried out by KKN students have increased the community's knowledge about the importance of balanced nutrition. Parents of toddlers commented:

"We now understand better how to make simple, nutritious meals for our children, rather than just relying on PMT."

In addition, to reinforce the results of the observation, the following table contains questions and answers obtained during the stunting prevention socialization activities in Kuta Parit Village.

Table 1. Questions and Answers on stunting prevention socialization in Kuta Parit Village

Informant	Question	Short Answer
Village Head	What is the village government's main strategy for preventing stunting?	Focus on PMT and nutrition education for pregnant women and toddlers
Village apparatus	Is there a special budget for villages?	Yes, there is. Some of the village funds are allocated for PMT and Posyandu.
Posyandu cadre	What is the role of cadres in zero stunting villages?	Regular monitoring, nutrition education, promotion of exclusive breastfeeding
Posyandu cadre	What are the challenges at the Posyandu?	The presence of parents, especially those who work in the fields
Village Midwife	Are there any cases of pregnant women at risk of malnutrition?	Minimal, due to intensive monitoring and consultation on nutrition, vitamins, and regular checkups.
Parents of Toddlers	What factors contribute to a child's nutrition?	PMT Posyandu and cadre guidance
Parents of Toddlers	What do mothers think about the socialization of stunting prevention by KKN students?	Very useful, reinforces knowledge about balanced nutrition

This shows that public education is not only formal in nature, but also synergizes with academic activities. The table above reinforces the results of field observations that confirm the existence of real collaboration between the village government, Posyandu cadres, village midwives, and the community in the stunting prevention program. From the informants' answers, it appears that the village government's main strategy focuses on providing supplementary food (PMT) and nutrition education for pregnant women and toddlers. These efforts are supported by the allocation of village funds directed at supporting public health programs, particularly Posyandu. Thus, village policies are not only administrative in nature but are also directly implemented to meet the nutritional needs of the community.

In addition, the role of Posyandu cadres and village midwives is an important factor in ensuring the sustainability of the zero stunting program. Posyandu cadres are active in conducting routine monitoring, providing nutrition education, and encouraging exclusive breastfeeding, even though they face challenges related to the absence of parents of toddlers who often work in the fields. Meanwhile, village midwives provide support through nutrition consultations, vitamin distribution, and regular check-ups that effectively reduce the risk of malnutrition in pregnant women. Parents of toddlers also emphasized that the presence of PMT, guidance from cadres, and socialization by KKN students were very useful in increasing their knowledge about balanced nutrition. This proves that the synergy between villages, health workers, cadres, and academics can strengthen community understanding and reduce the risk of stunting from an early age.

The following is documentary evidence to reinforce the results of the observations that have been made.



Figure 1. Documentary of the observation

CONCLUSION

This study confirms that the success of Kuta Parit Village in maintaining its zero stunting status is inseparable from an integrated strategy involving the village government, Posyandu cadres, midwives, and the active participation of parents of toddlers. The village government consistently allocates funds for PMT programs and nutrition education, while Posyandu cadres play a role in routine monitoring and improving family nutrition literacy. The support of midwives through nutrition consultations and periodic check-ups further strengthens early prevention. In addition, the presence of KKN students has made a real contribution through outreach activities that have increased community awareness of the importance of balanced nutrition. In general, this study proves that cross-sectoral synergy, public education, and specific and sensitive nutritional interventions can create a sustainable health ecosystem at the village level. These results provide a lesson learned that stunting prevention does not only depend on health interventions alone, but also on academic collaboration and active community participation. Thus, the model implemented in Kuta Parit Village can be used as a reference for other villages in developing similar strategies to consistently and measurably reduce stunting prevalence.

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