



Health Awareness About Stunting in The Circle of Poverty: Pagejungan Village Brebes

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Abstract

Communication is one indicator of the success of government policies and programs in any sector, including in terms of changing health behavior in society. Until now, cases of stunting still a serious health problems in Indonesia, especially in Brebes. Acceleration of stunting prevention program in Brebes still a priority programs of the Central Java Provincial and local governments because the stunting rate is quite high. Brebes is even included in the top 10 Indonesian cities with the highest stunting cases. Focuses of this study is to see how the society in the circle of poverty concern about their health, especially stunting, to build health awareness as the goals of an effective communication process Using a qualitative approach, the data collection process is carried out through literature study, observation, and interviews. Selection of informants using purposive sampling technique. The results showed that their health awareness was still very lacking. Implementation of the stunting prevention program in Brebes had not shown maximum results. The stunting rate has not decreased significantly although there have been many activities to support the program.

Keywords: *Health Awareness; Health Communication; Poverty; Stunting*

Introduction

Indonesia is still faced with a number of problems related to public health. Some of problems that arise are caused by public apathy about health, ignoring the symptoms of illness, and the lack of socialization of health policies and programs from the government. One of the health problem is stunting.

Regarding to nutritional status of Indonesian children, Ministry of Health's data and information centre 2018 claims that the prevalence of stunting in Indonesia is ranked fifth in the world, and in Southeast Asia, Indonesia is the second highest after Cambodia. At the end of 2018, 30,8% children under five in Indonesia were stunted. Some contributing factors include social environment, such as a lack of knowledge and awareness about health, level of education, also social norms, especially in rural areas.

Stunting is a condition of failure to thrive in children under five due to chronic malnutrition and psychosocial stimulation and exposure to repeated infections, especially in the first 1000 days of birth, while still in the womb (fetus) until the age of two years

Brebes district has become the top 3 focus area of central government in acceleration of stunting prevention and stunting management program. At least, 10 villages in Brebes are included in the list of 100 national intervention areas related to stunting prevention¹. Based on nutritional status from the ministry of health in 2017, cases of stunting in Brebes reached 32,7% and occupy the highest ranked in Central Java. By analogy, every 3 out of 10 children in Brebes are stunted.

Apart from that, there is also a lack of availability, affordability, and access to nutritious food due to geographic location, as well as a lack of health / service facilities in remote areas. Therefore, based on the characteristics of residence area, the prevalence of stunting is more common in rural community rather than in urban community.

Some factors that can cause stunting are categorized into two, direct and indirect causes. The direct causes such as food consumption and infection status, lack of nutritional intake during pregnancy and lack of nutrition in infants, as well as the health conditions of infants and mothers during the first 1000 days of birth.

While the indirect causes include parenting patterns of breastfeeding / MPASI, psychosocial parenting, socio-economic conditions of the community, environmental sanitation and hygiene, and also health service can affect the risk of stunting.

Mostly the community of Pagejungan village are still not open minded. There are still many people who don't realize the importance of fulfilling nutrition for pregnant women and toddlers in order to prevent their children from being stunted. The main factor is the low level of health awareness, coupled with economic factors and food security.

So far, the paradigm which still used in explaining the dimensions of health is mostly using biomedical or medical approaches. But social science can also take on a health-related role, assuming that the sheer dimension of health is not just biomedical issue. Health problems are precisely determined by psychological, social, cultural, environmental, economic, and political factors. The illness or health condition of a social system is mostly caused by non-health factors (Mulyana, 2018).

Health issues are often linked to biological or natural contexts. However, if we look at the social perspective, several social variables also have a role in influencing individual health conditions. Not only external factors, internal factors that exist within the community can also influence the decision making, such as socio-economic conditions and the individual's social status in society.

Apart from knowledge and understanding, health communication is also influenced by cultural factors, local wisdom, social norms and beliefs. Different perspectives on the health concepts related to culture, ethnic, values, social norms, and religion. Especially in Indonesia, which consists of hundreds of tribes and cultures, there are still many who have not been educated and even believe in myths about health.

Various social studies that have been carried out related to health, show that an individual's illness or disease in general originated from ignorance and misunderstanding of various health

¹ <https://mediaindonesia.com/read/detail/188542-angka-stunting-di-brebes-tinggi-masuk-100-daftar-internensi-nasional>

information obtained by them. Therefore, it is necessary to pay attention to every health information sent and received by the public (Liliweri, 2008).

This phenomenon is interesting to study because based on the latest data from Brebes Health Service in 2021, the stunting rate in Brebes is still high. In addition to looking at the communication patterns between health workers and the community, another indicator to assess the success or failure of the health communication process in the community is to know how they understand and manage every information about health around them.

Literature Review

2.1 Stunting

Stunting is a condition of failure to thrive in children under five due to chronic malnutrition and psychosocial stimulation and exposure to repeated infections, especially in the first 1000 days of birth, while still in the womb (fetus) until the age of two years²

In simple terms, stunting defined as “short” or stunted. Stunting is a chronic growth and developmental problem for children due to lack or even poor nutrition intake (malnutrition) for a certain period of time. Ministry of Health’s data and information center 2018 defined that stunting is a condition in which toddlers have an unproportional health in their age, with reference to the standard size of child growth from WHO.

Stunting does not only cause “short” or physical growth retardation. Stunting can also make the body vulnerable to disease. In addition, stunting can threaten cognitive development which will later affect the level of brain intelligence and productivity of children as adults. Stunting children tend to find it difficult to achieve optimal growth and development potential, both physically and psychomotor (Dewey, 2011)

2.2 Health Communication

Health communication can be interpreted as a systematic effort that aims to provide a positive influence to changes individual or community health behavior using methods and principles of communication in order to improve health status (Nomalia, 2018). In the health context, communication is used to convey messages or health information and influence decision-making process related to improve and manages health by individual or communities (Rahmadiana, 2012).

In general, health communication is a part of human communication that examines all aspects related to health, both individual and public. Littlejohn (2017) identify common themes that exist in theoris of health communication :

- (1) Messages and behavior change;
- (2) Relationships;
- (3) Managing information and risk;
- (4) Health disparities.

² Setwapres 2018, Strategi Nasional Percepatan Pencegahan Stunting Periode 2012–2024

Smith and Hornik (2006) explain that health communication is a process for the development and diffusion of message to specific audiences in order to influence their knowledge, attitudes, and beliefs in favor of healthy behavior choices (Mulyana, et al., 2018).

According to Liliweri (2008), health communication is a study of the use of communication strategy to disseminate health information to influence and persuade individuals or communities to make the right decisions related to health management.

2.3 Health Belief Model

Health Belief Model (HBM) one of the oldest health behavior models that was introduced by Rosenstock around 1950s. HBM was first introduced to explain the audience's response to the tuberculosis (TB) eradication program. In that case, the concept of belief that a healthy body will affect daily behavior is also analyzed (Liliweri, 2008).

This model is used to provide an explanation why people take actions aimed to preventing a disease while others avoid such actions. The HBM assumes that an individual's likelihood of engaging in a specific health behavior is related to their belief that they are threatened with a particular disease, an evaluation of the severity of the disease, and the belief that the health behavior might avoid the risk of developing the disease (Nowosielki dkk, 2016).

The hypothesis of this model is that health-related actions depend on the simultaneous of three classes of factors : (1) There is sufficient motivation to make health problems important or relevant; (2) The belief that people is susceptible to serious health problems or to sequelae of the disease or condition, which is often referred to as a perceived threat; and (3) Belief that following a particular health recommendation will be beneficial in reducing the perceived threat, and at a subjectively acceptable cost (Rosenstock dkk, 1988).

Methods

This research use a qualitative approach, the data collection process is carried out through literature study, observation, and interviews. Selection of informants are using purposive sampling technique. This research is descriptive qualitative, which aims to provide an understanding and description of how and why a reality or communication phenomenon can occur (Pawito, 2007).

To help analyze and mapping community understanding, researcher use health communication as a main theory with health belief model to look at the likelihood of individuals performing certain health behaviors that are specific in relation to their belief that they are threatened with a particular disease, an evaluation of the severity of the disease, and the belief that the health behavior might avoid the risk of developing the disease.

Result and Discussion

Focuses of this study is to see how they concern about their health, especially understanding of stunting, to build health awareness as the goals of an effective communication process. *Stunting* is always associated with poverty because on of the main factors of a person's inability to meet the needs of good quality nutrition is mostly caused by economic problems.

Pagejungan village is one of the largest villages in Brebes District with a very high birth rate every year. Based on the latest update of social welfare integrated data (DTKS) in 2021, Pagejungan village is the second village with the highest number of “underprivileged” people in Brebes District.

Even though Pagejungan village is located in the sub-district of the city, the community are still not open minded. There are still many people who don’t realize the importance of fulfilling nutrition for pregnant women and toddlers in order to prevent their children from being stunted. The main factor is the low level of health awareness, coupled with economic factors and food security.

The following are results that researchers obtained at Pagejungan village, Brebes through interview process and various supporting data from selected informants. A statement from one of the informant can be seen as follow.

“Stunting itu ya pendek kan, memangnya berbahaya?” (Stunting is short right, is it dangerous?)

Only a small number of informants have the understanding of “only short” as above. However, finding out answers like that indicates that there are still people who do not understand what is stunting at all.

Most of the informants with a fairly good level of understanding but they are constrained by economic factors, give a different statements. One of the informants gave a statement as below

“Sebenarnya saya sih tahu stunting mbak, tahu juga itu nggak baik buat pertumbuhan anak, tapi mau gimana lagi? Boro-boro mikir makanan bergizi, hari ini bisa makan aja syukur” (Actually I know that stunting, I also know that it’s not good for children’s growth, but what else can I do? I never thought about nutritious food, I just can eat today it’s very blessed)

In addition to educational factors, socio-economic factors also have considerable influence on health behavior. They are know that stunting not good for children’s growth, but economic conditions make them unable to do their utmost to fulfill their children’s nutrition since of pregnancy to the age of two years.

4.1 Prevention of Stunting Program

Prevention of stunting is one of national health priority program that aims to ensure that all resources are support and finance priority health activities, especially enhancements coverage and quality of nutrition services in households. 23 ministries of Indonesian government are collaborating to reduce stunting which is still relatively high.

The National Communication Strategy in the context of behavioral change to prevent stunting, refers to the Social Ecological Model (MES), which is a theory-based framework to see and understand the interaction effects and diversity of individuals and the environment that determine behavior. There are five levels of hierarchies of this ecological model, individual, interpersonal community, organization, and policy or supporting environment (Sukandhi Putra, 2018).

Implementation of this program is not yet effective, it was constrained from several problems such as not yet optimal coordination in the implementation of nutrition interventions specific at all-levels related planning and budgeting, administration, monitoring and evaluation; the allocation and utilization has not been effective resources and sources of funds; limited capacity and quality of program implementation; Lack of advocacy, campaigning and related dissemination stunting, and various prevention efforts (TNP2K), 2018).

4.2 Implementation of Health Belief Model

Health Belief Model (HBM) is used to predict why people will take action to prevent, to filter, or to control disease condition. Refers to research conducted by Sakinah (2017), HBM consist of several components:

1. Perceived Susceptibility, is the perception of vulnerability refers to a person's belief about the possibility of experiencing risk or possibility of getting disease.
2. Perceived Severity, is a belief about the impact of the severity of the impact it will have if you get a disease or leave it untreated.
3. Perceived Barrier, is a belief in carry out an evaluation of the barriers that faced by adopting a behavior. People will weigh the advantages and the consequences in behavior change, considering between the perceived effectiveness of the action and perception that the action is dangerous, expensive, unpleasant, uncomfortable, time-consuming, and so on.
4. Self Efficacy, is an individual's belief about the ability possessed in behaving whether the individual can or not in making changes in behavior. The behavior is considered important because it achieves a desired result.
5. Cues to Action, is a cues that trigger action is one strategy to get information in encouraging well behaved (example: information media, education, and perceived symptoms)
6. Perceived Benefit, is an individual's belief that if they change their behavior for the better then it can reduce the risk of getting disease. People will adopt a new behavior if it can avoid the risk of disease.

According to this model, in general Pagejungan village community can be categorized into four groups. First, people who are not aware of the risk of stunting and don't want to change. The second group is people who are aware of the risks but are not willing to change. The third group, people who are starting to realize the risks and want to change but don't know how and when to start. And the last, fourth group, people who are aware of the risks and ready to change.

In Pagejungan village, for basic matters such as toilets, there are still many houses that don't have a toilet. Some are below the standards, even some classified as very inappropriate. Toilets should be the main priority in the house, but here it is not a priority at all.

“Alhamdulillah anak saya tiga-tiganya sehat sampai sekarang mbak, keluarga juga kayaknya nggak ada yang kena stunting deh. Ya memang ini (anak terakhir) waktu kecil kurus dan tidak terlalu tinggi seperti yang lain, tapi nyatanya sekarang juga mulai agak gemuk. Di TK juga tingginya standar lah. Kalau nanti ternyata nggak tinggi ya mungkin keturunan dari orang tuanya, saya kan juga pendek”

(Alhamdulillah, all three of my children are healthy so far, there doesn't seem to be anyone in my family who gets stunted either. Indeed him (my last child) was thin and not tall as the other childs, but now he's starting to gain weight. In kindergarden, his height is normal too. If later he's not tall, maybe he's descended from his parents because I'm also short”

Moreover, regard to the nutritional health of pregnant women and toddlers, they still don't really care and think stunting is just short and harmless. Society in general will take action to prevent stunting if they think that they are vulnerable to this condition. But if they convinced that it is not stunting or malnutrition, they just don't care about it.

Conclusion

Based on the discussion that has been presented above, the conclusion of this research is the lack of proper information about stunting, the reluctance to seek such information, and also the community not being open to health workers have made health problems in Brebes not yet shown optimal results.

Furthermore, building public awareness of the importance of health is not easy, especially in the circle of poverty with limited knowledge and economic conditions. Health awareness needs to be built and further improved to create better health conditions, especially in reducing stunting rates. It's necessary to take a systematic and intensively approach so that their mindset can be open and not so apathetic with health workers.

Researcher suggest to explore deeper and wider for next research in the future, and hopefully this research can be useful for other related studies.

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