RESEARCH ARTICLE

LITERATURE REVIEW: PREVENTION AND CONTROL INNOVATIONS TO REDUCE STUNTING IN CHILDREN UNDER FIVE YEARS OLD

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ABSTRACT

***Introduction**: In Indonesia, one of the biggest nutritional problems for infants and children under two years old is stunting. Currently, the prevalence of stunting in Indonesia is 21.6%, while the target to be achieved is 14% by 2024. The challenge faced by families today is no longer a population explosion, but the problem of inequality and how to improve quality, especially in terms of accelerating the reduction of stunting. This paper tries to analyze several interventions that can be given to children who are stunted. The main factor that triggers the high stunting rate is the lack of nutritional intake consumed by mothers and infants.*
***Methods:** In this literature review search, we found 5 aligned journal articles from Google Scholar and Pubmed databases. Which we then used to analyze several innovations or ways to overcome the problem of stunting in children.*
***Results:** The mother's own commitment and enthusiasm are needed to improve her own health and her child's nutritional intake. Changes in children's weight, height, and head circumference occurred after receiving nutrition interventions.*
***Conclusion:** Based on the analysis, it can be concluded that nutritional interventions, improving access to clean water and sanitation, and providing education have an effect in reducing stunting rates in Indonesia.*

***Keyword:** Stunting, Intervention, Stunting Intervention, Stunted Children*

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INTRODUCTION

Stunting is a condition where children have a length and height that is less than their age (Muthia and Yantri, 2019). Stunting results from the accumulation of nutritional inadequacies that last from pregnancy to 24 months of age (Hoffman et al, 2000; Bloem et al, 2013). (Mitra, 2015). Stunting is a significant public health problem for child growth and health. So through its programs, the government is trying to focus on improving nutrition and handling stunting in children. Therefore, it is important to improve diet, parenting, and sanitation to prevent stunting. (Trinanda, 2023). The Ministry of Health of the Republic of Indonesia defines stunting as a condition of infants or toddlers with a z-score value that is less than -SD (standard deviation) (TNP2K, 2017). (Maulana, Sholihah and Wike, 2022). Broadly speaking, the causes of stunting can be grouped into three levels, namely the community, household (family) and individual levels. At the household (family) level, inadequate food quality and quantity, income level, inadequate parenting of children's food, inadequate basic

health services are factors that cause stunting, where these factors occur due to factors at the community level (UNICEF, 2007) (Yazia et al., no date).

Some obstacles in preventing stunting include delays in information getting to the regions, disconnection of information, different regional demographic conditions (Al Jihad et al., 2022). In handling stunting, a strategy is needed to realize generational change, production, and healthy competitiveness. (Azhari and Mahwati, 2022).

The indicator used to measure stunting infants is by using the height-for-age index with WHO standards if the TB/U z score value < -2 Standard Deviation. According to data obtained from the World Health Organization (WHO), stunting cases in Indonesia are included in the third highest prevalence of countries in the Southeast Asia region. WHO also mentioned that around 149.2 million (22%) children under the age of 5 suffer from stunting in 2020. Data from the Indonesian Nutrition Status Study (SSGI) shows that the prevalence of stunting in Indonesia in 2022 is 21.6%. Until now, stunting is still one of the health problems that also appears in the Indonesian government's priority programs in 2020-2024. In the Medium-Term Development Plan (RPJMN), the Indonesian government targets the highest stunting rate at 19% in 2024 (Priyono, 2020).

Stunting is a problem that often occurs in children under five due to chronic malnutrition. Stunting will usually have an impact on growth and motor development so that their bodies will be shorter than normal. Poor nutrition during their growth period is one of the causes of stunting. Stunting often occurs in poor and developing countries like Indonesia because it is influenced by several factors such as lack of parental knowledge and lack of adequate vitamin provision for children under five. In addition, limited access to clean water and sanitation, as well as high rates of marriage and pregnancy at a young age are also factors that can cause stunting. This is an important issue for health in Indonesia that needs to be addressed.

Various innovations that can be a solution in handling stunting in toddlers include monitoring toddler nutritional intake and increasing access to clean water and sanitation and providing education. Monitoring toddler nutritional intake is useful for ensuring adequate fulfillment of macro and micronutrients which have an impact on normal growth patterns so that it is very important to prevent stunting. Programs that ensure access to safe drinking water and sanitation aim to increase access to clean water and sanitation. In addition, providing education can increase public knowledge, especially for parents by telling the importance of paying attention to nutritional intake for toddlers by introducing various foods with good nutrition to encourage a decrease in stunting rates in Indonesia. Thus, the purpose of this literature review is to identify the effect of fulfilling toddler nutrition, improving access to clean water and sanitation, and providing nutrition education in reducing stunting in Indonesia. The results of this literature review can provide information on whether the fulfillment of toddler nutrition, improving access to clean water and sanitation, and providing nutrition education are solutions that contribute to reducing stunting in Indonesia.

METHODS

Study Design

This literature review uses literature review as a research methodology to answer the research question: "Do nutritional fulfillment, improved access to clean water and sanitation, and nutrition education have an effect on reducing stunting among children under five years of age?" The development of the literature questions followed the PICO (population, intervention, comparison, and outcome) guidelines to generate specific questions and to ensure consistency among the selected studies. In this literature review, the PICO guidelines were formulated as: P: stunted children, I: under-five nutrition monitoring, improved access to clean water and sanitation, and education, O: Reduction in stunting

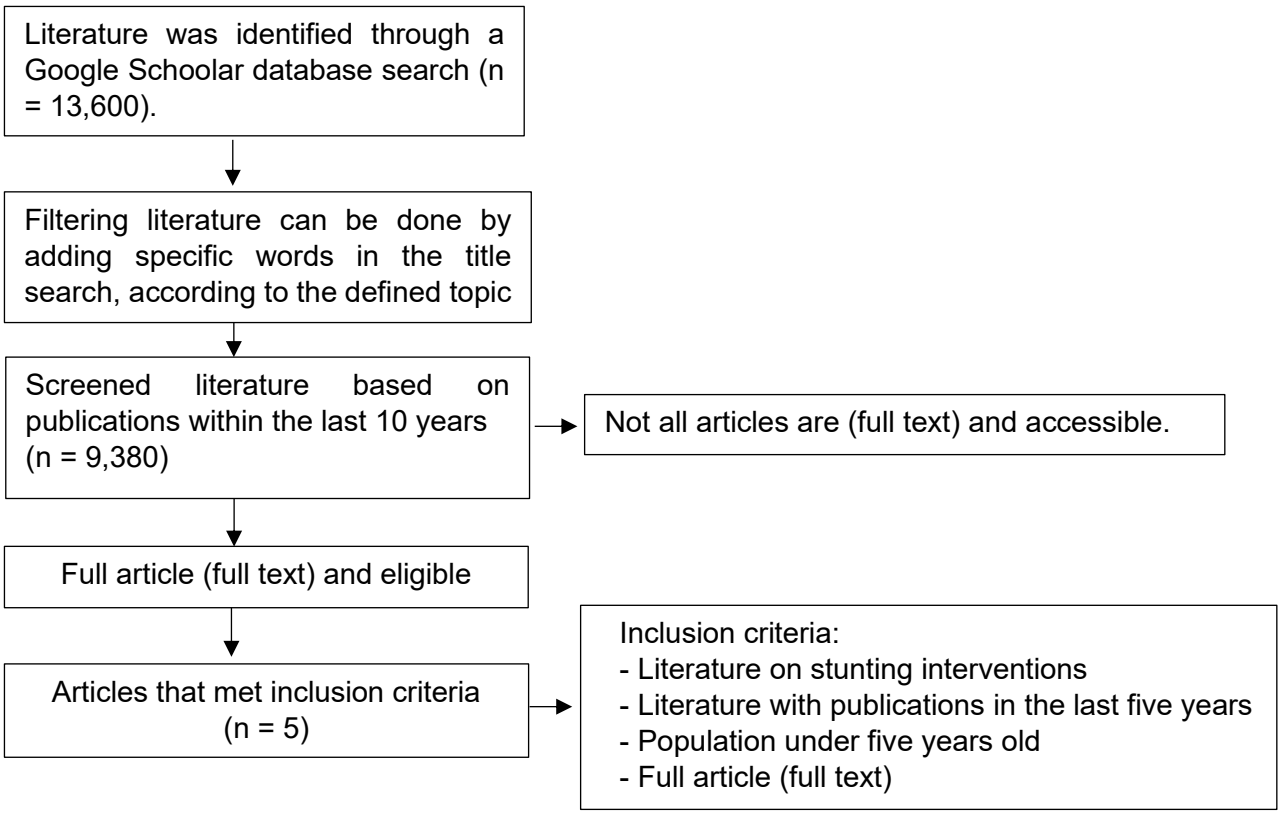
Search Strategy

This literature review search used the Google Scholar database in searching for articles. The keywords used in this literature review search are stunting, intervention, stunting intervention, stunted children.

Selection criteria

The inclusion criteria were studies on stunting interventions, studies published within the last five years, population under five years old, and full-text articles. Exclusion criteria were theoretical reviews or opinions, inaccessibility, and full-text articles over 10 years old.

Literature search and selection process



List of Search Result Articles

List of articles based on search results, articles that meet the result criteria are as follows:

Article Identity (Title, Author, and Journal Name)	Quality of Articles
"Supplementary Feeding as an Effort to Address Stunting in Toddlers in Indonesia" (Khoirul Waroh, 2019) Journal of Midwifery	Articles are systematically written, focused on the topic being discussed, clearly evidenced by accurate facts based on research that has been carried out, are non-blocking, and are interconnected with the research theme being discussed.
"Prevention of Stunting Through Specific Nutrition Intervention of Fish Nugget Feeding Moringa and Eggs in Torobulu Village, South Konawe Regency" (Saranan et al., 2023) Mandala Journal of Community Service	Articles are written systematically, focus on the topic being discussed, are clearly evidenced by accurate facts based on research that has been carried out, contain complex data, and are interconnected with the research theme being discussed.
"Stunting Intervention Package on the Skills of Posyandu Cadres in Preventing Stunting in Toddlers" (Julianti & Elni, 2022) *Journal of Silampari Nursing*	Articles are well-written and systematic, focused on the topic at hand, clearly substantiated with accurate facts based on research that has been conducted, are non-blocking, and have reliable reference sources.

"Preventing Stunting Through Sensitive Intervention Programs" (Husen et al., 2022) Khairun Journal of Service (JPK)	Articles are well-written, comprehensive, clear enough to be proven by accurate facts based on research that has been carried out, and have reliable and up-to-date reference sources.
"Strategies for Implementing Specific Nutrition Interventions to Accelerate the Reduction of Stunting in Pelalawan District" (Jamaluddin et al., 2023) Journal of Regional Innovation Research (Rivda)	Articles are written systematically, focused on the topic being discussed, clearly evidenced by accurate facts based on research that has been carried out, comprehensive, and interconnected with the research theme being discussed.

RESULTS

Based on the inclusion and exclusion criteria, there were five relevant articles on the topic of stunting reduction. The analysis concluded that the recommended interventions involved fulfillment of nutrients in toddler diets and education on the importance of nutrition monitoring. The following table summarizes the articles that have been analyzed

Table 1. Summary of articles on INNOVATION IN PREVENTION AND RESPONSE IN REDUCING THE INCIDENCE OF STUNTING IN CHILDREN (n=5)

No	Author and Title of Article	Method	Sample	Results
1.	“Supplementary Feeding as an Effort to Address Stunting in Toddlers in Indonesia" (Khoirul Waroh, 2019)	Penelitian kualitatif	Underweight 6-24 month old toddler	The results of the study showed that the PMT-P or Supplementary Feeding program had a significant effect on changes in nutritional status in toddlers. This is evidenced by the results of weight/height and weight-for-age measurements.
2.	"Prevention of Stunting Through Specific Nutrition Intervention of Fish Nugget Feeding Moringa and Eggs in Torobulu Village, South Konawe Regency" (Saranan et al., 2023)	Ceramah	Mothers pregnant women and those with children aged 6-24 months and infants under 2 years old (Baduta) with an age range of 12-24 months.	The results of the study showed that there was an increase in weight, height, and head circumference in stunted children and pregnant women in the first and second weeks after the specific nutrition intervention. Evidenced by anthropometric measurement data before and after specific nutritional interventions.
3.	"Stunting Intervention Package on the Skills of Posyandu Cadres in Preventing Stunting in Toddlers" (Julianti & Elni, 2022)	Penelitian kuantitatif	53 respondents from posyandu cadres	The results of the study showed that the ability and skills of posyandu cadres in detecting the risk of stunting of toddlers increased after being given a stunting intervention package which included lectures, discussions, practicum, and

				demonstrations related to height/weight measurement and correct breastfeeding techniques. This intervention focused on increasing the knowledge and awareness of posyandu cadres by monitoring and evaluating KP-Scoring. Evidenced by data from the measurement of skills before and after being given the stunting intervention package.
4.	"Preventing Stunting Through Sensitive Intervention Programs" (Husen et al., 2022)	Ceramah	Pregnant women, breastfeeding mothers, and under-fives (infants under two years old)	The results of the study show that knowledge and application of diet, parenting, and clean water sanitation have increased after intensive intervention by providing information and direction. Evidenced by the data on the results of the achievement of dietary counseling activities, parenting patterns, and the provision of clean water sanitation.
5.	"Strategy for the Implementation of Specific Nutrition Interventions in Order to Acceleration of Stunting Condition Reduction In Pelalawan Regency (Jamaluddin et al., 2023)	Penelitian kualitatif	Adolescent girls 145, brides-to-be 70, pregnant women 145, infants less than 6 months old 53	The results showed that preventing stunting in toddlers can be done through several steps. First, it is necessary to conduct a nutritional assessment to ensure the adequacy of nutrients needed in child growth. Next, conduct nutritional diagnostics with regular nutritional monitoring and assessment to ensure the availability of adequate nutrition. Nutritional interventions need to be carried out with appropriate actions to ensure nutritional fulfillment in toddlers and avoid circumstances that can cause stunting. Regular nutritional monitoring and evaluation is necessary to measure the achievement of planned nutritional levels to prevent stunting. It is also important to pay attention to the mother's nutritional intake, consume diverse foods, provide exclusive breastfeeding until 6 months of age, accompany with healthy complementary foods, monitor the baby's health, and modify traditional recipes with the addition of moringa leaves. This aims to avoid instability in child growth and adverse effects in the future.

DISCUSSION

Stunting is a problem of growth failure due to chronic and prolonged malnutrition caused by multifactorial factors (Rohmadheny, 2018) In Indonesia, it is often believed that being short or tall is a genetic factor. This misconception requires serious attention from the community, government and relevant authorities. Research shows that genetic factors only contribute to 15% of cases. While the biggest factors are related to nutrition, growth hormones, and the occurrence of recurrent infections. Other variables that cause stunting include cigarette smoke and air pollution that affect stunting. Previous research shows that there is a significant relationship between stunting and birth weight and inclusive breastfeeding and suboptimal complementary feeding. Stunting occurs early in life and is very likely to continue later in adolescence there is a risk of being short. Children who are short at an early age (0-2 years) and even shorter at 4-6 years have a 27 times greater risk of being short at puberty. On the other hand, children who grow normally at an early age may have height problems at 4-6 years of age with 14 times the risk at pre-puberty. Therefore, despite reaching the first 1000 days of life (HPK), efforts need to be made to prevent growth retardation.

Stunting is caused by multidimensional factors and is not solely caused by factors such as malnutrition in pregnant women and children under 5 years of age. Therefore, the most important intervention to reduce the prevalence of stunting should be implemented in the first 1,000 days of life (HPK) in children under 5 years of age (Jamaluddin, Samsuddin and Andika Fauzi, 2023). Currently, the government has focused on nutrition improvement programs through the national movement policy for the first 1000 days of life (Laili and Andriani, 2019). According to (Saranani et al., 2023), the factors that cause growth retardation can be explained as follows.

1. Poor maternal knowledge about health and nutrition before, during and after childbirth. According to Permatasari (2021) toddlers who have a poor diet are 6 times more at risk of stunting than toddlers who have a regular diet (Fitrotuzzaqiyah and Rahayu, 2022). 60% of children aged 0 to 6 months receive non-exclusive breastfeeding and 2 in 3 of children aged 0 to 24 months receive non-exclusive breastfeeding. Complementary feeding is given or introduced starting when the baby is over 6 months old. Breastfeeding under six months and early complementary feeding will increase the risk of stunting because the digestive tract is not yet perfect, making it easier to spread infections such as diarrhea and ARI (Safitri, Lail and Indrayani, 2021). In addition to introducing new types of food to your baby, complementary foods also meet the nutritional needs of your baby's body that cannot be met through breast milk, strengthen the child's immune system and support the development of the immune system.
2. Health services including Ante Natal Care (ANC), Post Natal Care and self-health education are limited. According to the Ministry of Health and World Bank publications, child attendance at Posyandu has declined from 79% in 2007 to 64% in 2013, and children do not have adequate access to immunization services. Another fact is that 2 out of 3 pregnant women do not take enough iron supplements and access to quality early education services is limited (3 to 6 years old). Only one in three children do not attend PAUD/early childhood education services.
3. Access to clean water and environmental sanitation is difficult. Local data shows that one in five households in Indonesia still defecate in the open, and one in three households lack access to clean drinking water. Poor sanitation increases the incidence of disease, so sanitation strongly influences the incidence of stunting related to household sanitation and the incidence of diarrhea in young children. Association. Families with good home hygiene usually have young children who do not suffer from diarrhea, and vice versa, this is because the sanitation facilities do not meet the requirements. There is usually no clean water to wash hands, food, or dishes, so germs and bacteria that cause diarrhea cannot be eliminated. Water supply is closely related to health. In developing countries, lack of water supply for sanitation increases the incidence of disease and leads to malnutrition. An unhealthy environment can also cause diarrhea in families. Inadequate access and toilet facilities, as well as lack of fecal and waste disposal facilities, increase the prevalence of viruses, germs and germs,

leading to an increased incidence of diarrhea in young children in the family (Afrianty, Nuridah and Yodang, 2022).

4. Difficult access for households to nutritious food. When households face difficulties in accessing nutritious food, consumption levels will automatically drop. If this continues, it can trigger toddlers to develop chronic malnutrition which can cause toddlers to become short (Ningtias and Solikhah, 2020).

Based on the description above, effective countermeasures are needed that can be used to reduce the high rate of stunting, especially in Indonesia. Generally, the prevalence of stunting is reduced in two ways, namely specific nutrition prevention and sensitive nutrition prevention (Iqbal and Yusran, 2021). If specific nutrition prevention is prevention with health problems and in a short period of time in contrast to sensitive prevention is a way of prevention that is not a health problem. Some of the ways obtained from the articles we have reviewed include providing additional food to stunted children, providing additional specific nutrition, improving the skills of cadres in an area, implementing sensitive intervention programs, and implementing specific nutrition interventions.

PMT or Supplementary Feeding is an effort to provide additional food to increase nutritional intake to meet nutritional needs in the body so that nutritional status is achieved properly (Permenkes Republik Indonesia Number 51 of 2016) (Khoirul Waroh, 2019). The existence of the PMT program can increase adequate knowledge and skills to become an important aspect for mothers in ensuring the fulfillment of child nutrition. Mothers need to have the ability to form good eating habits, create a pleasant environment, and serve attractive dishes to meet children's nutritional needs. Protein balance is key in supporting normal growth, as the process of increasing cell size and number depends on adequate protein intake.

In this case, supplementary feeding in vulnerable groups includes infants aged 6 to 24 months in the underweight category with the results of measuring body weight according to body length (BB / PB) smaller than minus two Standard Deviation (-2 SD), elementary school children in the underweight category, pregnant women with chronic energy deficit, namely measuring the Upper Arm Circumference (LiLA) of pregnant women with results smaller than 23.5 cm. The ideal dosing period is 180 days (every 2 days). The ideal dosing period is 180 days (every 2 days). There are Supplementary Food standards that must be met for children aged 6-59 months, including: Content, in the form of composition and quality requirements, the nutrients contained in 100 grams of product must meet predetermined requirements; Food Additives; Contaminants, fulfillment of contamination limits in accordance with statutory provisions; Processing Methods; Packaging and labeling, which must be appropriate for whom this food is intended. According to Farida Fitriyanti, Tatik Mulyati (2012), after 60 days of PMT-P provision, there are differences in nutritional status based on BB/TB and BB/U. This is supported by an increase in the contribution of energy and protein intake from PMT-P to infants during the week and an increase in energy and protein intake from foods other than PMT-P resulting in daily nutritional intake. The average contribution of energy and protein to PMT-P of 54.60 ± 26.04 ± 79.17 ± 37.75% was greater than the contribution of energy and protein intake from foods other than PMT-P of 49.09 ± 27.42 ± 48.24 ± 13.86%.

Knowledge is one of the most important components in determining a person's actions. Knowledge based on understanding will foster a positive attitude in stunting prevention efforts (Arnita, Rahmadhani and Sari, 2020). Providing nutrition education is carried out to increase mothers' knowledge about the importance of fulfilling nutrition to avoid stunting. In addition to providing advice and counseling on specific and sensitive nutrition topics, nutrition education also included practical demonstrations on the preparation of optimal, high-nutrient meals for mothers, in addition to their usual diet, using local food ingredients (Husen, Runtunuwu and Suamole, 2022). It can be observed that this intervention has a positive impact on reducing Low Birth Weight (LBW), which is a key element to break the intergenerational cycle of malnutrition. In addition, parents can also learn that efforts to identify early growth disorders involve monitoring toddler growth at the posyandu. Early prevention includes routine screening and consistent monitoring of toddler height. This activity is carried out through Man-TAPS, a group of Mandiri Kreatif and Peduli Stunting cadres, who provide training to cadres on height measurement to improve their skills in assessing children's growth status. Routine height/age screening became an integral part of every posyandu activity. Furthermore, inadequate coverage of exclusive breastfeeding also has the potential to affect stunting rates, due

to a lack of public understanding of the benefits and urgency of providing exclusive breastfeeding to infants aged 0-6 months.

Therefore, it is necessary to empower posyandu cadres as breastfeeding counselors who provide counseling services to mothers to improve breastfeeding programs, especially exclusive breastfeeding, as a top priority (Julianti and Elni, 2022). This aims to increase mothers' understanding and awareness of breastfeeding, so that exclusive breastfeeding can be strengthened as a stunting prevention measure.

CONCLUSIONS

Based on the analysis, it can be concluded that nutritional interventions, improving access to clean water and sanitation, and providing education have an effect in reducing stunting rates in Indonesia. Changes in children's weight, height, and head circumference occur after receiving nutritional interventions. The mother's own commitment and enthusiasm are needed to improve her own health and her child's nutritional intake. In addition, an environment with good clean water and sanitation facilities makes toddlers develop well and not experience malnutrition that can cause stunting. The fulfillment of clean water and good sanitation also makes toddlers not susceptible to various diseases because of their cleanliness so that they do not become a hotbed of germs. Parents' knowledge, especially mothers, regarding nutritional fulfillment also participates in reducing stunting rates. With knowledge of nutritional fulfillment, parents pay more attention to the child's food intake so that the child's growth process runs smoothly and parents are able to identify growth disorders early.

SUGGESTIONS

Based on the conclusions of the results of this study, the researcher suggests several steps to improve the quality of health services, the development of nursing science, and the direction of future research

1. Health facilities

Health facilities should provide education to improve nutritional fulfillment among under-fives. This can be done through routine monitoring of toddlers' health, including nutritional fulfillment, measuring their weight, height and head circumference to monitor their growth. Nutrition education needs to be delivered to parents so that they can detect early growth disorders that have the potential to cause stunting, so that interventions can be carried out quickly.

2. Nursing field

The results of the literature review are the foundation of nursing, especially in community nursing, to educate about the importance of nutritional fulfillment, increasing access to clean water, and nutrition education. In addition, it provides knowledge to parents so that they can understand the development of toddlers and detect growth disorders early with the aim of preventing stunting.

3. Further research

The baseline information from this literature review serves as a basis for evaluating interventions for stunted toddlers. The aim is to ensure optimal care and support the health of children under five.

CONFLICT OF INTEREST

In writing this literature review, the authors declare that there is no conflict of interest from any party and in any aspect.

DECLARATION OF CONFLICTING INTEREST

none

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none

AUTHORS' CONTRIBUTIONS

All authors contributed equally to the conception, design, data collection, analysis, and writing of this manuscript.

CONFLICT OF INTEREST

The Authors declares that there is no conflict of interest' on this research.

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