Abstract

The problem of stunting has an impact on children's growth and development, especially cognitive disorders so it will reduce human resources. Therefore stunting must be handled appropriately and effectively. Muara Enim Regency as one of 17 regencies in South Sumatra is a district that is included in the category of high stunting prevalence. The 2018 Riskesdas showed that the prevalence of stunting in Muara Enim was 34.4% higher than in South Sumatra (32%) and the National (30.8%). The same thing comes from the results of the 2021 national under-five nutritional status study, Muara Enim's stunting prevalence rate of 29.7% is included in the 3rd highest district in South Sumatra (24.8%). Research conducted by Susyani, et al (2022) in the stunting locus area of Muara Enim Regency shows that it is still found 26 (9.6%) children under five were very short and 64 (23.5%) were short. In addition, for toddler visits to integrated services post with non-routine visits which are still high, namely less than 8 times a year, it is 71 (62.1%). Based on this, it is necessary to carry out community service activities in the form of assistance through refreshing integrated services post cadres in increasing the knowledge and skills of cadres in preventing and accelerating the reduction of stunting at the stunting locus in the Muara Enim Regency area. This community service is carried out through refreshing cadres in monitoring the growth and development of children as well as the skills of cadres in screening the nutritional status of toddlers, women of childbearing age, and pregnant women. There was an increase in the knowledge of cadres regarding the activities carried out at the integrated services post by 19.9 points after the posttest was carried out. Apart from that, this community service activity is expected to increase the knowledge and skills of integrated services post cadres in helping prevent and accelerate the reduction of stunting in the stunting locus in Muara Enim Regency.

Keywords: Knowledge, Refreshing Integrated Services Post Cadres Assistance, Skills, Stunting.
INTRODUCTION

Muara Enim is one of 17 districts/cities in South Sumatra which is included in the stunting category with the highest prevalence. The 2018 Riskesdas showed that the prevalence of stunting in Muara Enim was 34.4%, exceeding that of South Sumatra (32%) and the National (30.8%). The results of the study of the nutritional status of toddlers stunting in the Muara Enim Regency area is the implementation of assistance to families at risk of stunting through the role of integrated services post cadres which is expected to result in a transfer of knowledge to the target and also the cadres themselves so that integrated services post cadres can continue in the future.

Based on the above conditions, the government has launched a public health development program to prevent and treat stunting. The successful implementation of public health development in combating stunting requires the support and active role of the whole community, such as cadres. In this case, Integrated Service Post cadres have a big role because cadres directly deal with various problems in the community, including health problems faced by the community (Tse, Suprojo, & Adiwidjaja, 2017).

Based on the above, integrated services post cadres need to increase their knowledge and ability to recognize stunting, so that stunting can be prevented.

The results of research conducted by Susyani, et al (2022) regarding the role of tertiary institutions in preventing and accelerating the reduction of stunting through the Caring for Stunting (important) student assistance method for families at risk of stunting and integrated services post cadres at the stunting locus in the Muara Enim Regency area show that out of 272 children under five there are 26 (9.6%) very short and 64 (23.5%) short. In addition, for toddler visits to integrated services post with non-routine visits which are still high, namely less than 8 times a year, it is 71 (62.1%). For this reason, it is necessary to refresh integrated services post cadres which can not only increase the knowledge and skills of integrated services post cadres, prevent and accelerate the reduction of stunting at the stunting locus in the Muara Enim Regency area.

The results of this research are used as the basis for carrying out community service activities in the form of refreshing integrated services post cadres in increasing the knowledge and skills of cadres through mentoring methods in preventing and accelerating the reduction of stunting at the stunting locus in the Muara Enim Regency area.

IMPLEMENTATION METHOD

The target of this community service activity is integrated services post cadres spread across 4 villages where the focus (Locus) for stunting is in Muara Enim Regency namely Sugih Waras Barat, Pagar Agung, Kencana Mulya and Marga Mulya with a total of 46 cadres. Activities in the form of carrying out activities at the integrated services post include monitoring the growth and development of toddlers through weighing, filling in KMS books, counseling, and cadre skills in using tools/instruments for measuring body length and weighing weight including using LILA tape so that cadres can screen the nutritional status of toddlers, including women of childbearing age and pregnant women. It is hoped that after the implementation of this activity the integrated services post cadres will have the knowledge and skills and be able to understand:
a. Monitoring the growth and development of toddlers through weighing
b. Fill in the toddler KMS book
c. Counseling skills
d. Skills in the use of instruments/tools measurement body length (stadiometer) and toddler weight
e. Skills in screening the nutritional status of toddlers, women of childbearing age, and pregnant women

Based on the type of Community Service activity, community service activities targeting integrated services post cadres are carried out with 2 main activities, namely 1). Implementation of activities at the integrated services post which includes monitoring the growth and development of toddlers through weighing, filling in the KMS book, as well as counseling. 2) Skills of Cadres in using instruments/equipment measurement body length: stadiometer, microtoise, and lengthboard as well as weighing using a baby scale. Digital scales, including the use of LILA tape.

The activity process is as follows
a. Implementation of integrated services post activities:
   Activities in the form of counseling/providing material as well as refreshing the cadres regarding how to monitor the growth and development of toddlers through weighing, how to fill in the KMS book, as well as counseling on nutrition and health. at the integrated services post. After completing the counseling, the cadres took the post-test that had been prepared to find out whether the cadre's level of knowledge of the material provided had increased.

b. Providing training as well as refreshing for cadres in the use of body length measurement instruments: stadiometer, microtoise, and lengthboard as well as weighing toddlers using baby scales and digital scales

c. Demonstrate the process of screening activities, so that cadres acquire skills in conducting appropriate screening to see the nutritional status of toddlers,

d. women of childbearing age and pregnant women

RESULTS AND DISCUSSION

Community service activities have been carried out with 2 main activities, namely the implementation of women of childbearing age activities, and skills in using instruments/tools measurement body length and body weight. So that cadres become skilled in screening the nutritional status of toddlers, including women of childbearing age and pregnant women, as follows:

1. Implementation of activities at the women of childbearing age: Activities carried out in the form of counseling/providing material as well as refreshing the cadres on how to monitor the growth and development of toddlers through measuring body height and weighing, how to fill out KMS books, as well as counseling on nutrition and health. The number of participants who took part in this activity was 46 integrated services post cadres spread across 4 villages where the stunting focus (Locus) was located, Muara Enim Regency namely Sugih Waras Barat (11 cadres), Pagar Agung (12 cadres),
In addition, assistance is also provided for community participation (D/S) in the growth monitoring program, by providing counseling to increase interest and understanding of the importance of monitoring growth in toddlers so that mothers who have toddlers are diligent in bringing their toddlers to the integrated services post every month. To find out the level of their knowledge and understanding of the material provided, a pretest and posttest were carried out.

Image 1.
Counseling/providing material as well as refreshing the cadres regarding monitoring the growth and development of toddlers through weighing, how to fill in the KMS book, as well as counseling on nutrition and health in 4 Locus Stunting Villages, Muara Enim Regency
2. Training as well as refreshing for cadres in the use of body length measuring instruments: stadiometers, microtoise, and lengthboard as well as weighing using baby scales and digital scales and using LILA tape.

Figure 2.

Training as well as refreshing for cadres in the use of body length measurement instruments: stadiometer, microtoise, and lengthboard as well as weighing toddlers using baby scales and digital scales and using LILA tape

Figure 2 above is a training activity as well as refreshing cadres in the use of body length measurement tools stadiometer, microtoise, and lengthboard, weighing toddlers using baby scales, and digital scales and using LILA tape.

In this activity, cadres are expected to be skilled in using the tool/instrument such as calibrating the tool, the procedure for using it and how to read the results of the correct measurement and weighing. During training, cadres receive additional information or knowledge about stunting and develop skills gradually. The skills provided in the training are early detection of stunting through skills in assessing height and body length.

Training on stunting, its causes, signs, and symptoms as well as simulations of measuring length and height can increase the knowledge and skills of cadres as a whole. Exposure to information is an external factor that can increase knowledge. Increased
knowledge will provide awareness that will lead to changes in behavior (Notoatmodjo, 2010). The expected result is that cadres can carry out screening as early detection in assessing the nutritional status of toddlers, women of childbearing age, and pregnant women to prevent and accelerate the reduction of stunting.

CONCLUSION

There was an increase in the knowledge of integrated services post cadres by 19.9 points after the posttest was carried out. In addition, the implementation of community service activities is expected to increase the knowledge and skills of cadres in monitoring toddlers' developmental bodies through weighing, filling in toddlers' KMS books, skills in providing counseling, and using instruments/equipment measurement body length (stadiometer) and toddler weight, skills in screening the nutritional status of toddlers, WUS and pregnant women.

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