

Stunting Prevention Through “Sarangge Maloa” In Bima District

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Abstract

Background : Stunting was chronic malnutrition problem caused by inadequate nutritional intake for a long time. Bima Regency were one of the 169 priority areas for handling stunting by the Secretariat of the Presidential Secretariat in 2019. The Geographical barriers and limited facilities, infrastructure, and health human resources have made it difficult for people in some areas of Bima Regency to obtain optimal health services. Sarangge has become a public space where ideas meet, discuss and plan about anything, even as a forum for village consultations (mafaka ro dampa).Objective: To determine the effectiveness of stunting prevention through the Ma Loa Sarangge in Bima Regency.Methods: This research was a quasi-experimental study with a pretest-posttest one-group design and analyzed using the Wilcoxon test.Results: The research data identified that the knowledge of Cadres before being given training on stunting prevention was 10 people (66.7%) and after being given training increased to 15 people (100%). Likewise, the previous knowledge of mothers was 14 people (46.7%) and after receiving training increased to 28 people (93%). Cadres and mothers, after receiving training on stunting prevention, have changed their knowledge of increasing. The results of Wilcoxon's analysis show that the significance value of knowledge of cadres and mothers is $p = 0.025$ and $p = 0.000$, respectively. P-value Significance = 0.05. which means the p-value is smaller than the p significance.Conclusion: So it can be concluded that there was an effect of training on stunting prevention through "Sarangge Maloa" in Wawo district for the knowledge of cadres and mothers.

Keywords Knowledge Prevention Stunting

Introduction

Stunting is a chronic malnutrition problem caused by inadequate nutritional intake for a long time due to feeding that is not following nutritional needs. Stunting can occur from the time the fetus is still in the womb and only appears when the child is two years old. Indonesia is ranked 5th for ASEAN countries, reaching 37%. The prevalence of stunting in Indonesia based on the results of the 2016 Nutrition Status (PSG) monitoring reached 27.5%. In 2018 in the Province of NTB, there were still toddlers who were short and very stunted (stunting). Based on the EPPGBM Nutrition Surveillance (Electronic Recording of Community-Based Nutrition Reporting) in 2018, it was found that there were 82,812 stunted toddlers in NTB Province. Bima Regency is one of the regencies in West Nusa Tenggara (NTB) Province. In Bima District, the Stunting Incidence Rate based on data from the Bima District Health Office was obtained as many as 14,360 children. Bima Regency is one of 169 priority areas for handling stunting by the Setwapres in 2019.

Several sub-districts in Bima district, one of which is Wawo sub-district, is a hilly area and the population is widely dispersed from one village to another with an average livelihood of farming. The condition of the area is a challenge and difficult for health workers to provide maximum health services, therefore, it is necessary to have facilities that are close to the community and empower special cadres to increase the knowledge and skills of the community, especially mothers, in preventing stunting in Bima Regency. The people of Bima Regency also still adhere to ancestral customs and traditions, where deliberation and consensus (*mafaka ro dampa*) is one of them. Bima Regency has a unique place/media for gathering and staying in touch, even as a place for deliberation and consensus, namely "Sarangge". Sarangge (Bima language) is a seat made of bamboo and wood. Sarangge is very close to the life of the Bima community, Sarangge can be a strategic health promotion facility if used properly accompanied by cadres who are trained local villagers. Optimizing existing facilities (sarangges), as well as the resources of health workers and cadres, are expected to be able to carry out health promotion to prevent stunting (Putri et al., 2021). Health cadres are an extension of the government, in this case health workers, to support stunting prevention and treatment programs.

The determining factors that cause stunting in Bima Regency include a history of SEZ disease in pregnant women, a history of children under five suffering from helminthiasis, ownership of healthy latrines, complete basic immunization history, and family smoking. According to Prof. Hamam Hadi, a Professor of Medicine at Gajah Mada University, stunting is influenced by two things, namely heredity and environmental conditions. Factors that have a major influence on stunting are environmental factors, namely low nutritional intake in the first 1,000 days of life, from fetus to baby aged two years. In addition, poor sanitation facilities, lack of access to clean water, and lack of

environmental hygiene. Poorly maintained hygiene conditions make the body have to fight the source of disease extra so that it hinders the absorption of nutrients (Primadewi & Diwyami, 2021). Children who experience stunting appear to experience slowed growth, the face looks younger than their age, teeth growth is delayed, poor performance in focus and learning memory skills, delayed puberty, ages 8-10 years the child becomes quieter, does not make much eye contact with people surrounding. Given the magnitude of the impact caused by stunting, stunting prevention is very important to save Indonesian generations in the future. As one of the efforts of the provincial government and local governments, the GEN = Generation EmasNTB program (ASHAR program = the First Thousand Days of Birth) program, and GEBRAK BIMANTIKA (a joint movement of Bima Regency in preventing stunting and anemia. Utilization of existing facilities and community empowerment (utilization of nesting and the formation of special cadres) for this reason, it is something that must be done immediately as an extension of health workers at all levels of society so that the stunting problem can be reduced and overcome.

Research objectives in general, this study aims to determine the effectiveness of stunting prevention through Sarangge Ma Loa in Bima Regency. Special purpose to identify the knowledge and skills of the Sarangge Ma Loa Cadre before and after being given training on stunting prevention in Bima District, to identifying the knowledge and skills of Mrs. Sarangge Ma Loa before and after being given training on stunting prevention in Bima District and testing the effectiveness of cadres and Mrs. Sarangge Ma Loa for stunting prevention in Bima District

Method

This study is a quasi-experimental study with a Pretest-Posttest one Group Design, which aims to answer the effectiveness of stunting prevention through Sarangge Ma Loa in Wawo District, Bima Regency. The population in this study were all cadres and mothers in the Wawo District, Bima Regency as many as 3,008 people. Population data by gender (BPS Reg. Bima 2016). The sample size in this study was 45 people who met the inclusion criteria. In this study, researchers took samples with the purposive sampling technique. The data were analyzed using the Wilcoxon test with a limit of significance

Results

Respondents in this study were cadres (15 people) and mothers (30 people). Characteristics of respondents consist of, education level, age and occupation. More details can be seen in Table 1.

Table 1. Characteristics of respondents

Education	Total	Percentage
SD	0	0
SMP	0	0
SMA	13	86,6
College	2	13,4
Age (Years)		
17-25	1	6,7
26-45	10	66,7
46-55	4	26,6
Occupation		
Student	1	6,7
Housewife	10	66,7
Private	4	26,6
Total	15	100

Based on Table 1, it can be seen that most of the respondents 13 people (86.6%) have formal education at the high school level (SMA), age 26-45 as many as 10 people (66,7%) and have jobs, most of them are household members 10 people (66, 7 %).

Cadre Activity in Posyandu activities

Table 2. Cadre activity in Posyandu activities

Activity	Total	Percentage
Active	8	53,3
Less Active	7	46,7
Total	15	100

Based on Table 2, it can be seen that 53.3% of active (routine) cadre respondents participated in Posyandu activities.

Characteristics of Mother Respondents

The characteristics of the respondents consisted of mothers consisting of, education level, age and occupation. More details can be seen in Table 3.

Table 3. Distribution of respondents' mothers according to the education level of Wawo District, Bima in 2021

Education	Total	Percentage
SD	2	6,7
SMP	6	20
SMA	21	70
College	1	3,3
Age (Years)	Total	Percentage
17-25	9	30
26-35	21	70
36-45	0	0
Occupation	Total	Percentage
Student	0	0
Housewife	27	90
Private	3	10
Total	30	100

Based on Table 3, it can be seen that most of the respondents 21 people (70%) have formal education at the high school level (SMA), age 26-45 as many as 21 people (70%) and have jobs, most of them are household members 27 people (90%).

Mother's Activeness in Posyandu activities

Table 4, Mother's Activity in Posyandu activities

Activity	Total	Percentage
Active	10	33,3
Less Active	20	66,7
Total	30	100

Based on Table 4, it can be seen that 10 people (33.3%) of active (routine) cadre respondents participated in Posyandu activities.

Special Data

Knowledge and Skills of Cadres before and after being given health training on stunting prevention through "Sarangge Maloa" in Wawo District. Bima in 2021

The results of tabulation of knowledge of Cadres before and after being given training on stunting prevention through "Sarangge Maloa" in Wawo District. Bima in 2021.

Table 5. Frequency distribution Knowledge of cadres before being given training

Knowledge	Frequency	Percentage (%)
Not enough	0	0
Enough	5	33,3
Good	10	66,7
Total	15	100

Based on Tabel 5, it can be seen that before being given knowledge training, the majority of cadres were in a good category as many as 10 respondents (66.7%).

Table 6. Frequency distribution of knowledge of cadres after being given training

Knowledge	Frequency	Percentage (%)
Not enough	0	0
Enough	0	0
Good	15	100
Total	15	100

Based on Table 6, it can be seen that after being given knowledge training, all cadres are in the good category as many as 15 respondents (100%).

The results of tabulation of Cadre Skills data before and after being given training on stunting prevention through "Sarangge Maloa" in Wawo District, Bima in 2021.

Table 7. Frequency distribution of Cadre Skills before being given training

Skills	Frequency	Percentage (%)
Not enough	0	0
Enough	7	46,7
Good	8	53,3
Total	15	100

Based on Table 7, it can be seen that before being given skills training, the majority of cadres were in a good category as many as 8 respondents (53.3%).

Table 8. Frequency distribution of Cadre Skills after being given training

Skills	Frequency	Percentage (%)
Not enough	0	0
Enough	0	0
Good	15	100
Total	15	100

Based on Table 8, it can be seen that after receiving training, 15 people (100%) have good knowledge.

Mother's knowledge and skills before and after being given training on stunting prevention through "Sarangge Maloa" in Wawo District, Bima in 2021

The results of tabulation of maternal knowledge data before and after being given training on stunting prevention through "Sarangge Maloa" in Wawo District, Bima in 2021.

Table 9. Frequency distribution of Mother's Knowledge before being given training on stunting prevention through "Sarangge Maloa" in Wawo District, Bima in 2021.

Knowledge	Frequency	Percentage (%)
Not enough	9	30
Enough	7	23,3

Good	14	46,7
Total	15	100

Based on Table 9, it can be seen that before being given knowledge training, the majority of mothers were in a good category as many as 10 respondents (46.7%).

Table 10. Frequency distribution of Mother's Knowledge after being given training on stunting prevention through "Sarangge Maloa" in Wawo District. Bima in 2021

Knowledge	Frequency	Percentage (%)
Not enough	0	0
Enough	2	6,9
Good	28	93,1
Total	30	100

Based on Table 10, it can be seen that after being given knowledge training, all cadres are in a good category as many as 28 respondents (93.1%)

Based on table 5.9 it can be seen that after being given knowledge training, all cadres are in a good category as many as 28 respondents (93.1%)

The results of tabulation of Maternal Skills data before and after being given training on stunting prevention through "Sarangge Maloa" in Wawo District, Bima in 2021

Table 11. Frequency distribution of Mother's Skills before being given training

Skills	Frequency	Percentage (%)
Not enough	5	16,7
Enough	12	40
Good	13	43,3
Total	30	100

Based on Table 11, it can be seen that before being given training in Mother Skills the majority in the good category as many as 13 respondents (43.3%)

Table 12. Frequency distribution of Mother's Skills before being given training

Skills	Frequency	Percentage (%)
Not enough	0	0
Enough	3	10
Good	27	90
Total	30	100

Based on Table 12, it can be seen that after receiving training who have good knowledge of 27 people (90%).

Prerequisite Test

Based on the results of the data normality test (data on knowledge and skills of cadres as well as knowledge and skills of mothers) obtained a significant value of 0.00. The significance value is > 0.05 which explains that the distributed data is not normally distributed so that the Wilcoxon test is continued.

Results of Statistical Analysis of the Effect of Training on stunting prevention through "Sarangge Maloa" in Wawo District. Bima in 2021

Statistical analysis Results from Knowledge and skills of cadres before and after being given training on stunting prevention.

Table 12. Table of Cadre Knowledge analysis results before and after being given training on stunting prevention

Knowledge	n	Mean	St Dev	Min	Max
Pre	15	2,7	0,4	2	3
Post	15	3,0	0,0	3	3
p value = 0,025					

Based on Table 12, it can be seen that the p-value is 0.025. Thus, it can be concluded that there is a significant effect of the training provided on increasing the knowledge of cadres about stunting prevention.

Table 13. The results of the analysis of Cadre Skills before and after being given training on stunting prevention

Skills	n	Mean	St Dev	Min	Max
Pre	15	2,5	0,52	2	3
Post	15	3,0	0,0	3	3
p value = 0,008					

Based on Table 13, it can be seen that the p-value is 0.008. Thus, it can be concluded that there is a significant effect of the training provided on improving the skills of cadres regarding stunting prevention.

Results of statistical analysis Mother's knowledge and skills before and after being given training on stunting prevention.

Table 14. the results of the analysis of Mother's Knowledge before and after being given health education about stunting prevention

Knowledge	n	Mean	St Dev	Min	Max
Pre	15	2,2	0,85	1	3
Post	15	2,9	0,25	2	3
p value = 0,00					

Based on Table 14, it can be seen that the p-value is 0.001. Thus, it can be concluded that there is a significant effect of the training provided on increasing mothers' knowledge about stunting prevention.

Table 15. Results of the analysis of maternal skills before and after being given health education about stunting prevention

Skills	n	Mean	St Dev	Min	Max
Pre	30	2,3	0,75	1	3
Post	30	2,9	0,31	2	3
p value = 0,00					

Based on Table 15. It can be seen that the p-value is 0.000. Thus, it can be concluded that there is a significant effect of the training provided on increasing mothers' knowledge about stunting prevention.

Discussion

Knowledge of Cadres and Mothers Before Training on stunting prevention through "Sarangge Maloa" in Wawo District, Bima in 2021

The results of research that has been carried out on 15 cadres in Wawo Subdistrict, Bima Regency, that cadre respondents have knowledge about stunting prevention in the good category as many as 10 people (66.7%), actively participate in posyandu activities as many as 8 people (63.3%), and have a high school education level of 13 people (86.6%). While the respondents were mothers as many as 30 people. Knowing the good category are 14 people (46.7%), having education, the majority of which are high school as many as 21 people (70%), diligently taking their children to the Posyandu to take part in basic immunization activities as many as 10 people (33.3%). Before receiving the training, some cadres and mothers had good knowledge about stunting even though the percentage was said to be still low, this was because the respondents (cadres and mothers) had a high school education level and were active in routine posyandu activities carried out by the Wawo Health Center. So, the cadres and mothers are often exposed to health information by health workers when carrying out posyandu activities. Budiman (2013) said that education affects a person's learning process, the higher a person's education, the easier it is to receive information, including information about his health.

This is in line with the results of research by Aruna Ramasany (2013) which states that there is a relationship between education level and knowledge about Antenatal Care among women of childbearing age at PKM Padang Pulan. Another supporting research is the research by Mellina Estiani, et al (2015) which says there is a relationship between education, knowledge and attitudes towards menopause, knowledge is closely related to education which is one of the human needs, good knowledge appears when it is in line with education and gets good information. enough.

Knowledge of Cadres and Mothers After being Provided with Training on stunting prevention through "Sarangge Maloa" in Wawo District. Bima in 2021

The results showed that the knowledge of cadres after attending training on stunting prevention was in the good category as many as 15 people (100%) and the mother's knowledge was in the good

category of 28 people (93.1%) When compared with the level of knowledge before and after receiving training, it appears that there is an increase in the knowledge of Cadres and mothers after receiving the training. Knowledge is said to increase when there is a change from not knowing to know and those who already know to know more. This research is also in accordance with Machfoed's (2005) theory, which states that health education or training is a process of change, which aims to change individuals, groups, communities, towards positive things in a planned manner through the learning process. These changes include, among others, knowledge, attitudes and skills through the process of health education and training. This is supported by research conducted by Kartikasari et al (2020), saying that training has a positive impact on nurses' knowledge in assessing client needs. It is also supported by research by Zeweter Abebe, MSc et al. who said that access to training through the Health Extension Program (HEP) affects mothers' knowledge about optimal infant and child feeding (IPM) and the nutritional status of their children. The material obtained during the training has an impact on increasing the knowledge of cadres and mothers about stunting prevention. In the implementation of the training, cadres were given a module containing broader material on stunting and its prevention, while mothers were given a booklet containing pictures accompanied by writings that emphasized the explanation of pictures about stunting prevention.

Skills of Cadres and Mothers Before Training on stunting prevention through “Sarangge Maloa” in Wawo District, Bima in 2021

Based on the results of the study, it was found that before participating in the training, the skills of cadres were in the good category of 8 people (53.3%) and the skills of mothers were 13 people (43.3%). stunting, although in small quantities. This is since the majority of respondents, both cadres and mothers, are between the ages of 26-45, with 10 people (66.7%) and 21 people (70%). Skills are the ability to operate work easily and carefully (Sri Widiarti, 2010).

According to Notoatmojo (2007) age affects a person's perception and mindset. The older they get, the more their grasping power and mindset will develop so that the knowledge and skills gained are getting better. This is supported by research by Siti Munfarida, et al (2012) on factors related to the level of knowledge and skills of posyandu cadres, which proves that the older the posyandu cadres are, the better the level of knowledge and skills. Cadres and mothers have the highest number at the age of 26-35 years. This age is the age of early adulthood (Depkes RI, 2009), where at that age the development of human life is at the stage of accepting and being responsible for life. This sense of responsibility for life encourages individuals to have knowledge and skills about problems in their lives, including health problems for themselves and their families.

Skills of Cadres and Mothers After being Provided with Training on stunting prevention through "Sarangge Maloa" in Wawo District, Bima in 2021

Based on the results of the study, it was found that after attending the training, the skills of the cadres were in the good category of 15 people (100%) and the skills of mothers were 27 people (90%). The data shows that training on stunting prevention through "Sarangge Maloa" in Wawo District, Kab. Bima has been able to improve the skills of Cadres and mothers in preventing stunting in children. Skills are said to increase when there is a change from being unable to be able to do a useful job. (Ibrahim, 2003).

There are 3 respondents mothers (10%) who have sufficient skills. This happens to mothers with elementary and middle school education. According to. Notoadmodjo (2010), education affects a person's ability to absorb information. This means that the higher the education, the easier it will be to receive and understand information. Mothers with basic education are more likely to receive information about stunting prevention than mothers with upper secondary and higher education.

This research is supported by the research of Fransisca Noya et al (2021). The results of his research concluded that the training of youth posyandu cadres increased the knowledge and skills of adolescent cadres in Pantagolemba Village in carrying out anthropometric measurements, determining BMI and adolescent nutritional status. Other studies also say that there is an increase in the ability to practice parenting skills scores. (Eka Oktavianto, et al, 2017). Training is part of education that involves the learning process, is useful for acquiring and improving skills outside the applicable education system, in a relatively short time and prioritizing practice over theory. Health education in the short term can produce changes and increase the knowledge of individuals, groups and communities because knowledge or cognition is a very important domain for the formation of one's actions.

Effect of Training on stunting prevention through "Sarangge Maloa" in Wawo District, Bima in 2021

The Effect of Training on stunting prevention through "Sarangge Maloa" on the knowledge of Cadres and Mothers in Wawo District, Bima in 2021

Knowledge is the result of someone knowing about an object that is obtained from sensing and hearing from the object. Knowledge is a very important domain in the formation of one's behavior.

The research data can identify that the knowledge of Cadres before being given training about prevention vs. stunting is 10 people(66.7%) and after the v was given the training rose to 15 people(100%). Likewise, the previous knowledge of mothers was 14 people (46.7%) and after receiving training increased to 28 people (93%). Cadres and mothers, after receiving training on stunting prevention, have changed their knowledge of increasing.

The results of Wilcoxon's analysis show that the significance value of knowledge of cadres and mothers is $p = 0.025$ and $p = 0.000$, respectively. P-value Significance = 0.05. which means that the p-value is smaller than the p significance, so it can be concluded that there is an effect of training on stunting prevention through "Sarangge Maloa" in Wawo District to the knowledge of cadres and mothers. In this study, both cadres and mothers had good knowledge, and it increased after receiving training materials. In theory, Benjamin Blum states that knowledge or cognitive is a very important domain for the formation of one's actions. The material obtained during the training brought increased knowledge for cadres and mothers.

In this study, cadres were trained by health officers in the Wawo Health Center office hall with LCD media and module books, while mothers were trained by cadres who were believed to have the ability to conduct training for mothers in places or facilities very close to the community (mothers), namely " saramgge". The research data showed that the change in the increase in mother's knowledge was greater ($p = 0.000$) than the change in knowledge of the Cadre ($p = 0.025$). This is because it is supported by the facilities used to train mothers, namely Sarangge, where for the local community this nest is a very comfortable gathering place to discuss, unwind and have fun after working all day in the fields or rice fields or other household chores. In this study, the function of the nest was developed to become a learning facility that is very close to the community, so that in this training activity it does not require a gathering place far from the mother's place of residence (PKM hall or Village Hall) which requires additional costs for transportation.

Another problem that is often faced by health workers at PKM Wawo is gathering the community at the same time to provide health counseling or education and the like. as a place for training and/or disseminating information on education and health promotion, mothers do not need a special time to attend the training held, but it is enough for cadres to come to mothers at the time of gathering at the nest to provide training. Cadres are extensions of health workers who are in the midst of society and have promising potential if their knowledge and skills are honed continuously through training activities.

2 factors influence learning outcomes, namely internal factors and external factors, which include internal factors, including physical, psychological, interest and motivation factors while external factors are material, learning media and learning environment/atmosphere where Mulyasa (2003) studies. The atmosphere of the learning place "sarangge maloa" is a very comfortable place to study for mothers so that it allows mothers to focus their thoughts and attention on the material being studied and learning outcomes are maximized. This is supported by research by Saniatu Nisail Jannah et al (2018) which says that learning facilities and infrastructure are factors that influence student learning motivation, which in turn affects student learning outcomes. Another study said that there was a significant influence of facilities and infrastructure on student learning outcomes (R Miski 2017).

Research by Nunuk M (2017) also shows that learning infrastructure has an effect on student practice learning outcomes, 2(1) 103-115, 2017, thereby also supporting the results of this study.

Effect of Training on stunting prevention through "Sarangge Maloa" on the Skills of Cadres and Mothers in Wawo District, Bima in 2021

Skills show certain behavior or changes with the meaning contained in a person's mental activity or brain which is basically an advanced stage of cognitive learning outcomes (understanding something) and affective learning outcomes (Sudijono cit Ludfimayanasari 2004). The results showed that the skills of the cadres before being given training were in a good category as many as 8 people (53.3%) and the skills of the mothers were in a good category as many as 13 people (43.3 %), while after receiving the training the skills of the Cadres were in a good category. increased to 15 people (100%), as well as the skills of mothers, to 27 people (90%). This data shows that both cadres and mothers experienced an increase in skills after being given training on stunting prevention through "sarangge maloa" in Wawo District, Bima Regency. Research conducted by Rose Nurhudhariani et al (2015), concluded that pregnancy exercise training using the demonstration method was able to improve pregnancy exercise skills effectively.

The results of statistical analysis show that the skills of cadres and mothers have p-values of 0.008 and 00.000, respectively, while the p-value of significance is 0.05, this means that the p-value is smaller than the p-value of significance, meaning that there is an effect of training on stunting prevention on skills of cadres and mothers in stunting prevention in Wawo District, Kab. Bima. This is in line with the research of T. Khairul Fadjri (2017) who said that infant and child feeding training (PMBA) had a positive effect on the skills of village midwives in Bireuen Regency. Another research that supports is the study of Matilda E. Laar, et al. (2018), that the reliability of body length

measurements increased after being given training to the nursing community for GMT (Growth, Monitoring and Promotion) in children. that is, there is an increase in the skills of the nursing community after receiving training.

Conclusions

- 1) Before being given training on stunting prevention Cadres and mothers had good knowledge of 10 people (66.7%) each and 14 mothers (46.7%).
- 2) After being given training on stunting prevention, most of the cadres and mothers increased their knowledge which was in the good category, namely 15 people each (100%) and 28 mothers (93.3%).
- 3) Before being given training on stunting prevention Cadres and mothers had good skills, namely 8 people each (53.5%) and mothers 13 people (43.3%).
- 4) After being given training on stunting prevention, most of the cadres and mothers improved their skills which were in the good category, namely 15 people (100%) each and 27 mothers (90%).
- 5) There is an effect of training on stunting prevention on the knowledge and skills of mothers and cadres of Sarangge Maloa in Wawo District, Kab. Bima

Suggestions

- 1) It is necessary to carry out continuous training for cadres, not only on stunting prevention but also on early stunting detection and stunting child care at home.
- 2) There is a need for continuous enlightenment to mothers and other communities, both by cadres and health workers, regarding stunting prevention
- 3) It needs attention from Health Officers and community leaders to develop the function of the nest as a learning facility or a place to receive health information, especially regarding stunting prevention, so that stunting cases in Wawo District can be prevented and overcome.

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