

# Introduction

## 1.1 Background

Stunting is still one of the problems of malnutrition in the world. Following the first 1000 days of life, stunting or other chronically unfavorable circumstances are defined by below-average height according to age (UNICEF, 2013; WHO, 2016). The first 1000 days of life are a golden age for a toddler's brain development, supporting the toddler's growth process perfectly (Archadi, 2014). Nutritional issues that arise during the golden age are undesirable since the long-term damage could not be reversed when there is no intervention. According to World Health Organization (WHO) guidelines, stunting conditions may be recognized based on height-for-age, with the requirements being when the z-score of height for age is  $<-2$  standard deviations (WHO, 2018). In 2017, there were around 150.8 million toddler under five years who were stunted globally, and by 2018, that number had dropped to 21.9%. (WHO, 2018). Based on the Riset Kesehatan Dasar (2013), the prevalence of stunting in toddler in Indonesia was 37.2%. These conditions indicate that the incidence of stunting in Indonesia in 2013 was included in the category of high prevalence public health problems. Stunting prevalence in DKI Jakarta Province was over 20% in 2013, approximately 27.5%. According to the Pemantauan Status Gizi findings from 2015 and 2016, Stunting exceeds the WHO cutoff of 20%, making it a global nutritional issue with the prevalence of stunting in toddler was 23.1% and 20.1% in DKI Jakarta, with East Jakarta (21.1%), West Jakarta (21.6%), and North Jakarta (23.2%). The Ministry of Health's Indonesian Nutrition Status Survey showed that in 2022, the prevalence of stunting raised to 21.6% and decreased to 17.8% in 2023 (Pusat Data Ekonomi dan Bisnis Indonesia, 2023).

The WHO framework on stunting describes stunting into three parts, namely context, causes and consequences. The context in the framework was a community factor consisting of economic factors, health services, education, socio-culture, food and agriculture systems, as well as environment and sanitation (Semba *et al.*, 2008). The causes in the framework consist of several factors, namely internal and external factors. Various factors, including those related to the mother's health and those that are parental and household-related, might have an impact on stunting. Throughout the first 1000 days, the chance of stunting is directly impacted by the condition of the pregnant women (Zubaeda *et al.*, 2020). Pregnancy difficulties for women with hypertension can raise the risk of low birth weight and premature

delivery. Adolescent pregnancy causes a mother's supplies of nutrients to be depleted since the woman is still developing and the fetus is competing for the same resources. Insufficient nourishment, less opportunities for play and learning, and caregiver neglect or absence all have an impact on a toddler's ability to grow and develop. Household poverty often means that a toddler does not get enough to eat or the right types of food (Gassara & Chen, 2021 ; Keeley *et al.*, 2019).

The other factor is poor complementary feeding, beginning around age six months, a toddler's need more food and energy are required than can be supplied by breast milk alone, the solution is to combine both breastfeeding and complementary feeding, for example cooked cereals and other staples, mashed fruits and vegetables, pulses, milk products and eggs, fish and meat. Many toddlers end up with low-quality diets if there is limited access to a variety of food or if high quality meals are too expensive, such as when toddlers consume little to no foods from animal sources such as milk products, eggs, and meat (WHO, 2018). Feeding rarely, supplying foods that are too diluted, giving out insufficient amounts of food, and non-responsive feeding are some insufficient feeding practices. Inactive feeding practices and interaction with the toddler by the caregiver or mother in ways that decrease in both nourishment and nurturing. In household, where both mother and father work outside of the home having to rely on neighbors or other family members could maximize toddler access to unhealthy food and drink that has harmful chemical or mycotoxins in it (non-hygiene), or other environmental contaminants which can lead to stunting (Menteri Pekerjaan Umum dan Perumahan Rakyat, 2011). By implementing family hygiene practices like hand-washing with soap and hygiene water, the risk of infections like diarrhea, which impede the toddlers from growing healthily, is decreased. Foods can make a toddler ill and hinder their growth if they are kept out in the open, in dirty containers, or at temperatures where bacteria can grow.

The improvement of mothers' and toddler's nutritional and health conditions, including stunting, is one of the goals. The community must be made aware of the significance of nutrition for expectant mothers and toddler in order to combat stunting. The First 1000 Days of Life initiative in Indonesia demonstrates the importance of minimizing stunting in that nation. Applying information, attitudes, behaviors, and self-efficacy that can support the prevention of stunting is therefore essential (WHO, 2018).

Several program have been implemented in Indonesia especially in Jember Regency and Banten about education improvement both young adults and pregnant womens about nutrition-parenting with different methodology, in the Jember Regency using an online interactive session while in the Banten was conducted with two sessions (offline and online sessions) but both determine the same output of an increase in participants' understanding and successful in educating mothers about stunting (Lutfi *et al.*, 2022 ; Siregar, 2022). Furthermore, by having hands-on experience in this community development believe to improve the knowledge of preparing a healthy meals and preparation of complementary feeding recipes for toddlers, pregnant womens will get an overview of correct knowledge about nutrition so that it is fulfilled as the practice is closely related to the learning method using the module of the Nutrition-Parenting-Education program which leads pregnant womens who are well-informed or educated to believe they will meet the objective in order to prevent in early for stunting.

## **1.2 Aim of The Program**

The aims of this community development program are as follows:

- To improve the knowledge through Nutrition-Parenting-Education program regarding stunting prevention and preparation in practical complementary feeding for pregnant women in DKI Jakarta
- To sharpen an overview about the important of macro- and micro-nutrient needs for pregnant women during preparation for toddler growth and development in prevention stunting
- To develop “Complementary Feeding Recipe Competition” for toddler in relation sharpen pregnancy women’s knowledge, attitude, practice (KAP), and self-efficacy towards stunting prevention

## **1.3 Scope of The Program**

The scope of the community development program is expected to give benefits to community as follows:

- Develop the first 1000 days of life module to the community about the importance of giving early prevention of stunting to improve pregnant women's perspective before and after towards healthy lifestyle
- Conduct online webinar about Nutrition-Parenting-Education program in order to assist ensure a good start to life, pregnant women should be educated about and supported in making appropriate dietary choices
- Provide the first 1000 days of life module for self-education preparation about nutrition during pregnancy until the the baby reached 2 years of age