

RINGKASAN

Stunting di Desa Sokawera, Kecamatan Cilongok, merupakan masalah serius dengan prevalensi tertinggi. Pada 2018, angka *stunting* mencapai 30,8 persen. Data tahun 2024 menunjukkan dari 679 balita, 48 persen terindikasi mengalami *stunting*. Sementara, pada 2022 terdapat 326 anak yang mengalami *stunting*, dan meningkat menjadi 388 anak atau sekitar 84 persen pada 2023. Meski SKI 2023 mencatat prevalensi nasional sebesar 20,9 persen, kasus di Desa Sokawera tetap tinggi. Target pemerintah untuk menurunkan *stunting* menjadi 14 persen pada 2024 belum tercapai, sehingga diperlukan upaya yang lebih terpadu. *Stunting* disebabkan oleh rendahnya pengetahuan ibu tentang gizi, kekurangan gizi kronis sejak masa kehamilan, infeksi berulang, serta rendahnya ekonomi dan pendidikan. Kehamilan usia remaja dan jarak kelahiran yang terlalu dekat turut meningkatkan risiko. Di Desa Sokawera, pernikahan dini menjadi faktor utama, dengan 69 pasangan menikah di bawah usia 18 tahun (BPS 2018-2024) dan 47 kasus dispensasi nikah pada 2022. Minimnya kesiapan fisik dan pengetahuan gizi pada ibu mudah berdampak pada kelahiran anak dengan kondisi seperti BBLR, prematur, dan pertumbuhan terhambat.

Penelitian ini menggunakan metode deskriptif kualitatif dengan pendekatan teori interaksi simbolik. Pengumpulan data dalam penelitian ini dilaksanakan melalui observasi, wawancara, dan dokumentasi. Informan penelitian ditetapkan secara purposif, yaitu pasangan usia subur (PUS), yang memiliki pemahaman serta pengalaman terkait dengan pengetahuan tentang *stunting* di Desa Sokawera, Kecamatan Cilongok. Untuk memastikan keabsahan atau validasi data, menggunakan teknik triangulasi sumber. Pendekatan interaksi simbolik digunakan untuk memahami bagaimana makna tentang *stunting* di konstruksi kemudian ditafsirkan serta dimaknai oleh PUS melalui proses interaksi antara individu maupun kelompok sosial yang mereka bangun baik bersama tenaga kesehatan, kader posyandu, maupun antar masyarakat dalam lingkungan sosialnya. Namun proses ini tidak di bangun serta merta akan tetapi melalui sosialisasi dan edukasi.

Melalui program Rumah Sigap sebagai model inovatif hasil kolaborasi antara pemerintah pusat dan daerah, upaya peningkatan pengetahuan dan kualitas pengasuhan anak terus digencarkan. Program ini dinilai berhasil secara administratif karena melibatkan berbagai pihak dari kementerian seperti Kementerian Kesehatan, BKKBN, hingga BRIN serta dukungan pemerintah daerah hingga tingkat desa yang menandatangani perjanjian kerja sama untuk mencegah *stunting*. Namun, efektivitas pelaksanaan program ini masih terkendala oleh masalah tata kelola, kurangnya koordinasi antar tim pelaksana, serta pemanfaatan anggaran yang belum optimal. Meskipun begitu, pemerintah tetap menunjukkan inisiatif positif dengan membentuk tim pencegahan *stunting*, termasuk bidan desa, kader kesehatan, dan kader posyandu yang aktif mensosialisasikan program.

SUMMARY

Stunting in Sokawera Village, Cilongok District, is a serious problem with the highest prevalence. In 2018, the *stunting* rate reached 30.8 percent. Data from 2024 showed that out of 679 toddlers, 48 percent were indicated as stunted. Meanwhile, in 2022, there were 326 children with *stunting*, increasing to 388 children, or around 84 percent, in 2023. Although the 2023 SKI recorded a national prevalence of 20.9 percent, cases in *Sokawera* Village remain high. The government's target of reducing *stunting* to 14 percent by 2024 has not been achieved, necessitating more integrated efforts. *Stunting* is caused by mothers' low nutritional knowledge, chronic malnutrition during pregnancy, recurrent infections, and low economic and educational levels. Teenage pregnancy and closely spaced births also increase the risk. In *Sokawera* Village, early marriage is a major factor, with 69 couples marrying under the age of 18 (BPS 2018–2024) and 47 cases of marriage dispensation in 2022. Lack of physical readiness and nutritional knowledge among mothers can easily impact the birth of children with conditions such as low birth weight (LBW), prematurity, and stunted growth.

This study employed a qualitative descriptive method with a symbolic interaction theory approach. Data collection in this study was conducted through observation, interviews, and documentation. Research informants were determined purposively, namely fertile-age couples (PUS), who have understanding and experience related to knowledge about *stunting* in *Sokawera Village*, Cilongok District. To ensure the validity or validation of the data, a source triangulation technique was used. The symbolic interaction approach was used to understand how the meaning of *stunting* is constructed and then interpreted and interpreted by the PUS through the process of interaction between individuals and social groups that they build, including with health workers, Posyandu cadres, and between communities in their social environment. However, this process is not built immediately but through socialization and education.

Through the *Rumah Sigap program*, an innovative model resulting from collaboration between the central and regional governments, efforts to improve knowledge and quality of childcare continue to be intensified. This program is considered administratively successful because it involves various parties from ministries such as the Ministry of Health, the National Population and Family Planning Board (BKKBN), and the National Agency for Research and Innovation (BRIN), as well as support from local governments down to the village level, which have signed cooperation agreements to prevent *stunting*. However, the effectiveness of this program's implementation remains hampered by governance issues, lack of coordination between implementation teams, and suboptimal budget utilization. Despite this, the government continues to demonstrate positive initiatives by establishing a *stunting* prevention team, including village midwives, health cadres, and integrated health post integrated health post cadres who actively socialize the program.