

## ABSTRAK

**Latar belakang:** *Stunting* pada balita masih menjadi permasalahan yang belum dapat teratasi dengan baik. *Stunting* diartikan sebagai kegagalan pertumbuhan yang diakibatkan karena kekurangan nutrisi yang terjadi terhitung dari usia dimulainya kehamilan sampai usia 24 bulan kehamilan. *Stunting* dapat menyebabkan ketidakefektifan perkembangan secara verbal, kognitif, motorik serta peningkatan resiko penyakit degeneratif, kematian dan kesakitan. Sementara itu, terdapat periode kritis dalam perkembangan maupun pertumbuhan anak yang dipengaruhi oleh status gizi ibu terhitung dari saat persiapan kehamilan, hamil sampai dengan saat menyusui.

**Tujuan:** Penelitian ini mendesiminasikan peran pemerintah desa dan bidan desa puskesmas dalam menurunkan malnutrisi dan mencegah stunting.

**Metode:** Penelitian yang digunakan yaitu penelitian studi kasus. Informasi didapat dari telaah dokumen dan wawancara mendalam.

**Hasil:** Kepala desa selaku *Top Decision Maker* melakukan pembentukan program melalui pendekatan sosial kultural dan social capital melalui pendekatan partisipatif dan teknokratis. Pada pendekatan teknokrasi tidak dapat diimplementasikan sepenuhnya karena tidak adanya kolaborasi pelaksanaan program bersama dinas terkait. Selain itu, pemerintah Desa memberikan perlengkapan sarana dan prasarana posyandu. Dalam pengalokasian anggaran belum sepenuhnya berjalan dengan baik, masih terdapat beberapa hal yang dilakukan melalui proses iuran dalam membantu ibu hamil yang melakukan USG dan operasi bayi. Kader Pemberdayaan Masyarakat (KPM) sebagai *Middle Manager* jaringan organisasi Desa menjalankan fungsinya dengan baik. Tim gizi Puskesmas, dokter umum, dan babinkamtibmas sebagai *Supporting unit* memberikan peran baik dalam pelaksanaan kegiatan posyandu. Bidan Desa dan Kader Dusun selaku sebagai *Operating Core* sudah melaksanakan peran dengan baik. Tetapi peran KPM dan kader masih bersifat gotong royong biasa. Kepala desa belum memandang kader dusun sebagai bagian dari jaringan pemerintah desa.

**Kesimpulan:** Pelaksanaan program stunting di Desa Tanjung masih terdapat beberapa hal yang belum dijalankan seperti pengalokasian anggaran dalam membantu masyarakat miskin dan tidak meratanya pelatihan kader.

**Kata Kunci:** *Pemerintah desa, bidan desa, stunting, malnutrisi*

## ABSTRACT

**Background:** *Stunting* in toddlers is still a problem that cannot be resolved properly. *Stunting* is defined as growth failure caused by nutritional deficiencies that occur from the start of pregnancy until the age of 24 months of gestation. *Stunting* can cause non-optimal development of verbal, cognitive, motoric and increase the risk of degenerative diseases, death and illness. Meanwhile, there is a critical period in the development and growth of children which is influenced by the nutritional status of the mother, starting from the time of preparation for pregnancy, pregnancy to breastfeeding.

**Objective:** This study disseminates the role of village government and village midwives at puskesmas in reducing malnutrition and preventing stunting.

**Methods:** The research used is case study research. Information was obtained from document review and in-depth interviews.

**Result:** The village head as the *Top Decision Maker* conducts program formation through a socio-cultural approach and social capital through a participatory and technocratic approach. The tenocracy approach cannot be fully implemented because there is no collaboration in implementing the program with the relevant agencies. In addition, the village government provides posyandu facilities and infrastructure. In terms of budget allocation, the budget has not yet been fully implemented, there are still several things that can be done through the contribution process in helping pregnant women who perform ultrasound and baby surgery. The Community Empowerment Cadre (KPM) as *Middle Manager* of the Village organization network carries out its functions well. The nutrition team at the Puskesmas, general practitioners, and Babinkamtibmas as *Supporting Units* play a good role in the implementation of Posyandu activities. The Village Midwife and Dusun Cadre as the *Operating Core* have carried out their roles well. But the role of KPM and cadres is still the usual mutual cooperation. The village head does not view the hamlet cadres as part of the village government network.

**Conclusion:** In the implementation of the stunting program in Tanjung Village, there are still several things that have not been implemented, such as budget allocation to help the poor and unequal cadre training.

**Keywords:** *Village government, village midwife, stunting, malnutrition*