

Journal of Government & Civil Society

Journal of Government
and Civil Society

Volume 9

No. 1

Pages 1 - 193

April 2025

ISSN 2579-4396



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Journal of Government & Civil Society

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The Role of Religious Figures in Supporting the Acceleration of Stunting Reduction in East Nusa Tenggara

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Submitted:

22 Sept 2024

Revised:

14 March 2025

Accepted:

29 April 2025

Abstract

This study aims to determine the role of religious leaders in supporting the acceleration of stunting reduction in East Nusa Tenggara. The study was conducted using a qualitative descriptive approach with informants: 10 religious leaders who were determined by Purposive Sampling using one of the inclusion criteria, namely from religious groups with the largest number of people in Indonesia and NTT Province, namely Islam, Protestantism, and Catholicism and 10 mothers of stunted toddlers and are receiving intervention programs from the Kupang Regency government. Data were collected by means of in-depth interviews, then comments or statements from informants were recorded by the prepared tool. Furthermore, the data were analyzed in four stages, namely data collection, data reduction, data presentation, and drawing conclusions. The results of the study showed that in general the perspective of religious leaders was very good that stunting was a problem of chronic malnutrition that had an impact on the quality of human resources. The form of support from religious leaders was to involve the government in efforts to change the pattern of nutrition and public health through nutrition advocacy activities, public health nutrition governance, and ensuring the involvement of the religious sector in health. Conclusion: religious leaders can be partners with the government in accelerating stunting reduction in NTT Province.

Keywords: Religious figures, dry land and islands, acceleration of stunting reduction, nutrition advocacy, public health governance, religious involvement in health

Abstrak

Penelitian ini bertujuan untuk mengetahui peran tokoh agama dalam mendukung percepatan penurunan stunting di Nusa Tenggara Timur. Penelitian dilakukan dengan pendekatan deskriptif kualitatif bersama informan : 10 orang tokoh agama yang ditentukan secara Purposive Sampling menggunakan salah satu kriteria inklusi yaitu berasal dari kelompok agama dengan jumlah jiwa terbanyak di Indonesia dan Propinsi NTT yaitu islam, protestan, dan katolik dan 10 orang ibu balita stunting dan sedang mendapat program intervensi dari pemerintah Kabupaten Kupang. Data dikumpulkan dengan cara wawancara mendalam atau Indepth interview, kemudian komentar atau pernyataan dari informan direkam oleh alat yang disiapkan. Selanjutnya data dianalisis dengan empat tahap, yaitu pengumpulan data, reduksi data, penyajian data, dan penarikan kesimpulan. Hasil penelitian menunjukkan bahwa secara umum prespektif tokoh agama sangat baik bahwa stunting merupakan masalah kekurangan gizi kronik yang berdampak pada kualitas sumberdaya manusia. Bentuk dukungan tokoh

CITATION Picauly, I. et al., (2025). The Role of Religious Figures in Supporting the Acceleration of Stunting Reduction in East Nusa Tenggara. *Journal of Government and Civil Society*, 9(1), 153-171.



agama adalah melibatkan pemerintah dalam upaya perubahan pola asuh gizi dan kesehatan masyarakat melalui kegiatan advokasi gizi, tata kelola gizi kesehatan masyarakat, dan menjamin keterlibatan sektor agama dalam kesehatan. Kesimpulan : tokoh agama dapat menjadi mitra pemerintah dalam percepatan penurunan stunting di Propinsi NTT.

Kata Kunci: Tokoh agama, lahan kering dan kepulauan, percepatan penurunan stunting, advokasi gizi, tata kelola kesehatan masyarakat, keterlibatan agama dalam kesehatan

INTRODUCTION

East Nusa Tenggara (NTT) Province is an archipelagic province with a total of 1,192 islands. The Central Statistics Agency (BPS Provinsi Nusa Tenggara Timur, 2023) explains that the NTT province has temperatures between 27-28 0C. Meanwhile, the rainy season is very limited with average rainfall between 600-4800 mm³. This condition is very burdensome for farmers with horticulture and secondary crops farming businesses so that it affects household food security which ultimately results in a number of malnutrition problems.

Kupang Regency is a district that has an administrative area covering three (3) islands, namely Semau, Timor and Kera, with 24 sub-districts and 177 villages. (BPS Kabupaten Kupang, 2022). More than half (53.32%) of the population in Kupang Regency work in the agricultural sector and as many as 22% still live below the poverty line. If this is related to weather conditions with a very limited rainy season, then of course there will be a chance of experiencing crop failure due to lack of water sources. Therefore, Kupang Regency is known as an island dry land area that has a fairly high chance of food insecurity with various nutritional and health problems. This is characterized by several infectious infectious diseases which often become seasonal diseases and are Extraordinary Events (KLB). However, as time changes and the development of science and technology, the prevalence of infectious disease health problems can be reduced. But on the other hand, new problems have emerged, namely the problem of malnutrition, especially the problem of stunting and non-communicable diseases such as diabetes mellitus, obesity, hypertension and cardiovascular disease. (Picauly et al., 2022a).

Indonesian Health Survey Results (Asiva Noor Rachmayani, 2015; Kemenkes RI, 2023; Kementrian Kesehatan RI, 2023) shows that NTT Province contributes to a stunting prevalence rate in 2023 that is higher than the national prevalence, namely 37.7%. In particular, Kupang Regency is known to have a stunting prevalence that far exceeds the provincial and national prevalence, namely 40.5%. Research result (Dinas Kesehatan Nusa Tenggara Timur, 2019; Kementerian PPN/ Bappenas, 2018; P2PTM Kemenkes RI, 2018; Picauly, 2021; Picauly et al., 2023; Putri & Rahardjo, 2021; Setiyabudi, 2019; Tim Indonesiabaik.id, 2019) explained that the problem of stunting and other nutritional problems (wasting and underweight)

can be influenced by many things. So, countermeasures must involve many sectors. The central and regional governments have made various efforts to overcome this problem. However, the trend of decreasing prevalence is still moving very slowly. This is thought to be a result of low cross-sectoral cooperation (convergence), low level of understanding among various parties such as regional beautification and the community regarding the problem of stunting and other nutritional problems (Picauly et al., 2023).

Research result (Picauly et al., 2022b) explained that religious leaders are parties who can play a direct role in the process of preventing and overcoming various problems of deficiency and excess nutrition. This means that the contribution of religious figures in preventing stunting and other nutritional problems is very important. Religious figures have credibility with their community. Communication skills, persuasion power, and the ability to raise awareness of individual health and nutrition through exposure to religious texts can make people aware of the importance of changing healthy lifestyles. (Brooks et al., 2019; Intje Picauly, 2023; Janes & Corbett, 2009). Therefore, religious figures can be very effective agents of behavior or change.

Wide coverage and active activities of religious figures in mobilizing their followers to adopt and disseminate religious narratives containing messages, values and social norms that can provide information about stunting and how to prevent it. On the other hand, it is important to recognize that religious authorities played an important role in mobilizing and supporting the civil rights struggle (Brooks et al., 2019). Religious leaders must be able to show that religion and belief can be a positive inspiration for promoting equality and human rights. However, until now there have not been many studies regarding the perceptions, perspectives and support of religious figures regarding nutrition and its problems and there is a lack of publications. Therefore, this research was conducted with the aim of knowing the perspectives and support of religious leaders in supporting the acceleration of overcoming nutritional problems (Stunting) in Kupang Regency, East Nusa Tenggara Province, Indonesia.

METHOD

1. Research Design

This research is a type of qualitative descriptive research with the aim of understanding phenomena in the order of people's lives and their natural context (the real world, not the laboratory) and trying not to manipulate the phenomena observed over four (4) months, namely May - August 2024 in the Kupang Regency area, District West Kupang, NTT Province. This research involves religious leaders and mothers of toddlers as informants to collect a number of information about the phenomenon of stunting in the dry land areas of the islands by collecting information related to the level of understanding/perspective of religious leaders regarding stunting, support for policies/programs related to stunting, budget support for financing stunting programs, program support related to accompanying prospective brides

and grooms (CATIN), and support for cross-sector cooperation as well as data on the role of religious figures.

2. Informants

The key informants used in this study came from religious leaders and mothers of stunted toddlers in the West Kupang District, Kupang Regency, NTT Province. The main requirement for key informants for religious leaders is that they come from religious groups with the largest number of followers/congregations/congregations in Indonesia and are representative in NTT Province, and the main requirement for mothers of stunted toddlers is that they are currently receiving intervention programs from the local government. Furthermore, key informants were selected using the purposive sampling method with the following inclusion and exclusion criteria (Bhisma Murti, 2022; Murti, 2021b) :

a. Inclusion Criteria

- 1). Inclusion Criteria for religious figures: Responsible as coordinator of five (5) religious groups; In good health; Have been exposed to information related to stunting, and are ready to be informants.
- 2) Inclusion Criteria for mothers of stunted toddlers: Responsible for managing children's diet; Responsible for managing children's PHBS; Routinely visiting integrated health posts to monitor children's health and nutrition; In good health; Have been exposed to information related to stunting, and are ready to be informants.

b. Exclusion Criteria

- 1) Inclusion Criteria for Religious Figures: Responsible as coordinator of communities other than Islam, Protestantism, and Catholicism; Not in good health; Not exposed to information related to stunting, and Not ready to be an informant.
- 2) Inclusion Criteria for Mothers of stunted toddlers: Not responsible for regulating the child's diet; Not responsible for managing the child's PHBS; Not routinely visiting the health center to monitor the child's health and nutrition; Not in good health; Not receiving information related to stunting and Not willing to be a resource person.

3. Operational Definition

- a) Role of Religious Figures: Religious leaders play an active role in planning and monitoring (evaluation and monitoring) programs related to stunting
- b) Level of Understanding about Stunting: Religious figures really understand about stunting, and provide more positive responses regarding statements of attitudes and perspectives regarding accelerating stunting reduction.
- c) Program support related to stunting: Every religious figure in their service area has a stunting prevention program and has implemented it well

- d) Budget Support for Stunting Program Implementation: All planned programs are fully supported with the appropriate budget amount.
- e) Support for the National program on Mentoring “CATIN”: Religious leaders plan and oversee the implementation of the CATIN (Prospective Bride) mentoring program
- f) Cross-sector Collaboration Support: Religious leaders in implementing service programs together across related sectors (government and non-government).

4. Instrument

This research data consists of primary data and secondary data. Primary data was obtained from the results of discussions using focus group discussion (FGD) and in-depth interviews (IDI) methods using FGD/IDI guidelines and key discussions with informant figures.

5. Data Analysis

Generally, data analysis is carried out in four stages, namely data collection, data reduction, data presentation, and drawing conclusions. The first step in carrying out the analysis is to carry out data reduction or data compression by providing a “Coding/Code” code to facilitate data processing and analysis. (Murti, 2021a). The coded data is in the form of sentences or paragraphs containing statements from informants regarding the level of understanding/perspective of religious leaders regarding stunting, support for policies/programs related to stunting, budget support for financing stunting programs, support for national programs related to CATIN assistance, and support for cross-sector collaboration as well as data the role of religious figures.

Code generation is divided into two cycles. The first cycle performs raw data reduction, while the second cycle is code creation of the code from the first cycle. In this study, the affective coding method was used with three coding stages, including in vivo codes: emotions, values and evaluation. Emotion Code to describe the perspective of religious figures and mothers of toddlers regarding stunting and its impacts, support for policies/programs related to stunting, budget support for financing stunting programs, support for national programs related to mentoring prospective companions, and support for cross-sector collaboration as well as data on the role of religious leaders themselves. Value Code to describe informants' attitudes about stunting and efforts to overcome it. As well as an Evaluation Code to assess efforts to accelerate stunting reduction by the informant himself.

The analysis stage involves creating a temporary code for information from respondents and then comparing it with literature information and so on. Researchers are obliged to pay attention to the relevance of the material or substance being studied. If it is too far from the topic, the researcher is obliged to revise the code until they find patterns of similarity in the data, such as: similarities in the themes or ideas being researched, cause and effect

relationships regarding stunting incidents, interpersonal relationships, and theoretical support. Next, the patterns that have been identified are continued in mapping visual causal relationships such as concept maps, causal models, and mid maps (Brooks et al., 2019).

6. Research Ethics

This research has gone through a due diligence process by the Health Research Ethics Commission, Faculty of Public Health, Nusa Cendana University with number Ethics Review Decision Letter : 001271/KEPK FKM UNDANA/2024 dated June 22, 2024.

RESULTS

Religious figures are figures who play a very important role in making the life decisions of every congregation within the scope of their service (Farmer, 2004; Janes & Corbett, 2009). The results of Focus Group Discussion (FGD) and In-depth Interview (IDI) activities show that the majority of religious leaders and mothers of toddlers already understand about stunting. The following are the results of mapping informant codes regarding the perspectives and support of religious leaders in accelerating the response to the problem of malnutrition in dry land and island areas :

Number	Assessment Material/Substance	Informant's explanation	Informant Position	Code
1	The level of understanding of religious leaders and mothers of toddlers about stunting, and positive responses regarding statements of attitudes and perspectives regarding accelerating stunting reduction	<p>2.1. Stunting is a child who is malnourished.</p> <p>2.2. Stunting is a child who suffers from malnutrition for a long time. This is because all this time the child has been eating insufficient nutrition, making him unhealthy.</p> <p>2.3. Stunting is actually a child's abilities that are not age appropriate. This means that the physical condition is not appropriate for age. In terms of posture he is a dwarf, but not a genetic dwarf.</p> <p>2.4. Stunting is a child who suffers from malnutrition for a long time. This is because all this time the child has been eating insufficient nutrition, making him unhealthy.</p>	<p>2.1. Islamic Religious Figures</p> <p>2.2. Christian Religious Figures</p> <p>2.3. Catholic Religious Figures</p> <p>2.4. Mother of a child under five years old</p>	Level of Understanding of Stunting

2	Substance formation process number: 1	<p>2.1. It's been a long time from 2022 to now. I once heard directly from my mother when I was a speaker in an outreach regarding our role as religious leaders in supporting the government to tackle stunting. Apart from that, we are often given counseling and examinations by health workers and several times from students when carrying out activities in our service area.</p> <p>2.2. I have just served as an ustad here so I only know a little. So far, I have only been called to take part in counseling about stunting once. However, what I remember seems to be that in our service area there were no malnourished children. But every time there is a sacrificial holiday, the mosque always donates several kilograms (± 10 kg) of meat to the community health center to be cooked and distributed to malnourished children.</p> <p>2.3. I only found out since there was counseling at school from the community health center. At the church there was counseling from the Nusa Cendana University campus.</p>	<p>2.1. Christian Religious Figures and Mothers of Toddlers</p> <p>2.2. Islamic Religious Figures</p> <p>2.3. Catholic Religious Figures</p>	The process of establishing a level of understanding about stunting
3	History of Interfaith Engagement	<p>Has there ever been a stunting service in the church: Never in the form of providing nutritious food, because we don't have a budget for that. However, during this time we have been involved several times, such as:</p> <p>From the economic commission: there was a meeting to improve the people's economy. We have a program to make</p>	All Religious Figures	History of involvement of religious figures in tackling stunting

herbal medicine from live pharmacies. From turmeric, ginger, ginger, we distributed it before Covid and after Covid stopped. Created by WKRI and Klasis. Ingredients are purchased and made into flour, then packaged and then sold.

From the Kerawam (Lay Apostolate) and Classis commissions there is guidance for pre-marital couples: guidance by the priest/minister himself in the church. There is material on family economics, reproduction, reproductive health and church law regarding marriage.

From the youth commission: from the parish and class centers there are programs. Once a year. After bringing the choir/group of song leaders, there is catechesis and coaching. Currently there is a meeting of OMKs throughout the Kupanga archdiocese or the Kupang city class. Guidance regarding youth, of course, includes preparation for marriage.

From a politician (Melki Laka Lena) once came to bring material about health and stunting in Kupang Regency

From traditional leaders: Supporting socialization during traditional meetings or family gatherings during celebrations of sorrow or joy. Apart from that, he once talked about building good relationships with native people so they could get land to cultivate.

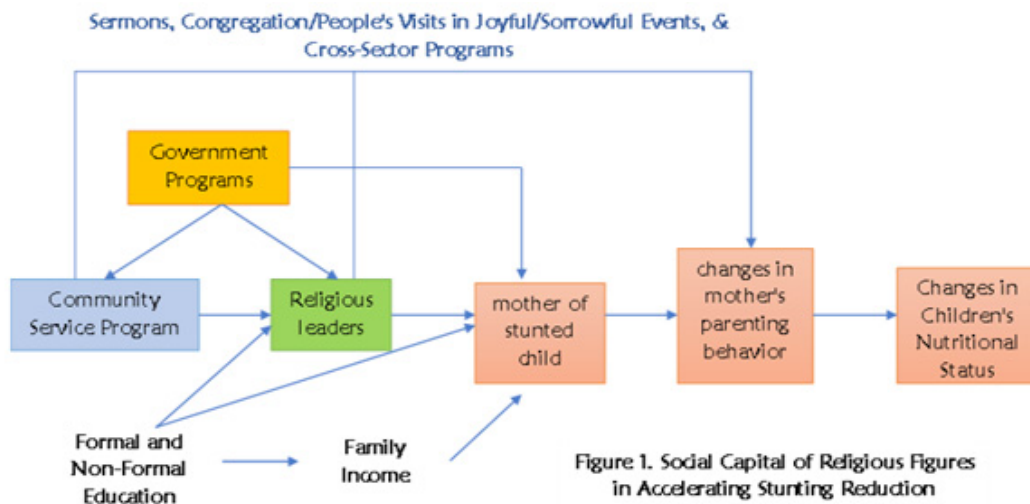
Local Government: Visit churches and mosques for

		<p>outreach about stunting. A few years ago before covid. Community health center program to go to churches and schools.</p> <p>From the university: Faculty of Public Health, Nusa Cendana University also provides outreach about stunting.</p>		
4	<p>Religious leaders play an active role in planning and monitoring (evaluation and monitoring) programs related to stunting</p>	<p>We as pastors, even though we already understand about stunting, cannot do much without the support of the congregation. Because we are a teamwork. So far, we have raised more programs towards behavior change programs. For several reasons: 1. Many family mothers have low levels of formal and non-formal education; 2. There is no budget focused on short-term countermeasures such as providing nutritious food for children or pregnant women who are malnourished.</p> <p>Because we don't have a special program for stunting prevention, we never carry out evaluation and monitoring. However, we know that among our congregation there are people who suffer from malnutrition from information from health centers and posyandu. Where, among our congregation there are those who work as health workers or posyandu cadres.</p> <p>We know from the posyandu or community health center that there are no stunted children. However, the mosque does not have a special program. But we are open to collaboration with cross-sectors who can offer activities with us. Like :</p> <ol style="list-style-type: none"> 1. Health education from the government through Posyandu. This means that the posyandu records the names of babies and children who are 	<p>Christian and Catholic Religious Figures</p> <p>Islamic Religious Figures</p>	<p>The role or support of religious figures regarding stunting</p>

		malnourished and who are in normal health. So yesterday there was a donation of 20 packs/kg of meat from the mosque to the puskesmas. Later it will be distributed to children who experience malnutrition.		
		2. Other program support from RT/RW: jointly monitoring the posyandu in the Bougenvil Posyandu area 6. because there is a government program there, namely PMT or MP-ASI to be distributed to residents who are malnourished. Mosques focus more on religion so they convey messages through da'wah materials but we don't dare to do too much because that's not our field.		
		3. Support for other health-related activities such as mass circumcision. Mass circumcision is not only for Muslims, non-Muslims are also accepted. There have also been free health checks at mosques such as blood pressure, cholesterol, uric acid and blood sugar.		
5	All planned programs are fully supported with appropriate budget amounts.	We do not have a budget or budget support to overcome the stunting problem. Even if there is, it is from the relevant agencies (Health, Social, BKKBN, etc.)	All Religious Figures	Budget Support for Stunting Program Implementation
6	Religious leaders plan and oversee the implementation of the CATIN (Prospective Bride) mentoring program	Yes, we started several years ago with BKKBN and health	All Religious Figures	Support for the National Mentoring program "CATIN"
7	Religious figures in implementing service programs together across related sectors (government and non-government)	Yes, we started several years ago with BKKBN and health. However, according to members of our congregation, there were those who received direct cash assistance from the	All Religious Figures	Support for cross-sector collaboration

Social Service, also in the form of Rp. 600,000 per child, cooking oil, rice and chicken eggs.
 From the Health Service, such as providing blood supplement tablets and PMT for pregnant women and children who are malnourished.

The results of the interview above can then be mapped according to the causal relationship pattern (causal model) as follows:



The results of this research illustrate that every religious figure already knows about stunting, but not much can be done because of limited budget support. Most of the support provided by religious figures is behavior change support provided through sermons in congregations and appeals from congregational pastors. This is very important to do because of the limited level of formal and non-formal education of mothers of children under five, which limits efforts to overcome stunting and other nutritional and health problems. However, so far all religious figures are open to collaborating with other agencies such as the BKKBN, Health Service, Social Service and Universities.

DISCUSSION

The concept of role comes from the basic word "role". Roles have meaning, namely a number of behaviors possessed by people in positions (called figures) in society (Ummah, 2019). It was further explained that a role is defined as an action carried out by a person (leader) in an event. This means that the role of religious figures is to create changes in the

behavior or behavior of the community which are interrelated in a particular situation and are related to the progress of changes in the behavior of the community in question. So, in supporting efforts to accelerate stunting reduction, religious leaders have an important role in changing community behavior. Health behavior changes can be done through health promotion. Health promotion can be done individually or widely in the community. Effective health behavior changes need to consider various factors, such as: An environment built with a clean and healthy lifestyle; Social norms to support healthy behavior; Stress levels and environmental safety. Changes in health behavior can achieve optimal body conditions from various aspects, such as physical, mental, and life well-being aspects.

1. Level of Understanding of Stunting

Religion is an important element in society and can influence people's attitudes and actions in various areas, including social rights such as education and health. (Neliwati et al., 2022)(Subqi et al., 2021). This means that in overcoming public health nutritional problems, the role of government collaboration with religious leaders can be assisted. Because, through their service duties, religious figures can combine religious messages with nutrition and health issues in each sermon material at each service pulpit (Islamic, Protestant and Catholic). Therefore, every religious figure must know and understand nutrition and all the problems and impacts on every family.

The research results show that generally religious leaders already know about stunting and other malnutrition problems. Although the level of understanding about stunting between these characters still varies. In general, the level of understanding about stunting from all informant statements can be concluded that :

“Stunting is a problem of malnutrition over a long period of time in children under five years old, which has an impact on the child's height which is not appropriate for age, learning achievement and the child's productivity in the future.” Stunted children have a stunted body posture, but are not genetically stunted.

“Stunting is caused by children consuming non-nutritious food or being malnourished due to the insufficient amount of food eaten and the types not being diverse as well as various other causal factors such as worms and other infectious infections due to not implementing good clean living patterns.”

Religious figures and community leaders who have a good level of understanding can be the key in conveying information to the public, including the issue of stunting, which is not yet understood by many people, including mothers of toddlers in NTT in particular (Nazmudin, 2018; Subqi et al., 2021; Zahrah & Damayanti, 2023). Including, straightening out the understanding or stigma (Culture/Pemali) of the community in certain areas which still prohibits pregnant women from consuming types of animal protein foods such as fish and eggs as well as types of vegetable protein such as nuts. Therefore, religious leaders in all forms of religious belief should be strengthened by increasing the level of understanding about stunting.

2. The Role of Religious Figures Regarding Stunting

Level of understanding of religious figures (Indrayani et al., 2023; Zahrah & Damayanti, 2023) Good ones will really help change the parenting patterns of mothers of toddlers who have low knowledge and educational backgrounds along with poor parenting patterns. The research results show that the majority of mothers who have stunted toddlers have poor eating and health patterns as a result of low levels of knowledge and formal education. In general, the role of religious figures can be concluded as, among other things, making an agreement with the congregation that:

“Stunting is a nutritional and health problem caused by various factors, including low maternal knowledge, low nutritional intake, recurrent infections, poor clean and healthy lifestyles and limited access to health services and lack of proper sanitation facilities.”.

“Stunting is caused by a community pattern/culture that prohibits certain types of food and prioritizes party needs rather than meeting the family’s nutritional needs and difficult family economic problems (poverty)”.

The results of this study are in line with research (Zahrah & Damayanti, 2023) which shows that the role of religious leaders is to convey knowledge according to the needs of the community, invite and direct the community to do positive things, improve the religious attitudes of the community, monitor the religious conditions of the community, hold religious activities, hold meetings of community leaders, guide and direct the community, provide advice and direction and invite the community to perform congregational prayers and other religious activities.

Religious leaders (Subqi et al., 2021) is obliged to direct Muslim parents to have a strong religious education and maintain adherence to Islamic worship, including the formation of religiosity and the level of openness to the rights of social life. Catholics fall into the category of individuals defined as *“Religious Liberals”* by emphasizing religious principles and receiving a religious education that leads to adherence to religious dogma and promotes equality and tolerance towards others. This result is in accordance with the new narrative put forward by Pope Francis, who opposes judgment against homosexuals because they are also children of God.

Parents’ religion is largely affiliated with a person’s religion and various socio-economic and demographic characteristics such as age, gender, education, placement in society, and political orientation play a fundamental role in shaping an individual’s religious values and attitudes towards the rights of social life. including nutrition and health(Nazmudin, 2018).

Opinion (Neliwati et al., 2022; Subqi et al., 2021) emphasizes that religious figures can play a role in changing congregational behavior through various aspects of life. This research also shows that several roles of religious figures in inserting messages of healthy, nutritious living can change poor parenting patterns of mothers of toddlers, including nutritional parenting

patterns and the health of children and their families. This means that by increasing the knowledge or understanding of religious leaders about stunting, they can influence the process of accelerating the reduction of stunting in accordance with their respective roles with the congregation or community within the scope of their services.

3. Forms of Support from Religious Figures

The role of religious figures in carrying out individual rights and obligations according to their position means that, if religious figures carry out their rights and obligations in line with their position, it means that religious figures carry out their role as leaders of religious communities/religious figures (Zahrah & Damayanti, 2023) (Nazmudin, 2018). Religious figures can play a role in regulating the behavior and actions of each individual. Relevant individuals are able to adapt their behavior to that of their group (Nazmudin, 2018; Neliwati et al., 2022; Subqi et al., 2021). Therefore, the function and role of religious figures is very much needed as a media tool to strengthen the beliefs of adherents of the religion they adhere to. The role of religious leaders of each religion in Indonesia in particular has a big responsibility in strengthening their teachings to the people. Communities in Kupang Regency, West Kupang District have various problems which end in the emergence of malnutrition problems. Several important reasons include: poverty, lack of knowledge and attention from parents to provide nutrition, low level of awareness of the problem of stunting, and infectious diseases. In this situation, in general the support of religious figures in overcoming the problem of stunting is still very limited because there is no budget allocated specifically for overcoming the nutritional problem.

“We don’t have a budget or budget support to tackle the stunting problem. “Even if there is, it is a form of collaboration with related agencies (Health Service, Social Service, National Family Planning Coordinating Agency, and other services related to health issues)” and non-government institutions such as :

Regional People’s Representative Council-Economic Commission: Program to improve the people’s economy. Making herbal medicine from live pharmacies before Covid and after Covid stopped with WKRI and Klasis.

Kerawam Commission (Lay Apostolate) and Klasis West Kupang Regency: Development program for pre-marital couples: Material on family economics, reproductive health and church law regarding marriage, nutrition and reproductive health for prospective brides and grooms.

The youth commission from the parish and class centers has programs: Development programs for catechesis/catechesis students and formation regarding youth, of course there is about marriage preparation.

Political cadres (Melki Laka Lena): Socialization about health and stunting in Kupang Regency

Traditional figures: Support socialization during traditional meetings or family gatherings during celebrations of sorrow or joy. Apart from that, he once talked about building good relationships with native people so they could get land to cultivate.

Local Government: Visit churches and mosques for outreach about stunting. A few years ago before covid. Community health center program to go to churches and schools.

Higher Education - Faculty of Public Health, Nusa Cendana University is involved in providing outreach about stunting.

The research results show that the contribution of religious figures in preventing stunting is very important (Zahrah & Damayanti, 2023). However, if it is supported by cross-sectoral cooperation, the burden of services related to stunting will be easier. There are other programs or activities that have been carried out by each religious figure whose aim is to help the congregation in preventing and overcoming the problem of stunting.

The program implemented by Catholic religious figures, in this case the Kupang Agung District, is to create a family planning village as a family model in collaboration with the BKKBN of East Nusa Tenggara Province. Another program is Agro Tourism as a learning tool to improve community welfare through agriculture and animal husbandry. In East Flores Regency, the Love Cart Program is implemented which emphasizes local food so that it can encourage people to consume local food. In 2021 the Love Cart Program succeeded in reducing the stunting rate.

Programs implemented by Christian Religious Leaders include the PPA Program in collaboration with PGI for children who are malnourished, child-friendly church programs, non-violent churches, churches that pay attention to their nutrition. There is provision of green bean porridge by the Sunday school children's service and the foster parent adoption program. Apart from that, religious leaders also build communication with the congregation to help the community in their respective fields. These programs are carried out with the support of partner churches, the government, NGOs namely Save the Children and funds from the congregation's diaconal service unit (internal congregation). Obstacles that are often found in program implementation are changing things that are already entrenched and limited human resource capabilities and networks with the government are still limited.

The overall interview results are in accordance with the results of further analysis showing that the level of understanding factors related to stunting and support for cross-sector cooperation both influence changes in the prevalence of stunting in Kupang Regency, NTT Province. This means that every religious figure who has a good level of knowledge about stunting can play a good role in integrating all government or non-government sector programs appropriately with service programs or vice versa (Nazmudin, 2018; Neliwati et al., 2022; Subqi et al., 2021; Zahrah & Damayanti, 2023).

The research results exemplify the role of Islamic religious figures in combining government programs with service programs written in the Al-Qur'an Surah Al-Baqarah verse 233, namely "*Allah has commanded a mother to breastfeed her child for up to two years.*" (Brooks et al., 2019; Janes & Corbett, 2009; Nazmudin, 2018; Neliwati et al., 2022;

Picauly et al., 2022b; Subqi et al., 2021; Zahrah & Damayanti, 2023). Apart from that, social capital also requires the head of the family (father) to have responsibilities in order to provide a living for the family, such as providing decent clothing for his children. This means that religious leaders are truly important partners in supporting government programs, namely: providing exclusive breastfeeding and breast milk only until the age of 23 months and supporting parents' parenting patterns in fulfilling children's social rights. This part of the Koran ensures that a mother does not lack breast milk as a factor in stunting in children (Janes & Corbett, 2009; Kirksey & Helmreich, 2010). Apart from that, local governments together with religious leaders through formal and non-formal forums can provide education about the importance of maintaining health starting from pregnancy so that children grow healthily (Neliwati et al., 2022; Zahrah & Damayanti, 2023).

CONCLUSION

Religious figures have a major role in the community service environment because they are able to provide knowledge that is in accordance with the conditions of the community and increase the community's religious understanding. Therefore, the role and support of religious figures are very useful in changing the parenting patterns of mothers of toddlers in preventing nutritional problems in toddlers.

It is recommended that the government and universities work together to provide support in the form of nutrition advocacy activities, public health nutrition governance, and ensuring the involvement of the religious sector in health to achieve independence in overcoming and preventing nutritional problems including stunting.

LIMITATIONS OF THE STUDY

The limitation of this study is on the number of samples or informants. Therefore, to increase the number of samples, it is suggested that further research can expand the scope of the study or research area by comparing two areas with different topography to get recommendations for religious involvement in strategic tasks with local government partners and other sectors.

REFERENCES

- Asiva Noor Rachmayani. (2015). *Laporan Skematik Indonesia 2023*.
- Bhisma Murti. (2022). *Health Belief Model*. <http://myblogcomnurse.blogspot.com/2016/02/health-belive-model.html>
- BPS Kabupaten Kupang. (2022). Kupang Dalam Angka 2022. *Badan Pusat Statistik*, 347.

- BPS Provinsi Nusa Tenggara Timur. (2023). *Statistik Daerah Provinsi Nusa Tenggara Timur*.
- Brooks, L. A., Manias, E., & Bloomer, M. J. (2019). Culturally sensitive communication in healthcare: A concept analysis. *Collegian*, 26(3), 383–391. <https://doi.org/10.1016/j.colegn.2018.09.007>
- Dinas Kesehatan Nusa Tenggara Timur. (2019). Rencana strategis dinas kesehatan provinsi Nusa Tenggara Timur tahun 2019-2023. *RENSTRA Dinas Kesehatan Provinsi NTT*, i–208. <https://e-renggar.kemkes.go.id/file2018/e-performance/1-249007-2tahunan-292.pdf>
- Farmer, P. (2004). Sidney W. Mintz Lecture for 2001: An anthropology of structural violence. *Current Anthropology*, 45(3), 305–325.
- Indrayani, T., Siauta, J. A., & Apriliani, S. E. (2023). Pengaruh Penyuluhan Kesehatan terhadap Tingkat Pengetahuan Ibu Hamil tentang Pencegahan Kejadian Stunting. *Jurnal Ilmiah Permas: Jurnal Ilmiah STIKES Kendal*, 13(3), 937–944. <https://doi.org/10.32583/pskm.v13i3.1056>
- Intje Picauly. (2023). Stunting dalam Bingkai Kesehatan Ibu dan Anak (Edisi Revisi). In *Angewandte Chemie International Edition*, 6(11), 951–952. (Dua (2) Ed). Penerbit Amerta Media.
- Janes, C. R., & Corbett, K. K. (2009). Anthropology and global health. *Annual Review of Anthropology*, 38, 167–183. <https://doi.org/10.1146/annurev-anthro-091908-164314>
- Kemendes RI. (2023). Stunting di Indonesia dan Faktor Determinan. *Laporan Tematik SKI 2023, Bab 4*, 45–65.
- Kementerian PPN/ Bappenas. (2018). Pedoman Pelaksanaan Intervensi Penurunan Stunting Terintegrasi di Kabupaten/Kota. *Rencana Aksi Nasional Dalam Rangka Penurunan Stunting: Rembuk Stunting, November*, 1–51. <https://www.bappenas.go.id>
- Kementrian Kesehatan RI. (2023). Kesehatan Ibu Dan Neonatus “Situasi Dan Tantangan Kesehatan Ibu Dan Neonatus Di Indonesia.” *Laporan Tematik Survei Kesehatan Indonesia*, 1–12. <https://www.badankebijakan.kemkes.go.id/laporan-tematik-ski/>
- Kirksey, S. E., & Helmreich, S. (2010). The emergence of multispecies ethnography. *Cultural Anthropology*, 25(4), 545–576. <https://doi.org/10.1111/j.1548-1360.2010.01069.x>
- Murti, B. (2021a). *Desain Eksperimen dan Prinsip Analisis Data* (Materi Kuliah Reguler(Working Paper)).
- Murti, B. (2021b). *Kriteria Kausasi*.
- Nazmudin, N. (2018). Kerukunan dan Toleransi Antar Umat Beragama dalam Membangun Keutuhan Negara Kesatuan Republik Indonesia (NKRI). *Journal of Government and Civil Society*, 1(1), 23. <https://doi.org/10.31000/jgcs.v1i1.268>

- Neliwati, N., Rizal, S., & Hemawati, H. (2022). Peranan Tokoh Agama Dalam Meningkatkan Motivasi Pelaksanaan Keagamaan Masyarakat. *Geneologi PAI: Jurnal Pendidikan Agama Islam*, 9(1), 32–43. <https://doi.org/10.32678/geneologipai.v9i1.6233>
- P2PTM Kemenkes RI. (2018). Cegah Stunting dengan Perbaikan Pola Makan, Pola Asuh dan Sanitasi - Direktorat P2PTM. In *Kemkes.Go.Id*. <http://p2ptm.kemkes.go.id/kegiatan-p2ptm/subdit-penyakit-diabetes-melitus-dan-gangguan-metabolik/cegah-stunting-dengan-perbaikan-pola-makan-pola-asuh-dan-sanitasi>
- Picauly, I. (2021). Pengaruh Pelaksanaan Aksi Konvergensi Stunting Terhadap Cakupan Program Intervensi Gizi Sensitif Di Propinsi Nusa Tenggara Timur. *Jurnal Pangan Gizi Dan Kesehatan*, 10(2), 71–85. <https://doi.org/10.51556/ejpazih.v10i2.156>
- Picauly, I., Adi, A. A. A. M., Meiyetriani, E., Mading, M., Weraman, P., Nashriyah, S. F., Hidayat, A. T., Boeky, D. L. A., Lobo, V., Saleh, A., & Peni, J. A. (2023). Path analysis model for preventing stunting in dryland area island East Nusa Tenggara Province, Indonesia. *PLoS One*, 18(11), e0293797. <https://doi.org/10.1371/journal.pone.0293797>
- Picauly, I., Agung Ayu Mirah Adi, A., Meiyetriani, E., Mading, M., Weraman, P., Fadhilatun Nashriyah, S., Thohir Hidayat, A., L. Adeline Boeky, D., Lobo, V., S. Saleh, A., & A Peni, J. (2022a). Factors Influencing the Role of Religious Leaders in the Process Accelerate Stunting Response in East Nusa Tenggara Province. *Journal of Maternal and Child Health*, 7(6), 618–629. <https://doi.org/10.26911/thejmch.2022.07.06.01>
- Picauly, I., Agung Ayu Mirah Adi, A., Meiyetriani, E., Mading, M., Weraman, P., Fadhilatun Nashriyah, S., Thohir Hidayat, A., L. Adeline Boeky, D., Lobo, V., S. Saleh, A., & A Peni, J. (2022b). Factors Influencing the Role of Religious Leaders in the Process Accelerate Stunting Response in East Nusa Tenggara Province. *Journal of Maternal and Child Health*, 7(6), 618–629. <https://doi.org/10.26911/thejmch.2022.07.06.01>
- Putri, E. M. S., & Rahardjo, B. B. (2021). Program Pemberian Makanan Tambahan Pemulihan pada Balita Gizi Kurang. *Indonesian Journal of Public Health and Nutrition*, 1(3), 337–345.
- Setiyabudi, R. (2019). Stunting, risk factor, effect and prevention. *Medisains*, 17(2), 24. <https://doi.org/10.30595/medisains.v17i2.5656>
- Subqi, I., Hasan, S., & Riani, E. (2021). Peran Lptp Melalui Pendekatan Agama Dan Multisektor Dalam Penanganan Penurunan Angka Stunting Di Desa Pagarejo Wonosobo. *Jurnal Al-Ijtima'iyyah*, 7(1), 111. <https://doi.org/10.22373/al-ijtima'iyyah.v7i1.9523>
- Tim Indonesiabaik.id. (2019). Bersama Perangi Stunting. In *Direktorat Jenderal Informasi dan Komunikasi Publik Kementerian Komunikasi dan Informatika*. <http://indonesiabaik.id/public/uploads/post/3444/Booklet-Stunting-09092019.pdf>

Ummah, M. S. (2019). Kamus Besar Bahasa Indonesia. In *Sustainability (Switzerland)* (Vol. 11, Issue 1). http://scioteca.caf.com/bitstream/handle/123456789/1091/RED2017-Eng-8ene.pdf?sequence=12&isAllowed=y%0Ahttp://dx.doi.org/10.1016/j.regsciurbeco.2008.06.005%0Ahttps://www.researchgate.net/publication/305320484_SISTEM_PEMBETUNGAN_TERPUSAT_STRATEGI_MELESTARI

Zahrah, S. N., & Damayanti, N. A. (2023). The relationship between religious leaders and the knowledge of mothers in reducing stunting: a literature review. *Journal of Public Health in Africa*, 14(S2). <https://doi.org/10.4081/jphia.2023.2622>

FUNDING AND SPONSORSHIP

This research is sponsored by the Indonesian Ministry of Education, Culture, Research and Technology.

CONFLICT OF INTEREST

There is no conflict of interest in this study.

ACKNOWLEDGMENT

We thank the Ministry of Education, Culture, Research and Technology, database providers such as Bapelitbangda (BP4D) 22 districts/cities and NTT Province, NTT Provincial Health Service, NTT Province Agriculture and Food Security Service, NTT MUI, NTT GMIT Synode, WALUBI NTT, PHDI NTT and BKPK (Health Development Policy Agency) Indonesian Ministry of Health.