

Eliminating Stunting as an Effort to Respect Human Rights (HAM)

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Abstract

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Stunting in Indonesia is a picture of poverty and backwardness of society itself. The condition of public health is a worrying sight in the villages. The reality of this very extreme social inequality is clearly occurring in this country. In fact, this happened as a result of failure in development in the human resources sector. What is even worse is the lack of protection and respect for human rights as citizens. Our various national development policies are isolated from their role as instruments of equalization (the great equalizer) which can free poor people from the shackles of poverty. This research was conducted using empirical research and a sociological juridical approach. The aim of the research is to determine the social aspects and dimensions of the implementation of Human Rights, namely the extent to which the government pays attention to handling child nutrition and growth, so that stunting does not worsen in areas (villages). Moreover, remote areas are also part of the unity of the Republic of Indonesia and must be able to become advanced and able to compete fairly with other nations. For this reason, don't let Indonesia's future be filled with many generations who have been exposed to stunting.

I. Introduction

Over the past two decades, children's health has continued to experience growth disorders such as malnutrition or what is commonly called stunting. In plain view, stunting is like an iceberg phenomenon, which is not recorded as being much bigger than what appears on the surface. In fact, ideally they are also citizens who must be taken care of. Regarding stunting, of course it can be categorized as a group of the nation's children who have not received full attention from the state.

Indeed, to be honest, stunting in Indonesia is still a serious problem. It could be that in the next few years the Indonesian people will still need challenges to get maximum results, namely being free from the problems of child growth and malnutrition, both from health and non-health aspects.

In order to accelerate the reduction of stunting nationally, the handling requires a lot of stakeholder support with cross-sectoral and territorial handling with organization at the district/city level. The situation and handling strategy must be carried out with synergy and collaboration between various institutions.

The still high stunting rate in the country was recorded in 2019, reaching 27.7 percent, then decreasing in 2021 to 24.4 percent, so it is hoped that by the end of 2022 it will decrease to 21 percent. This is in line with the assumption that in 2023 it is hoped that it will decrease to 3 percent and then to 17.5 percent, and in 2024 it can reach 14 percent. (Media Indonesia, Tuesday, 16 August 2022).

The government has appointed the National Population and Family Planning Agency (BKKBN) as the leading sector for handling national stunting reduction. It is hoped that this integrated treatment will facilitate its implementation in the field and have a wide reach.

This handling of stunting is a follow-up to Presidential Decree Number 72 of 2021 so that handling of stunting has been established in all regional governments in Indonesia. As an acceleration effort so that it directly focuses on the problem points in the regions. Following up on this, 5 pillars have been built.

First, a national commitment to jointly mobilize activities to "alleviate" stunting, then provide assistance in a targeted manner. Second, is to provide massive information about stunting. Third, convergence from central to regional government. Fourth, namely aid and programs to be more targeted at poor and extreme households in order to reduce the number of poor families so they can buy food that is high in protein. Fifth, namely utilizing data, such as data on families with high levels of stunting, families who don't have toilets, and don't have access to clean water.

So, several factors are of concern. Such as sensitive factors or an uninhabitable home environment that must be repaired, a toilet must be provided so that children are not susceptible to diarrhea which will affect body weight. Apart from that, other things that need to be improved are specific factors, including preventing anemia among young girls. Currently, anemia among young women

is quite high, up to 37 percent because when pregnant, a mother needs a lot of blood.

Most importantly, reducing stunting currently also really requires regional government support. More than that, regions must also budget so that it appears in their financial plans. Then the village uses village funds to optimize stunting prevention. The next role is to mobilize data and the posyandu is also truly empowered.

In this way, the regional government appears committed to accelerating stunting reduction consistently and sustainably. So everyone must move to overcome this together, both district (regional) governments and village governments. In fact, all individuals, communities and the private sector must synergize and unite in efforts to accelerate the reduction of stunting in remote villages in remote locations, which are part of the unitary state of the Republic of Indonesia.

Finally, the discourse about stunting is a conversation in a complex space of concern. Reading the narrative of people's lives never seems to be separated from the situation of the fundamental rights of citizens which are the constitutional rights of every human being in Indonesia. As a manifestation or manifestation of respect/enforcement of human rights which are upheld in the Indonesian legal state.

Therefore, program policies related to handling stunting are a manifestation of the protection of children's rights, which is a constitutional order that protection of children is part of human rights.

2. Research Method

This research method uses an empirical juridical method with a qualitative descriptive approach. To describe and/or analyze the development of stunting in an area and the dynamics of its prevention. Through this causality approach, it can be seen how to improve children's nutritional intake so that it can maximally reduce children's growth problems, especially from the health aspect, which is a reality of community life in the region.

Data sources in this research include primary data in the form of interviews, observations and documentation in the Camba District, Maros Regency, South Sulawesi. Secondary data was taken from literature studies relevant to this research from media, journals and books

3. Results and Discussion

A. State Responsibility in Health Services

In fact, the constitutional mandate emphasizes that every person has the right and obligation to obtain optimal health. Of course, this includes people who live (domiciled) in villages. That is why increasing the level of health must be continuously pursued to fulfill a healthy life.

Moreover, Indonesia is a country that is very famous for its natural resource potential (SDA). However, on the other hand, the reality is that this country cannot be separated from the problem of malnutrition which is part of the social facts that exist in this republic. It could be that the cause is that it has never been handled optimally (seriously) by the state, as a result various kinds of chronic diseases continue to develop. One of them is stunting, a disease that is classified as "latent" in this republic.

Even though we realize that recovering children from stunting is the state's responsibility so that children can live healthily and have a decent life. Therefore, every child has the right to good health services. As citizens, they have basic rights (fundamental rights) guaranteed by the state constitution, including food rights (nutritional intake) and the right to welfare.

Moreover, this right is also recognized in statutory regulations, namely the 1945 Constitution of the Republic of Indonesia, Law Number 4 of 1979 concerning Child Welfare. Law Number 23 of 2002 concerning Child Protection. Law Number 36 of 2009 concerning Health. Law Number 3 of 1997 concerning Juvenile Justice. It is even regulated in Law Number 39 of 1999 concerning Human Rights.

Human rights are rights that all humans have at all times and places based on their nature as humans. In the context of Indonesian society, deaths that claim the lives of the nation's children are triggered by the unavailability of health protection and services can be categorized as a human rights violation. Violation of the right to health is a violation of the constitution.

Hamid Attamini said that the constitution or the 1945 Constitution of the Republic of Indonesia is a guideline and limiter as well as how state power must be exercised. As a result, the government's failure to restore the health of stunted children is a form of human rights violation committed by the state.

Because they do not fulfill/fulfill children's constitutional rights. The rights violated by the state are health, the right to welfare, the right to education, the right to a decent standard of living, including the right to life. The right to life is a non-derogable right that cannot be postponed/eliminated under any circumstances as a gift from God Almighty.

Therefore, in principle, every human child needs health services. They basically want to remain physically and spiritually healthy. In fact, some people want a higher degree of health. That is why several health regulatory instruments have been issued by the state as a form of responsibility to the people.

Basically, the health factor is one of the sectors whose quality must be improved, so that it can realize superior human resources. More than that, the state, in this case the government, is asked to make health regulations that are able to bind and make people adopt a healthy lifestyle.

Therefore, improving the health sector must involve various parties. So cross-sectoral, cross-time and cross-territorial. This is important to do, including that solving health problems must involve various stakeholders (multi stockholders). It can't just be partial.

Let's say the environmental and social sectors, such as the availability of clean water, hygiene facilities, healthy housing/environment, as well as public awareness are important factors in health. This means that it is impossible to stand alone to solve the public health problem (stunting).

This development will automatically have an impact on the development of stunting in regions (villages). Thus, inevitably the state is required to follow medical developments and prepare more adequate health infrastructure, so that it can more quickly and optimally provide services to the community, especially who live on the mountain slopes in the village.

So, various shifts in conditions in the regions automatically require special strategies. The state cannot remain silent (vacuum) regarding the real conditions existing in society. From the research results, this reality must be responded to with various tips and government efforts: 1). It is necessary to instill awareness among the people about the importance of consuming nutritious food, 2). The need for people to pay attention to their child's weight (on scales), 3). The need for people (patients) to convey honestly (openly) what their child's complaint is so that they have no appetite, 4). The need to instill in the community to always live cleanly and maintain health, 5). The need for

people in villages to pay attention to balanced nutrition (diverse foods).

B. The Role of Regional Government in Stunting

It cannot be denied that stunting is a multidimensional child health problem so that local governments have a strategic role in preventing it. However, this disease is endemic or visible and still occurs everywhere in the area (village).

For this reason, the government has designated stunting as one of the priority programs based on Law Number 36 of 2009 concerning Health, including the Health Bill which became law at the DPR Building, Senayan Jakarta (Tuesday, 11/7/2023).

Likewise, the government has made several policies, namely establishing Presidential Regulation Number 42 of 2013 which regulates the Implementation of the National Movement to Accelerate Nutrition Improvement. The road map for accelerating nutrition improvement consists of four main components which include advocacy, cross-sector strengthening, development of specific and sensitive programs, and database development. All of this needs to be done jointly by Ministries/Institutions and other stakeholders.

Minister of Health Regulation No. 17 / 2018 concerning Amendments to the Regulation of the Minister of Health concerning General Guidelines for Distribution of Government Assistance within the Ministry of Health by Providing Additional Food for Pregnant Women and Toddlers as well as providing Nutrition Education in Providing Local Additional Food for Pregnant Women and Toddlers. In 2019 the Minister of Villages signed Permendes PDPTT Number 16 16 of 2018 regarding the use of village funds for posyandu. On this basis, efforts made to reduce stunting are focused on pregnant and postpartum women, toddlers, school-aged children and teenagers. In essence, all sectors and lines of life are empowered to brake and prevent stunting.

There are several programs that were recorded from the field and have been implemented, namely first, Rice for the Poor (Raskin) Rice for the Prosperous (Rastra). Second, Non-Cash Food Assistance (Ministry of Social Affairs). Third, the Family Hope Program / PKH (Ministry of Social Affairs). Fourth, Providing Additional Food / PMT to Pregnant Women (Ministry of Health) and fifth, assistance with panga nasal from other sources (Regional Government, NGOs, etc..

Based on the existing reality, it must be acknowledged that regional

government programs have not been well realized and their implementation has proven to be uneven. Based on data and facts available from the Ministry of Health, the prevalence of stunted toddlers in Indonesia from 34 provinces is only 2 proven which are below the WHO Limit, namely Yogyakarta (19.8%) and Bali (19.1%). Other provinces have high and very high dominant cases of around 30% to 40%.

Referring to Titon Slamet Kurnia's opinion, the occurrence of malnutrition is a failure of local governments to achieve food security. This failure strengthens the existence of legal obligations that the government has violated. Although later various excuses were put forward by the government, such as excuses due to natural conditions that did not support the program. 12. In fact, dealing with malnutrition/stunting automatically also reduces poverty in areas, especially in remote villages.

This fact, of course, cannot be denied, that poverty is a condition that closes human accessibility to various possibilities. The closure of accessibility is an indication of an obstacle to the enforcement of regional governments who are committed to preventing stunting in their regions. Therefore, local governments must reflect on the portrait of poverty in their area. Must have ideas and initiatives to free the government (region) from the "shackles" of poverty. Because poverty is the key factor in poor nutrition as the main cause of stunting.

So what should local governments do? Take water to wash your hands and don't forget to purify yourself through the ritual of ablution (purification). Be sincere in your heart to purify your heart so that you will have a holy intention in carrying out the divine commandment. Quoting the words of Prof. Akhsanul Inam, Ph.D (President of ASEAN Ministers Responsible for Culture and Arts AMCA Indonesia) in the book editor Bookchafer New Normal 2020.

For this reason, various things must be done by the regional government so that fundamental changes in the health sector can be achieved. Especially in the current era of decentralization, regional governments have to be more creative and have the initiative to free their local government areas/territories from "stunting".

Regional autonomy has changed the direction of development from centralization to decentralization. Full decentralization provides delegation of authority to agencies and groups in society to manage their own households.

Therefore, regional autonomy is the right, authority and obligation to regulate/manage one's own government affairs and community interests. In this context, underdevelopment of human resources (stunting) is of course no exception.

As is known, since 2001 Indonesia has entered the era of regional autonomy (otda). And during that time there have been 3 regional government laws which give roles and authority to regional governments in running their government, namely Law 22/1999, Law 32/2004 and Law 23/2014. These three laws have restored the position of regions as implementers of affairs assigned by the center, so that regions are expected to play a more optimal role in alleviating poverty and eliminating stunting in their regions. This must be the commitment of the regional government as proof of the presence of social welfare in the region

4. Conclusion

It cannot be denied, the government has implemented/actualized various stunting prevention and management programs as an effort to protect children's human rights, as well as a form of state responsibility in health services provided to the people as citizens who have basic (fundamental) rights. However, to be honest, it must also be acknowledged that its implementation has not been optimal. As a result, the stunting rate is not yet equivalent to the standards set by WHO. This failure is a form of human rights violation committed by the state against children suffering from "stunting". Because, health is a fundamental right of citizens of the Republic of Indonesia.

Stunting must receive serious attention from state managers, especially regional governments, namely government without discrimination but with equality (equal protection). However, children are a gift from God that must be protected by providing adequate health services. Therefore, the government's commitment (political will) is needed to protect the rights of children as stunting sufferers. Protection of children's human rights should be reaffirmed in the constitution and other more operational regulations with content: first, the rights and obligations of children suffering from stunting, secondly the government's concrete responsibilities towards stunting sufferers, thirdly the rights and obligations of parents, fourthly health services maximum benefit to children, fifth, active community participation, sixth, available infrastructure, seventh, active community health centers to control the development of stunting, eighth, central and regional budget allocations for stunting, ninth,

clear legal sanctions

SUGGESTION

It must be acknowledged that efforts to prevent stunting have not been optimal, so there needs to be special regulations regarding stunting, as well as central government attention regarding the APBN (public funds), so that the implementation of regional government program policies is truly based on upholding children's human rights.

In terms of protecting the health rights of children who are diagnosed with stunting, the government must pay attention by providing health insurance for poor people. As regulated in the constitution: that the state is responsible for public health services. Moreover, in fact there are still around 5 million stunted toddlers.

Carry out improvements and/or build a more resilient Indonesian health system for the next generation. So, regional governments need to work hard towards a golden Indonesia 2045. In the context of preventing stunting in line with the constitution and human rights in Indonesia

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