

The Role of Social Assistance for the Family Hope Program (PKH) in Tackling Stunting in Dewantara District, North Aceh Regency

Amru Alba¹ Ratna Farida² Amiruddin Abdullah³

^{1,2}National College of Administrative Sciences, Lhokseumawe, Indonesia

³The Social Assistance Companion of the PKH in North Aceh Regency

Email: amru@stianasional.ac.id, ratna@stianasional.ac.id,

amiruddinyes@gmail.com

ABSTRACT

This study aims to examine the role of the Family Hope Program (PKH) social assistants in tackling stunting in Dewantara District, North Aceh Regency, using role theory that includes participation, perception, accessibility, and action determination in tackling stunting. This research was conducted in Dewantara District, North Aceh Regency. The method used is qualitative, with data collection techniques including interviews, observations, and documentation. Data analysis was carried out by selecting, simplifying, classifying, presenting, and drawing conclusions. The results of this study indicate that the Family Hope Program social assistants have actively participated, have good perceptions, and have taken positive actions in tackling stunting in Dewantara District, North Aceh Regency through Family Capability Improvement Meetings (P2K2), although the accessibility in tackling stunting is not yet optimal. Barriers encountered in tackling stunting include the lack of understanding among PKH beneficiaries about stunting, reluctance to fully follow government programs for stunting prevention, poor environmental hygiene, and a lack of awareness among men to refrain from smoking near infants and pregnant women.

Keywords: Role of PKH, Social Assistance, Stunting

INTRODUCTION

The role is related to motivation, opportunity, and support for the community. Tasks related to roles include negotiation, mediation, providing support, building consensus, organizing, and utilizing resources. The role is related to an individual's status in a social environment that requires someone to do or not do something. Roles are closely related to social positions where there are expectations for individuals to achieve agreed-upon goals. Roles are carried out when someone has rights and obligations within a specific status.

In the government, the role's object is government institutions designated to carry out certain activities aimed at providing prosperity and welfare to the

community. The role as an orientation and concept is played by a party related to social position (Riyadi). Similarly, the PKH social assistants have a position as partners of the government and the community, bridging various interests from the government and the community (Habibullah, 2011). The role's purpose is to achieve agreed-upon expectations and benefit others. In government, role players are individuals mandated to run the government, while the community are the beneficiaries of civil servants.

The role relates to the harmony between responsibility, rights, and the expected goals carried out by those in designated positions. The role includes the responsibilities and rights of individuals appointed to perform the role. The role is an expected behavior and action for someone with a social position (Syamsir, 2012). The role is a dynamic aspect of social status. When someone performs their duties, they are said to be fulfilling a role (Soejono Soekanto, 2013). The Family Hope Program (PKH) is a program providing conditional cash assistance to designated beneficiary families (KPM). PKH participants are communities classified as poor according to 14 criteria set by the Central Statistics Agency (BPS) and have dependents such as pregnant women, children under six, and school-age children from elementary to senior high school (SLTA) or equivalent.

PKH has been implemented in Indonesia since 2007 under the Ministry of Social Affairs of the Republic of Indonesia and has gradually expanded nationwide. PKH collaborates with other sectors like the Ministry of Health, Ministry of Religion, Ministry of National Education, BPS, State Banks Association (Himbara), and PT Pos Indonesia (Putri Kaisar, 2024). The PKH program aims to break the poverty cycle, which is a complex problem, improve human resources quality, and change behaviors that hinder the welfare improvement of pre-prosperous communities. PKH targets KPM with health components (pregnant women, postpartum mothers, toddlers, and preschool children), education components (elementary, junior high, high school/equivalent), or children aged 7-21 who have not completed 12 years of compulsory education, severely disabled individuals, and the elderly over 70 years old (Putri Purwanti, 2022).

Stunting is a growth and development disorder in children due to chronic malnutrition and recurrent infections, characterized by a height below standard (Presidential Regulation No. 72 of 2023). According to the Ministry of Health (Kemenkes), stunting is a growth disorder in toddlers that causes delayed growth, resulting in both short-term and long-term impacts. In Dewantara District, many toddlers suffer from stunting or malnutrition. According to data from the Head of BKKBN Hasto Wardoyo, out of 5 million annual births in Indonesia, 12 million babies are born stunted. This issue must be addressed seriously to reduce stunting rates. President Joko Widodo targets a 14% reduction in stunting by 2024, appointing the Head of BKKBN as the head of the accelerated handling of stunting.

To achieve this target, BKKBN issued Regulation No.12 of 2021 on the National Action Plan for Accelerating the Reduction of Stunting in Indonesia for 2021-2024.

The North Aceh Regency government also implements this program in villages within Dewantara District. The program reduced stunting rates by 216% in 2021 and 216% in 2022, but it remains higher than the World Health Organization (WHO) target of no more than 20%. Based on the 2022 Indonesian Nutrition Status Survey (SGGI), Aceh Province has one of the highest stunting rates, with 312%, down from 332% in 2021 but still far from the government target of below 14% and the national average of 216%. The 2022 SGGI reports that North Aceh Regency is one of the highest contributors to stunting cases in Aceh, with 383%, ranking second after Subulussalam City with 479%. In 2021, 3,251 toddlers in North Aceh Regency were stunted, 2,741 in 2022, and 2,284 in 2023 (North Aceh Health Office).

Although stunting rates in North Aceh Regency have decreased, they have not met the central government's target of below 14% by 2024. The North Aceh Regency government must actively reduce stunting rates to at least 20%, the minimum threshold set by WHO. All stakeholders must synergize, including PKH social assistants, who tackle stunting through Family Capability Improvement Meetings (P2K2) with Health and Nutrition modules, aiming to bring North Aceh Regency, especially Dewantara District, to an ideal category regarding stunting rates. In response to the high stunting rates in North Aceh Regency, Acting Regent Mahyuzar launched a local food-based supplementary feeding program targeting a reduction from 38% to 34%.

This program positively impacts stunting management in Dewantara District but requires preventive programs analyzing stunting potentials, not just targeting already identified stunted toddlers. To handle stunting in North Aceh, key stakeholders are the Community Empowerment, Population Control, and Family Planning Office (DPMPPKB) and the Social Service, Women's Empowerment, and Child Protection Office (Dinsos P3A). Dinsos P3A oversees 150 PKH social assistants. DPMPPKB actively coordinates all government agencies in North Aceh. Stunting management is based on North Aceh Regent's Decree No. 441/202/2023 on the determination of focus areas for integrated stunting reduction in North Aceh Regency for 2024.

RESEARCH METHODS

The method used in this research is descriptive with a qualitative approach. Research data were obtained through interviews with informants, observations in Dewantara District, North Aceh Regency, document review, and literature study. Data collection techniques include:

- **Observation:** This technique involves observing ongoing activities, either participatively or non-participatively. In participatory observation, the

writer participates in the ongoing activities as a program participant. In non-participatory observation, the writer only observes the activities.

- Interview: This technique is widely used in qualitative descriptive research and is considered the primary data collection method. Interviews are conducted orally in face-to-face meetings individually or in groups.
- Documentation Study: According to Sukmadinata (2005: 221) in Dede Rohayat (2014), this technique involves collecting and analyzing written, image, or electronic documents. Documents are selected based on their purpose and focus. They are ordered according to their creation history, strength, and relevance to the research objectives. The content is analyzed, compared, and viewed systematically, cohesively, and comprehensively.

RESULTS AND DISCUSSION

The Role of PKH Social Assistance in Tackling Stunting in Dewantara District, North Aceh Regency. The stunting management follows Presidential Regulation No. 72 of 2021 on Accelerating Stunting Reduction. One active agency in stunting reduction is the Social Service, Women's Empowerment, and Child Protection Office (Dinsos P3A) of North Aceh Regency. Dinsos P3A is assisted by PKH District Coordinators, PKH Sub-district Coordinators, PKH Social Assistants, District Social Welfare Workers (TKSK), Disaster Preparedness Youth (Tagana), Community Social Workers Association (IPSM), PKH group leaders, and beneficiary families (KPM). Stunting management in Dewantara District involves the participation, perspective, accessibility, and actions of PKH social assistants.

When asked about the role of PKH social assistants in handling stunting in Dewantara District, Rahmaniah SE MSM stated: "... through Family Capability Improvement Meetings (P2K2) conducted at monthly meetings regularly." Risma Zuhra said: "... providing information, knowledge, and understanding to PKH beneficiary families in my assisted villages through Family Capability Improvement Meetings (P2K2) about stunting prevention and management..."

Zulfazli, the PKH Sub-district Coordinator for Dewantara from 2018-2024, said: "... PKH Social Assistants play a role in socializing the importance of stunting prevention to the Dewantara District community in their respective assisted villages..."

The responses from the three sources indicate that PKH social assistants in Dewantara District actively prevent and reduce stunting through P2K2 with Health and Nutrition modules for PKH beneficiary families. P2K2 is conducted monthly by PKH social assistants for their respective groups and assisted villages. This is reinforced by Zulfazli's statement in an interview:

"As the former Dewantara Sub-district Coordinator, we are assisted by village health volunteers (Posyandu cadres) during P2K2 to tackle stunting in

Dewantara District. We conduct P2K2 regularly, collaborating with health sector handlers like community health centers (Puskesmas), village health posts (Puskesdes), integrated health posts (Posyandu), and midwives (Bides). We assess the progress during each P2K2 implementation. Dewantara actively participates in all P2K2 activities to address stunting” Stunting management in Dewantara District is directed by Dinsos P3A, coordinating with village heads (Geuchik) and other sectors like health centers, village health posts, Posyandu, midwives, and community leaders in Dewantara. Posyandu cadres in villages involved in stunting management perform tasks such as recording the number of toddlers, pregnant women, and newlyweds in villages. However, Posyandu cadres do not routinely collect data, only during specific planned stunting management activities by DPMPPKB North Aceh Regency, so data is not always updated.

Participation of PKH Social Assistance in Tackling Stunting The participation of PKH social assistants in handling stunting in Dewantara District is evident from their role in conducting Family Capability Improvement Meetings (P2K2), mandated by the Directorate of Social Security of the Ministry of Social Affairs of the Republic of Indonesia, to be conducted monthly in assisted villages. Regarding the role of social assistants, Dewantara Sub-district PKH Coordinator Haji Muhammad Danil S.Kom. M.Kom said:

“Six PKH social assistants in Dewantara District actively participate in P2K2 to tackle stunting in Dewantara District. I, as the Sub-district Coordinator, am appointed as the field coordinator for P2K2 implementation. We discuss various modules during P2K2, including Health and Nutrition. Additionally, Posyandu also plays a role in stunting management in Dewantara by providing supplementary food and vitamins...” Through P2K2, PKH social assistants also socialize with villagers about the importance of maintaining cleanliness and consuming nutritious food for pregnant women, pre-marriage teenagers, and toddlers. To prevent stunting in infants, health centers also implement the Healthy Kitchen for Stunting Handling (DASHAT) program. During P2K2, PKH social assistants are assisted by PKH group leaders in each village, the Sub-district Coordinator, and activities are monitored by the North Aceh District PKH Coordinator. Each social assistant must report P2K2 activities monthly.

PKH Social Assistant Risma Zuhra S.Pd said: “... As a PKH social assistant in Dewantara District, from Dinsos P3A North Aceh Regency, I participate in P2K2 to handle stunting in Dewantara District. We deliver Health and Nutrition modules to PKH beneficiary families (KPM). PKH social assistants represent Dinsos P3A in tackling stunting in Dewantara District...” In each activity conducted by PKH social assistants in Dewantara District, Dinsos P3A North Aceh Regency takes responsibility, while P2K2 implementation reports directly to the Directorate of Social Security of the Ministry of Social Affairs of the Republic of Indonesia. Dinsos

Aceh Province, related stakeholders at the district level, and the central government collaborate to tackle stunting in North Aceh. By mid-year, many activities have been conducted in Dewantara District. The writer observed evidence of P2K2 implementation as part of stunting management in Dewantara District. Rahmaniah SE. MSM stated: "... As a PKH social assistant, I am tasked with assisting PKH beneficiary families during P2K2 to tackle stunting in Dewantara District. I document the activities and coordinate with Muhammad Danil, the Dewantara Sub-district Coordinator, to compile the activity report..." Observations indicate that village officials assigned by the sub-district head actively participate in stunting management activities in villages within Dewantara District.

Perspective of PKH Social Assistance in Tackling Stunting Stunting is a serious issue that requires the involvement of all stakeholders. Presidential Regulation No. 72 of 2021 on stunting management emphasizes coordination, synergy, and synchronization among stakeholders at the district and sub-district levels. Stunting rates in Dewantara District have decreased, indicating good synergy among stakeholders in Dewantara District. In 2022, the stunting rate in North Aceh was 383%, while by the end of 2023, it dropped to 252%, a 131% decrease. However, North Aceh has not met the President's target of reducing stunting to below 14% by 2024. Dewantara Sub-district PKH Coordinator stated: "... The high stunting rate I found in the field is mainly due to many families struggling to meet their nutritional needs due to economic factors. Another factor is the unsterile environment. In my opinion, the program initiated is appropriate, focusing on fulfilling nutrition from pregnant women to toddlers and pre-marriage teenagers, as it is a form of stunting prevention..." Stunting is dangerous; its future impacts include affecting the intelligence of household members who will be the next generation. The North Aceh DPMPPKB civil servants understand the stunting problem well. This is evident during socialization activities, which directly address the issues. Identifying stunting requires the involvement of village officials and midwives because the community is still unaware of stunting characteristics. PKH social assistants should actively educate the community about stunting in Dewantara District. PKH social assistants have been equipped with knowledge and training, so they understand what to do in the field. Nazaruddin, a PKH social assistant in Dewantara District, said: "... As a former Sub-district Coordinator, I see that stunting management in Dewantara District requires active roles of PKH social assistants by proactively approaching the community, as many people here do not understand stunting and its characteristics..." The PKH Sub-district Coordinator understands the stunting problem well. This is evident during stunting management activities in Dewantara District. PKH social assistants understand and know the stunting problem in Dewantara. This is evident from the activities and actions of PKH social assistants in handling stunting.

Accessibility of PKH Social Assistance in Tackling Stunting The accessibility of PKH social assistants plays a role in stunting management programs in Dewantara District. PKH social assistants conduct Family Capability Improvement Meetings (P2K2) with Health and Nutrition modules for PKH beneficiary families to raise awareness about the importance of health and balanced nutrition to prevent stunting in infants within families. In stunting management in Dewantara District, PKH social assistants are assigned by the Directorate of Social Security (Jamsos) of the Ministry of Social Affairs (Kemensos) of the Republic of Indonesia to prevent stunting by conducting P2K2 in each PKH group in each village. PKH social assistant Dewantara Hayatullah Kumaini stated: "... In stunting management acceleration programs in Dewantara District, we coordinate with Dinsos P3A, Sub-district Coordinators, health centers, and village midwives, as they are competent in handling stunting issues. We, as PKH social assistants, only provide Health and Nutrition modules once a month in Family Capability Improvement Meetings..." In addition to Dinsos P3A North Aceh Regency, stunting management is also carried out by the Health Office, DPMPPKB, Bappeda, Agriculture Office, Public Works and Housing Office (PUPR), and other related offices. Dinsos P3A involves Sub-district Coordinators, PKH social assistants, and TSKS in stunting prevention activities. PKH social assistants handle PKH social assistance, while TSKS handles Food Assistance. Siti Halimah, the PKH Group Leader in Uteun Geulinggang Village, stated: "... I always accompany PKH Sub-district social assistants in the field during PKH social assistance distribution in Uteun Geulinggang Village, Dewantara District. Meetings are often held with all PKH beneficiaries in Uteun Geulinggang Village, Dewantara District. Most of us also receive PKH social assistance and participate in P2K2 to reduce stunting rates..." The accessibility between PKH social assistants and competent stakeholders in stunting reduction is good, though not yet 100% optimal. This is in line with an electronic media report stating that one of the obstacles in stunting management is the suboptimal role of the stunting management acceleration team in the village and incomplete data, requiring active roles of PKH social assistants in Dewantara District in stunting management to create a synergistic system. Rasyidah, the PKH Group Leader in Paloh Igeuh 1 Village, said: "... I coordinate with the Sub-district PKH Coordinator for additional directions and information regarding P2K2 implementation to handle health and nutrition for PKH beneficiaries in Dewantara District. The goal is to reduce stunting rates in my village. Whenever there are obstacles in the field, I coordinate with the Dewantara Sub-district PKH Coordinator and always synergize with village officials in stunting management programs..." Febrina, the PKH Group Leader in Paloh Igeuh II Village, stated: "... Posyandu cadres in the village coordinate with village officials and community leaders in Paloh Igeuh Village to gather information on the number of pregnant women, infants, and new pre-

marriage teenagers in Uteun Geulinggang. They then coordinate with the Sub-district Coordinator to report stunting-related information developments in the villages..." PKH social assistants also coordinate with Posyandu cadres in the village. During stunting-related activities, Posyandu cadres are assisted by village officials and village midwives to obtain accurate data, especially on the number of stunted infants. Posyandu cadres collect data by coordinating with village heads and midwives because midwives better understand the health conditions of the community in the villages within Dewantara District. After obtaining accurate data, Posyandu cadres report to the Sub-district Coordinator.

Action Determination of PKH Social Assistance From interviews with informants about how PKH social assistants determine actions in the stunting management program in Dewantara District, information was obtained from a PKH social assistant in Dewantara District, Nazaruddin SE: "... In P2K2 implementation, as one of the PKH social assistants' tasks in the field, the Directorate of Social Security of the Ministry of Social Affairs RI has mandated that stunting management must always consider the nutrition and vitamin brands given to pregnant women and infants. Dinsos P3A also sets requirements that PKH social assistants in the field must follow, including reporting P2K2 activity results on health and nutrition. If the results are not as expected, activities may be replaced. Additionally, the North Aceh District PKH Coordinator analyzes and evaluates P2K2 activities conducted by PKH social assistants in Dewantara..." As PKH social assistants, they often meet with KPM in the villages. Besides recording KPM data, they also interact with families with stunted children. PKH social assistants also provide understanding and input on the importance of maintaining a clean environment, consuming nutritious food, and avoiding smoking, especially for husbands with pregnant wives. Rahmaniah SE. MSM, during a P2K2 discussion in Dewantara, stated: "... The actions taken by PKH social assistants in the field are more preventive, so the District Coordinator emphasizes PKH social assistants in the villages to always update data on new pre-marriage teenagers, pregnant women, and infants from PKH beneficiary families. Health and nutrition are two potential factors for increasing or reducing stunting..." In stunting management activities, PKH social assistants are asked to collect data on new pre-marriage teenagers, teenagers, pregnant women, and infants to ensure data accuracy. For prevention, PKH social assistants are asked to be socialization agents to KPM about the importance of maintaining environmental cleanliness, consuming easily available nutritious food like cassava, spinach, tempeh, vegetables, and tofu, and providing information to KPM who do not understand stunting. PKH social assistants involved in stunting management at Dinsos P3A North Aceh Regency have implemented programs mandated by the Directorate of Social Protection of the Ministry of Social Affairs RI and directly reached the target, namely PKH

beneficiary families in villages within Dewantara District, assisted by appointed group leaders. Haji Muhammad Danil S.Kom. M.Kom stated: "... I often tell KPM in my assisted village to always maintain cleanliness because it is one of the causes of malnutrition in children. I emphasize the danger of smoking near pregnant women and nursing mothers..." Regarding action selection by Dinsos P3A North Aceh Regency, the Sub-district PKH Coordinator and PKH social assistants in designated villages carry out activities according to the programs set by the Directorate of Social Security of the Ministry of Social Affairs RI and the North Aceh Regency government. Actions in the field, such as data verification and validation of prospective PKH beneficiaries directly with the community in the villages, ensure data validity, forming the basis for activities like P2K2.

Barriers and Efforts in Tackling Stunting in Dewantara District In tackling stunting in North Aceh Regency, conducted by DPMPPKB North Aceh Regency, stunting decreased by 136%, from 388% at the end of 2021 to 252% by the end of 2023. The central government targets Indonesia's stunting rate to be below 14% by the end of 2024. According to a March 22, 2024 publication by Forum Keadilansumut.com, North Aceh Regency's stunting rate is predicted to drop to 21%-22% by the end of 2024, still not meeting the central government's target. When asked about the challenges in implementing P2K2 with Health and Nutrition modules in Dewantara District, Risma Zuhra S.Pd stated: "... Some flipcharts are already damaged. If we use laptops, KPMs are less focused and do not like reading. As a result, we have to convey the material fully, leading to less interaction between KPMs and PKH social assistants..." Many PKH and food assistance beneficiaries in Dewantara District do not understand stunting, leading to many stunting cases being identified only after they occur. Many PKH and food assistance beneficiaries in coastal villages lack toilets and defecate in waterways, rivers, or randomly, resulting in an unhealthy environment that triggers stunting cases. Regarding KPM's enthusiasm in participating in P2K2, PKH social assistant Putri Munia Susanti stated: "... They listen and participate in P2K2 activities and materials but have not fully implemented them. Many people still cannot meet their daily needs due to insufficient income and living below the poverty line..." Mayangsari, the PKH Group Leader in Keude Krueng Geukuh Village, stated: "... Regarding the challenges in implementing P2K2 with Health and Nutrition modules in Dewantara District, there are no significant challenges. Some PKH beneficiaries cannot meet their children's nutritional needs due to economic factors..." Implementing stunting management programs faces challenges such as the community's lack of understanding about stunting, lack of awareness about maintaining cleanliness, and many households still in the pre-prosperous category, potentially increasing stunting cases due to inadequate nutrition for pregnant women and infants. Another challenge is the lack of awareness among PKH beneficiaries, especially

male parents, to avoid smoking near infants or pregnant women, triggering stunting within the family. PKH social assistants maximize their efforts by providing socialization to KPMs about stunting as an educational measure. Nazaruddin SE, in an interview, stated: "... The challenges I face in the field include the lack of KPM knowledge about stunting, housewives reluctant to bring their children to Posyandu, and parents using PKH assistance for their needs, leaving infants without sufficient nutrition. To address this, PKH social assistants encourage parents, especially those in PKH groups, to bring their children to Posyandu and ensure that food given to infants is consumed on the spot..." The community's lack of awareness about stunting complicates data collection for PKH social assistants. Additionally, some KPMs still perceive stunting as non-threatening, hindering government programs implemented by the district and central governments through the Ministry of Social Affairs. To overcome these challenges, PKH social assistants request village officials to help detect where there are pre-marriage couples, pregnant women, toddlers, and new pre-marriage teenagers. Hayatullah Kumaini A.Md stated in an interview: "... The challenge I face in the field is that some parents do not want to take their infants to Posyandu, making it difficult to handle if the infants are stunted. Additionally, many people think that the supplementary feeding program is for the entire community, so stunted infants do not get the food as it is insufficient. To address this, we provide education to the community through socialization related to stunting. For the supplementary feeding program, midwives have implemented a calling system by cadres to ensure that only the target recipients come..." Due to many pre-prosperous residents in Dewantara District, every supplementary feeding program for infants sees the community taking the opportunity to participate, leaving the stunted infants without adequate food. Midwives face challenges in educating the community. Risma Zuhra S.Pd stated: "... The challenge I face in the village is that many people do not understand stunting, so they do not know if their infants are stunted. To address this, we coordinate with village officials, village midwives, and PKK women to jointly educate the community about stunting and collect data..." Due to the low education level of the community in Dewantara District, many residents do not understand the dangers of stunting and its characteristics. To address this, PKH social assistants provide direct education to PKH beneficiaries about stunting. PKH social assistants also coordinate with village heads, village officials, and village midwives to educate PKH beneficiaries. Due to everyone's hard work, PKH beneficiaries now understand stunting.

Discussion The Role of Family Hope Program (PKH) Social Assistance in Dewantara District The participation of PKH social assistants in conducting Family Capability Improvement Meetings (P2K2) under the guidance of Dinsos P3A North Aceh Regency shows that PKH social assistants actively participate in stunting

management activities in Dewantara District. However, Posyandu cadres have not been able to carry out activities regularly due to a lack of honorarium, only conducting activities at specific times, such as during planned supplementary feeding and vitamin programs. This information was obtained based on the information provided by PKH social assistants in Dewantara District, North Aceh Regency. Dinsos P3A North Aceh Regency, district and sub-district PKH coordinators, PKH social assistants, and group leaders actively participate in P2K2 for stunting management in Dewantara District. This affects the updating of stunting data in Dewantara District. PKH social assistants understand and are knowledgeable about stunting, evident from P2K2 with Health and Nutrition modules conducted monthly by PKH social assistants for PKH beneficiary groups in each village within Dewantara District. P2K2 is conducted by PKH social assistants related to stunting management. PKH social assistants from Dinsos P3A and other field implementers, such as district and sub-district coordinators, TKSK, group leaders, and PKH beneficiaries, participate in these activities. Posyandu cadres in the villages also understand stunting issues and are aware of the programs implemented by the central and local governments in stunting management in Dewantara District. This positively impacts the implementation of P2K2 as one of the programs of the Ministry of Social Affairs of the Republic of Indonesia to prevent stunting in villages across Indonesia through PKH social assistants. P2K2 is conducted to reduce stunting cases in Dewantara District, although it has not yet met the central government's target. Stunting management requires synergy among all stakeholders mandated by the state, as stunting management is a serious threat towards achieving the Indonesia Emas 2045. Regarding the synergy among stakeholders in stunting management in Dewantara District, North Aceh Regency, it has not been optimal. Synergy is only carried out during government programs like supplementary feeding, vitamin distribution, and socialization. Regular synergy per specific period has not been implemented, affecting the stunting data update negatively. This needs to be evaluated by policymakers at the district level, as the lack of optimal synergy negatively impacts future stunting management success. Action selection by Dinsos P3A North Aceh Regency, district and sub-district PKH coordinators, PKH social assistants, TKSK, Tagana, and Posyandu cadres has been carried out according to the activities set by the central and district governments. However, activities are still limited to handling existing cases, with minimal prevention programs. PKH beneficiaries and Posyandu cadres tend to be passive in prevention and only collect data if stunting is already indicated. This is the reason stunting management in Dewantara District has not met the target.

Barriers and Efforts in Tackling Stunting in Dewantara District The barriers faced by PKH social assistants in tackling stunting prevention in Dewantara can be classified into several types: first, the apathy of PKH beneficiaries towards healthy

living habits, maintaining environmental cleanliness, and supporting government stunting management programs, hindering stunting management. PKH social assistants cannot do much about this, as it requires the participation of village officials and traditional institutions to regularly invite PKH beneficiaries to clean the environment. Additionally, there needs to be program support from related offices like PUPR, Health Office, Agriculture Office, Education Office, and the Ministry of Religion Office. Second, some PKH beneficiaries do not understand the causes of stunting and what stunting is, hindering the work of Dinsos P3A, district and sub-district coordinators, TKSK, and PKH group leaders in villages to handle stunting. From the writer's observations in Dewantara District, PKH beneficiaries are not enthusiastic about socialization programs. They do not recognize stunting characteristics, so it is not considered a disease. Village officials need to help provide stunting information to the community. Third, the community misinterprets supplementary feeding programs at Posyandu as programs for the poor, leading to suboptimal implementation. This results from the community's lack of understanding about stunting and the high poverty rate. This becomes a task for the district government to reduce poverty rates in its area. Posyandu cadres need to be active in data collection and clearly inform the community in villages for these programs to run smoothly. Efforts made by PKH social assistants include: first, socializing with the community about stunting to educate them, as many people do not care about stunting. Second, PKH social assistants, TKSK, Tagana, Posyandu cadres, and PKH beneficiaries synergize with village officials, village midwives, and other stakeholders in data collection and stunting management programs to ensure valid and updated data. Third, optimizing Posyandu as a platform for preventing and detecting stunting in villages within Dewantara District. Fourth, Posyandu implements a data system for supplementary feeding programs to avoid community misunderstanding and ensure targeted implementation.

CONCLUSION

Based on the research results regarding the role of PKH social assistants in tackling stunting in Dewantara District, the following conclusions are drawn: PKH social assistants have fulfilled their role in tackling stunting by conducting Family Capability Improvement Meetings in Dewantara District. Dinsos P3A North Aceh Regency has a good perspective on stunting issues, addressing them well. Dinsos P3A, district and sub-district PKH coordinators, PKH beneficiaries, and other related sectors synergize in tackling stunting, but it has not been optimal. Synergy is only carried out during stunting management programs like supplementary feeding and vitamin distribution, not continuously, hindering stunting data updates in Dewantara District. The barriers include the community's limited knowledge about stunting, leading to indifference towards the programs implemented, and the misunderstanding that supplementary feeding programs are

for the poor, causing misimplementation. To overcome these barriers, Dewantara District PKH social assistants have conducted socialization about stunting for PKH beneficiaries through monthly Family Capability Improvement Meetings in each village with Health and Nutrition modules.

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- Sub-district Coordinator of the Family Hope Program in Dewantara
- PKH social assistants in Dewantara District

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