

PUBLIKASI ARTIKEL

**PERAN POSYANDU DALAM PENCEGAHAN *STUNTING*
ANAK USIA DINI DI DESA MANDAH KECAMATAN NATAR
LAMPUNG SELATAN**

Oleh:

DESTA ISLAMIATI

NPM. 2101041002



**Program Studi Pendidikan Islam Anak Usia Dini
Fakultas Tarbiyah dan Ilmu Keguruan**

**INSTITUT AGAMA ISLAM NEGERI (IAIN) METRO
1446 H/2025 M**

**PERAN POSYANDU DALAM PENCEGAHAN *STUNTING*
ANAK USIA DINI DI DESA MANDAH KECAMATAN NATAR
LAMPUNG SELATAN**

Diajukan untuk Memenuhi Tugas dan Memenuhi Sebagai Syarat Memperoleh
Gelar Sarjana Pendidikan (S.Pd.)

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**Program Studi Pendidikan Anak Usia Dini
Fakultas Tarbiyah dan Ilmu Keguruan**

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Yang berjudul : PERAN POSYANDU DALAM PENCEGAHAN STUNTING ANAK USIA DINI DI DESA MANDAH KECAMATAN NATAR LAMPUNG SELATAN

Sudah kami setuju dan dapat diajukan ke Fakultas Tarbiyah dan Ilmu Keguruan Institut Agama Islam Negeri Metro untuk dimunaqosyahkan.

Demikian harapan kami dan atas perhatiannya saya ucapkan terima kasih.

Wassalamu'alaikum Wr.Wb

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PERSETUJUAN

Judul : PERAN POSYANDU DALAM PENCEGAHAN STUNTING
ANAK USIA DINI DI DESA MANDAH KECAMATAN
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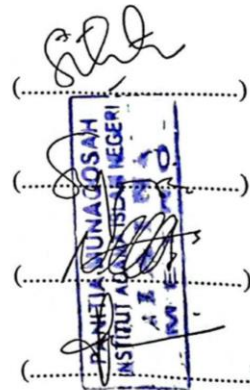
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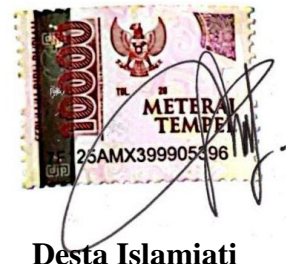
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Metro, 01 Juli 2025

Yang Menyatakan,



Desta Islamiati

NPM. 2101041002

KATA PENGANTAR

Alhamdulillah, segala puji serta ungkapan rasa syukur selalu tercurahkan atas Kehadirat Allah SWT yang telah melimpahkan rahmat dan Hidayah-Nya sehingga Peneliti dapat menyelesaikan penulisan skripsi ini sebagai syarat dalam Program Strata Satu (1) Fakultas Tarbiyah dan Ilmu Keguruan Institut Agama Islam Negeri Metro, guna memperoleh gelar sarjana Pendidikan (S.Pd.). Peneliti telah menerima banyak bantuan dari berbagai pihak. Oleh karena itu, peneliti mengucapkan banyak terima kasih kepada:

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2. Ibu Dr. Siti Annisah, M.Pd. sebagai Dosen Fakultas Tarbiyah dan Ilmu Keguruan IAIN Metro.
3. Ibu Dr. Zusy Aryanti, M.A. sebagai Ketua Program Studi Pendidikan Islam Anak Usia Dini.
4. Bapak Alimudin, M.Pd. sebagai Sekretaris Program Studi Pendidikan Islam Anak Usia Dini.
5. Ibu Siti Kurniasih, M.Pd. sebagai Dosen Pembimbing yang telah memberikan bimbingan dan arahan dalam menyelesaikan proposal ini.
6. Bapak/ibu Dosen Program Studi Pendidikan Islam Anak Usia Dini Fakultas Tarbiyah dan Ilmu Keguruan IAIN Metro.
7. Kepala Desa Mandah Kecamatan Natar Lampung Selatan.

Metro, 01 Juli 2025

Peneliti,



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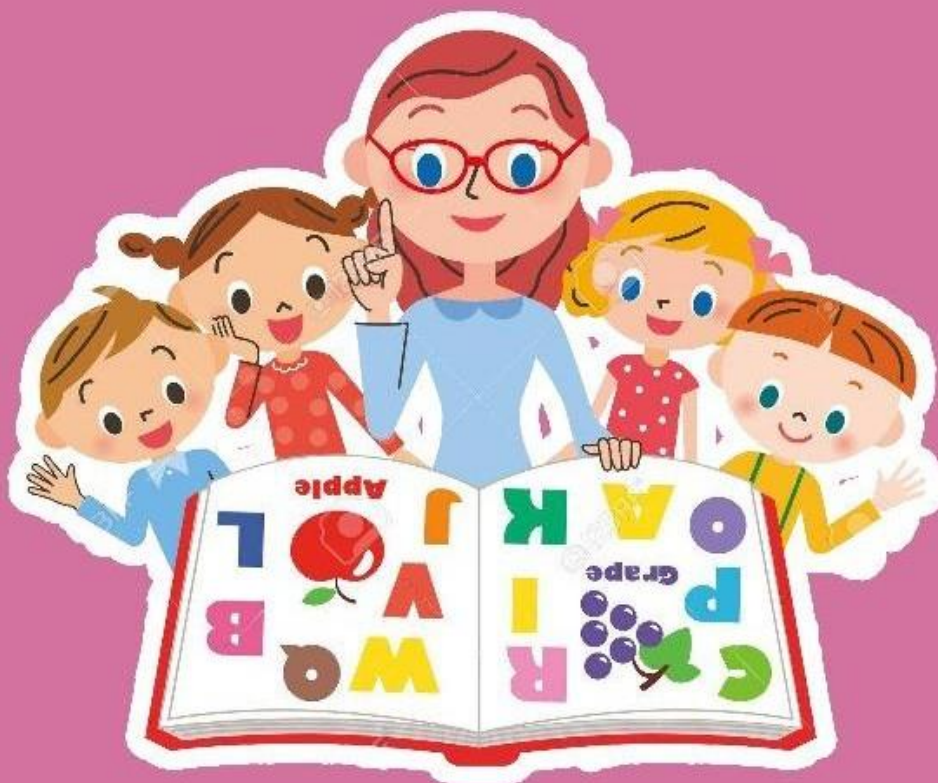
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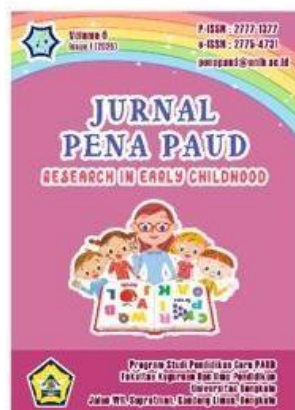
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Published: 10 June 2025

Articles

The Effectiveness of Interactive Learning Media in Improving Early Childhood Numeracy Skills

10.33369/jpp.v6i1.41166

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(1) Early Childhood Education Study Programme, Universitas Bengkulu, Bengkulu

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The role of Posyandu in the Prevention of Early Childhood Stunting

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The role of Posyandu in the Prevention of Early Childhood Stunting

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Abstrak

Posyandu memiliki peran penting dalam mengurangi angka stunting anak usia dini. Masalah *stunting* di Indonesia masih menjadi perhatian besar hingga saat ini. Anak yang mengalami stunting, mengalami hambatan perkembangan fisik dan mental akibat kekurangan gizi kronis, yang bermanifestasi sebagai perawakan pendek dan IQ yang terganggu. Penelitian ini bertujuan untuk mengetahui bagaimana peran posyandu dalam pencegahan stunting anak usia dini di Desa Mandah, Kecamatan Natar, Lampung Selatan. Metode observasi, wawancara, dan dokumentasi digunakan untuk mengumpulkan data dalam penelitian kualitatif deskriptif. Data diperoleh dari sumber primer dan sekunder. Kader, bidan desa, dan satu peserta Posyandu berperan sebagai informan. Teknik analisis data menggunakan model Miles dan Huberman, yaitu pengumpulan data, reduksi data, penyajian data, dan penarikan kesimpulan. Hasil penelitian menunjukkan bahwa Peran Posyandu dalam Pencegahan Stunting di Desa Mandah Kecamatan Natar Lampung Selatan dikatakan baik karena program yang dijalankan sesuai dengan standar jumlah keterampilan dasar kader, seperti Pemberian Makanan Tambahan (PMT), pemberian vitamin pendamping ASI, pemberian obat sirup nafsu makan untuk balita, pemberian Tablet Tambah Darah (TTD) untuk ibu hamil, imunisasi, pemantauan pertumbuhan balita, melakukan kunjungan rumah dan penyuluhan bahaya stunting.

Kata Kunci: *Anak Usia Dini, Peran Posyandu, Stunting*

Abstract

Posyandu plays a crucial role in reducing the incidence of early childhood stunting. The issue of stunting in Indonesia remains a significant concern today. Stunted children experience barriers to physical and mental development due to chronic malnutrition, which manifests as short stature and impaired IQ. This study aims to determine the role of posyandu in preventing early childhood stunting in Mandah Village, Natar District, South Lampung. Observation, interview, and documentation methods are used to collect data in descriptive qualitative research. Data were obtained from primary and secondary sources. Cadres, village midwives, and one Posyandu participant acted as informants. Data analysis techniques, utilizing Miles and Huberman models, encompass data collection, data reduction, data presentation, and concluding. The results showed that the role of Posyandu in the Prevention of Stunting in Mandah Village, Natar District, South Lampung is said to be good because the program is run per the standards of the number of fundamental skills of cadres, such as supplementary feeding (PMT), vitamin complementary feeding, giving appetite syrup for toddlers, giving tablets added Blood (TTD) for pregnant women, immunization, monitoring the growth of toddlers, home visits and stunting Hazard counseling.

Keywords: Early Childhood, The Role of Posyandu, Stunting

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PENDAHULUAN

The Asian Development Bank (ADB) reported that in 2020, approximately 149.2 million, or 22%, of toddlers worldwide were stunted. About 79 million stunted toddlers come from Southeast Asia. Southeast Asia ranked the second highest prevalence of stunted toddlers at 15.3 million or 27.4%, after South Asia at 54.3 million or 30.7% ([Amalina, 2023](#)). The prevalence of stunting toddlers under five years of age in Indonesia is the second highest in Southeast Asia with a high stunting prevalence category of 31.8% in the Southeast Asian region after Timor Leste which is 48.8%, while Laos has the third highest stunting rate of 30.2%, Cambodia occupies the fourth position with a stunting prevalence of 29.9%, while the Philippines is in second position with 28.7%, Singapore has the lowest stunting child prevalence rate, only 2.8% ([Dewi & Fuad, 2022](#)).

The stunting rate in Indonesia in 2022 was 21.6%, affecting approximately 4.7 million toddlers. In Lampung province, it is 15.2% of 520,923 toddlers. In South Lampung Regency, children who experienced stunting in 2022 are 9.9% or 1,508 toddlers ([Kemenkes, 2022](#)). In Indonesia in 2023, the stunting rate increased again to 15.8%, affecting 306,281 toddlers, specifically in Lampung Province, by 14.9% from 10,712 toddlers. In South Lampung Regency in 2023, it increased again to 10.3% from 1,327 toddler ([Kemenkes, 2023](#)).

The issue of stunting in Indonesia remains a significant concern today. The Stunting Action Program is a national priority initiative of the Indonesian government that aims to reduce the very high stunting rate ([Rahman, 2023](#)). A child who does not eat for an extended period can experience hindered physical and mental development. His body size decreased, and his IQ declined compared to children who grew up normally at the same age. In most cases, stunting is caused by the consumption of unhealthy foods. Malnutrition during the first 1,000 days of life is a significant contributor to stunting. This 1,000-day period begins from the period of gestation until the child is two years old.

The First Thousand Days of Life (HPK) period, which begins in the early stages of pregnancy and continues until the child is two years old, is crucial for monitoring the onset of growth abnormalities, such as short stature ([Hindratni Findy, 2021](#)). Thus, stunting occurs when a child's growth and development do not correspond to their age due to chronic malnutrition. Handling stunting to optimize 1,000 HPK, Posyandu is the correct container. This community-sourced health initiative makes it easier for people, especially mothers, babies, and toddlers, to access medical care and track their development.

Research from [Yasmine \(2024\)](#) explains that the role of Posyandu in stunting prevention is very significant and can be explained through several aspects, ranging from monitoring, education, implementation of activities, to collaboration with health parties. The second study from [Waisawati \(2024\)](#), Posyandu, as a public health service center, serves to provide education and counseling to the community about the importance of good nutrition

for children within a 1,000 HPK radius. The third study [Hariyono \(2023\)](#) Shows that by empowering cadres and optimizing the role of Posyandu, stunting prevention efforts can run more effectively, although challenges still exist in their implementation in the field. The fourth study from [Astikasari & Sumardiyon \(2023\)](#) Posyandu serves as a bridge between health services and the community, helping to increase awareness and knowledge about the importance of good nutrition in preventing stunting ([Eka & Hatta, 2023](#)).

The similarity among the four studies above lies in their analysis of the role of Posyandu through program services. In contrast, the differences lie in the focus of the discussion on the role of Posyandu as a Health Information Center and the variation in research locations. Some of the studies mentioned above indicate that the role of Posyandu brings about positive and significant changes ([Hariyono, 2023](#)). While some mention that there have not been many changes given by Posyandu cadres due to a lack of understanding of stunting, 1,000 HPK ([Astikasari & Sumardiyon, 2023](#)). Considering that the results of previous studies have not been consistent, the researchers conducted a Re-study of the role of Posyandu in the Prevention of early childhood stunting in Mandah Village, Natar District, South Lampung.

According to domestic Regulation Number 13 of 2024 concerning Integrated Service Posts, Article 3 Paragraph 2 Posyandu duties in the field of health are, Posyandu visits for mothers and infants and toddlers, health and nutrition counseling, early detection of health problem risks, referral to health units that have health problem risks, behavior monitoring, immunization, vitamin A, blood-added tablets. Article 11, namely, implementing services according to the field of Service, preparing the place for Posyandu implementation, collecting data and identifying Posyandu services by minimum service standards, communicating, providing information, and education by minimum service standards ([Minister of Home Affairs of the Republic of Indonesia, 2024](#)).

This study is aimed at the community, specifically parents throughout Indonesia, with a focus on Mandah Village, Natar District, South Lampung. Stunting, a condition in which a child's height is abnormal compared to their age due to chronic malnutrition, is a significant public health problem for several reasons. The long-term effects of these problems on children's physical and mental development, particularly their ability to learn, remain uncertain. Second, the high number of stunted children in Indonesia. This is a significant challenge for Public Health and the government to reduce the prevalence of stunting among children under five years old. Thus, this study was conducted to encourage people to pay more attention to the nutrients consumed by pregnant women, ensuring that their needs are met, and to foster an understanding of the first 1,000 Days of Life ([Lestari, 2023](#)).

The results of the initial observations conducted by researchers on May 5, 2024, at Posyandu Mandah Village, Natar District, South Lampung, showed that there were 5 Posyandus with a total of 383 early childhood and pregnant women. Researchers found eight

stunted children. According to village midwives and Posyandu cadres, the eight children were stunted due to economic factors, parenting factors such as nutrition during pregnancy, child diet factors, drug consumption factors during pregnancy, and sleep pattern factors. Thus, the role of Posyandu is necessary to help carry out various health-related activities. Based on the problems that researchers identified, this study aims to determine the role of posyandu in preventing early childhood stunting in Mandah Village, Natar District, South Lampung..

METHODOLOGY

Types of Research

"The role of Posyandu in the Prevention of Early Childhood Stunting in Mandah Village, Natar District, South Lampung" is the purpose of a qualitative approach with descriptive research.

Time and Place of Research

This study began in May 2024 and ended in December 2024. This research was conducted in five different Posyandu in Mandah village, namely Posyandu Melati, Posyandu Anggrek, Posyandu Kenanga, Posyandu Mawar, and Posyandu Tulip. Researchers consider the suitability of a location about existing problems when making decisions. South Lampung Regency has many villages and sub-districts, including Mandah Village. Eight cases of stunting were documented in Mandah village in May 2024.

Research Objectives

This study can achieve its goal by utilizing snowball sampling, a method of data collection in which the sample size starts with a small number and gradually increases. Once the researcher has identified potential informants in the field, they can begin to supplement the informants' knowledge by gathering information from other credible individuals. Pregnant women, infants, and toddlers are subjected to services and observations to assess the effectiveness of the implemented programs. Posyandu cadres, village midwives, and one participant of Posyandu Desa Mandah served as informants for this study.

Data Collection Techniques

Data collection methods include observation, interviews, and documentation. Secondary and primary Data are the main types of information used. Data collected indirectly through documents is referred to as secondary data, while data collected directly from the source is known as primary data ([Balaka, 2022](#)). Informants from primary data sources provide

the data used in the study; When researchers need additional information to complement the original data, they often turn to secondary data sources. Researchers employed a triangulation approach to verify the accuracy of the data across multiple data sources. Triangulation of data is a method of collecting information ([Abdussamad, 2021](#)).

Data Analysis Techniques

Methods of Data Analysis: The researchers in this study employed the Miles and Huberman models for qualitative data analysis. According to Miles and Huberman, qualitative data analysis is an ongoing process that involves constant interaction until the data reaches a saturation point. A data saturation point is said to have occurred if no new information or data has been collected. Data collection, data reduction, data presentation, and inference are some parts of this interactive model. ([Kaveeta Kojongian, 2022](#)).

RESULTS AND DISCUSSION

Results

Based on research conducted, the implementation of Posyandu in Mandah Village, Natar District, South Lampung, is once a month, usually on Saturdays or Sundays, starting from 07:30 WIB until completion.

Table 1. Posyandu Desa Mandah Data based on the number and schedule of services

Posyandu Name	Number Of Cadres	Babies and Toddlers	Pregnant Mom	Implementation Schedule
Posyandu Melati	5	36	-	Second week
Posyandu Anggrek	5	91	-	Second week
Posyandu Kenanga	5	145	-	Third week
Posyandu Mawar	5	62	2	Third week
Posyandu Tulip	5	55	-	Fourth week

The implementation of the Posyandu was assisted by one village midwife and 25 Posyandu cadres, with five cadres accompanying each Posyandu. The implementation is carried out every Saturday or Sunday, starting at 7:30 a.m. and continuing until completion. The total number of Posyandu participants was 391, recorded in the Posyandu cadre cohort book.

Table 2. Mandah Village Stunting Data Results for June 2024

No	Village Name	Child's Name	Age		BB	TB	Anthropometric Index		
			(Months)				Nutritional Status		
			M	F			(Kg)	(CM)	BB/U
1	Mandah	WTL		11	5,5	63	Very Less	Very Short	Low Nutrition
2		MNL	28		9	84	Very Less	Short	Poor Nutrition
3		YKA	47		11	88	Very Less	Very Short	Good Nutrition
4		MAR	15		7,8	72	Normal	Short	Good Nutrition
5		SD		15	6,7	68	Less	Very Short	Good Nutrition
6		MFL		20	8	73	Less	Very Short	Good Nutrition
7		AMP		44	11	92	Less	Short	Low Nutrition
8		EAS	31		10	89	Less	Normal	Poor Nutrition

Source: Nutrition Surveillance Results Of Branti Raya Health Center In 2024

Source: WHO (World Health Organization)

Table 3. Mandah Village Stunting Data Results for December 2024

No	Village Name	Child's Name	Age		BB	TB	Anthropometric Index		
			(Months)				Nutritional Status		
			M	M					
1	Mandah	WTL		17	5,7	63	Very Less	Very Short	Good Nutrition
2		MNL	34		9,5	84	Less	Short	Low Nutrition
3		YKA	53		12,5	90	Less	Very Short	Good Nutrition
4		MAR	21		8	76	Very Less	Very Short	Low Nutrition
5		SD		21	7,8	70	Normal	Very Short	Good Nutrition
6		MFL		26	10	74	Normal	Very Short	Good Nutrition
7		AMP		50	11,3	92	Kurang	Short	Good Nutrition
8		EAS	37		11,3	89	Normal	Short	Good Nutrition

Source: Nutrition Surveillance Results Of Branti Raya Health Center In 2024

Source: WHO (World Health Organization)

Based on the results of research conducted by researchers, in the village of Mandah,

there are as many as eight children who experience stunting. There are four boys and four girls. The results of stunting data measured through BB/U (weight by age), TB/U (height by age), and BB/TB (weight by age).



Pictures 1. Weight weighing for ages 0-2 years by cadres at Posyandu Melati



Pictures 2. Height measurement for ages 2-5 years by cadres at Posyandu Anggrek

Factors causing stunting in Mandah Village, Natar District, South Lampung because it is influenced by economic factors, parenting factors such as nutrition during pregnancy, child diet factors, drug consumption factors during pregnancy, and sleep pattern factors. Posyandu cadres have programs in stunting prevention efforts such as supplementary feeding (PMT) given by cadres for 3 consecutive months every day by bringing PMT to posyandu participants' homes, giving vitamin breast milk companion, giving appetite syrup for toddlers, giving blood-adding tablets (TTID) for pregnant women, immunization injections, routine in monitoring toddler growth such as weighing and measuring height, making home visits and providing stunting Hazard education counseling.

Discussion

The study's results stated that one village midwife and Posyandu cadres assisted in the implementation of Posyandu. Five of the 25 cadre members have a good knowledge and understanding of stunting, as they have attended training at the sub-district and district levels and have long been Posyandu cadres. Five of those cadre members can also master the skill groups. This is by the statement of [Muhawarman \(2024\)](#), that, there are basic skills Posyandu cadres are classified in three levels, namely, cadres Purwa (less) cadres are required to master basic skills on the management of Posyandu and infant & toddler services, cadres Madya (good) cadres are required to master basic skills on the management of Posyandu, infant & toddler services, and services of pregnant women & breastfeeding, main cadres (excellent) cadres are required to master the entire skill group. The number of basic skills of the cadres is 25, and it has been divided into 5 skill groups.

The local district health center requires cadres to attend training. The village head must provide them with knowledge and understanding on how to overcome the problem of stunting in the village. This aligns with the study's findings. [Wardah and Reynaldi \(2022\)](#) regarding the training of cadres held in Arongan village on the role of posyandu in dealing with stunting. The results show that cadres who have received training can increase their knowledge and experience in handling stunting problems. Thus, they have the experience and ability to handle stunting in Mandah Village, Natar District, South Lampung.

The results also mentioned that Posyandu is a Health Center for mothers and children in the village, such as Family Health, Community Health, and health education. Examples of family health services include providing care for pregnant women, assisting with childbirth, administering immunizations, and measuring and weighing children. Examples from public health are cadres providing family planning services, treating minor illnesses, and giving explanations about health and nutrition. Examples of health education include cadres providing information about reproductive health, preventing disease, and teaching individuals how to lead a healthy life. This aligns with the study's findings [Hafifah and Abidin \(2020\)](#) About the role of Posyandu in improving the quality of maternal and Child Health in Sukawening Village, Bogor regency. The results showed that the activities of health services provided regularly include family planning, immunization, pregnancy checks, weighing and measuring toddlers, nutrition consultations, and health consultations for maternal and Child Health. Thus, the role of Posyandu is vital for the community.

Factors causing stunting in Mandah Village, Natar District, South Lampung, are influenced by several factors, including economic factors, as noted in research [Aini \(2022\)](#) economic factors become one of the causes of stunting, as the economy determines the food supply that families need. Consequently, the economy also influences the nutritional level of the family and affects, among other things, the growth and development of the child. Parenting

factors, such as dietary factors during pregnancy, align with the research of [\(Nasriyah & Ediyono, 2023\)](#) Although proper nutrition is crucial for fetal growth and development in the womb, the nutritional needs in question are not in terms of food portions, but rather in terms of micronutrients and macronutrients. Dietary factors in children also affect the occurrence of stunting, in line with research by [Ikhtiar and Abbas \(2022\)](#) that the activity of feeding patterns is a factor causing stunting, eating patterns in children greatly affect growth and development, because in food contains many nutrients, vitamins, and minerals that return to toddler growth and development. Factors of drug consumption during pregnancy, pregnant women who are heavy smokers or chronic alcohol drinkers often give birth to low birth weight babies, stillbirths, and disabilities, and factors of sleep patterns that is to sleep the baby needed for 14-18 hours a day and toddler needs for 10-12 hours a day, both factors are in accordance with the results of Sinarmawati research [\(Sinarmawati, 2021\)](#). This is in line with Neglectful/Uninvolved Parenting developed by Maccoby & Martin in a study [\(Ye & Gao, 2024\)](#) explaining that negligent parenting is characterized by lack of attention and affection for children, lack of supervision and involvement in children's lives, parents lack to provide basic needs of Children: nutrition, health, education, and affection.

Posyandu organizers run several programs in Mandah Village, Natar District, South Lampung. Based on the research results of the program include supplementary feeding (PMT) given by cadres for three consecutive months every day by bringing PMT to Posyandu participants ' homes, complementary feeding vitamins, giving appetite syrup drugs for toddlers, administration of tablets add Blood (TTD) for pregnant women, immunization injections, routine in monitoring toddler growth such as weighing and measuring height, conduct home visits and provide educational counseling on the dangers of stunting.

Posyandu programs in Mandah Village are quite appropriate according to [Minister of Home Affairs of the Republic on Indonesia \(2024\)](#) about integrated service post, article 3 Paragraph 2 Posyandu duties in the field of health, namely, Posyandu visits for mothers and infants and toddlers, health and nutrition counseling, early detection of health problems, referral to a health unit that has a risk of health problems, behavioral monitoring, immunization, vitamin A, Tablets add Blood. Furthermore, this is also in line with the opinion [Kemenkes \(2023\)](#) that the Indonesian Health Survey emphasizes the importance of integrating Posyandu services in growth and development monitoring, counseling, and nutritional interventions as an effort to prevent stunting.

The mechanism implemented in the program is a system of 5 tables that collect data, check weight and length or height, take notes for documentation purposes, provide counseling based on the results of checks, and deliver health services such as immunization, vitamins, and other necessary provisions. After the posyandu activity was completed, the cadres and midwives coordinated with the puskesmas to address the obstacles they had faced

The results are in accordance with those delivered by [Kemenkes \(2023\)](#) the target posyandu activities for infants and toddlers include weighing, measuring height or head circumference, recording and posting the results of development and measurements on the KIA book, providing health services such as PMT and early detection and referral if needed, and providing counseling to the target as required. Support is also found in research by [Wardah and Reynaldi \(2022\)](#), which states that the implementation of a structured five-table system improves the effectiveness of Posyandu services in preventing stunting. [Astikasari and Sumardiyan \(2023\)](#) add that Posyandu cadres who understand the workflow and operational standards, such as the five-desk system, are better able to provide holistic and consistent services to mothers and children. In addition, according to [Muhawarman \(2024\)](#) this system is part of the basic skills that Posyandu cadres must master to strengthen community-based primary services.

Posyandu cadres face several obstacles in their stunting prevention efforts, including the facilities and infrastructure used by cadres. for instance, scales, both analog and digital, have become obsolete, leading to errors that hinder accurate weighing, which in turn slows down the implementation time of Posyandu activities. Of the five posts scattered in Mandah Village, Natar District, South Lampung, one is located at the posyandu cadre house, making the condition less conducive because there is no designated location for implementing Posyandu activities. The presence of Posyandu participants is also a challenge for the cadres, as several factors, such as the uncertain Posyandu schedule, which is carried out on Saturdays and Sundays, and parents' reluctance to attend due to other factors, pose obstacles.

The discussion of this study reveals that Posyandu plays a crucial role in preventing stunting in Mandah Village, Natar District, South Lampung. Posyandu has shown positive results, but challenges in program implementation persist, including economic factors and suboptimal parenting practices by parents, which can impact the nutritional status of children. Thus, it is essential to continue improving the role of Posyandu and collaborating with various related parties to adopt a holistic approach to addressing stunting issues. Collaboration between Posyandu cadres, midwives, and village governments in raising awareness about the importance of good nutrition must be strengthened so that stunting prevention efforts can run more effectively and sustainably.

CONCLUSION

Based on the results of research and discussion conducted by observation, interviews, and documentation, researchers can conclude that the role of Posyandu in Stunting Prevention in Mandah Village, Natar District, South Lampung is classified as a good role. It is known that 5 out of 25 Posyandu cadres in Mandah village have attended special training, are active, and are knowledgeable about stunting. Although not all cadres follow the training, but the program has been run reasonably well, namely, supplementary feeding (PMT), administration of ASL companion vitamins, administration of appetite syrup drugs for toddlers, giving tablets add Blood (TTID) for pregnant women, immunization, monitoring toddler growth, conducting home visits and counseling about the dangers of stunting.

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