



Engaging the local church to tackle stunting in Indonesia: a case study in Nias Island

Fotarisman Zaluchu^a

^a MPH, PhD, Lecturer, Universitas Sumatra Utara, Indonesia

Background

Stunting, the impaired growth and development that children experience from poor nutrition, repeated infection, and inadequate psychosocial stimulation occurs globally, including in Indonesia.^{1,2} Based on the latest data (2021), the percentage of stunting among under-five children in Indonesia is 24.4 percent, only down by 3.3 percent from the condition in 2019, even though the President of the Republic of Indonesia has issued instructions to reduce this figure to 14 percent by 2024.^{3,4} The magnitude of this stunting figure puts Indonesia as the country with the largest stunting burden in Southeast Asia and in the top five in the world.⁵

Stunting due to nutritional deficiencies and other factors is a recognized outcome of deficiencies in the vulnerable first 1000 days of a child's life. Local faith communities are being recognized as key resources of education and social protection for this stage of the life cycle.⁶ Stunting leads to poor outcomes in overall health, neurobehavioral and cognitive development, and educational and economic attainment later in life.⁷

In 2021, we, myself and a team from the University of North Sumatra, Indonesia, organized stunting education for pregnant women and mothers of children under five years in the Nias Islands, the outer islands of North Sumatra Province in Indonesia. These islands are inhabited by about 900,000 people; as many as 96 percent of the population identify as Christian (Protestant and Catholic) believers.⁸

Approaches and Techniques

We invited the main local church, *Banua Niha Keriso Protestan* (BNKP), to cooperate in the program. In the early stages of the activity, we invited the leadership of the BNKP Synod. To the church leaders, I explained that stunting could affect future church ministry. Those who suffer from stunting today are those who in the next 15-20 years may not be able to become leaders in the church. They may be inhibited from serving as *Satua Niha Keriso* (elders of the church), as pastors, or even teachers in Sunday schools. In addition, they may be restricted economically from becoming donors to the church.

In my explanation, I described how stunting could affect future health, learning, and income. Those who experience stunting may lack good educational quality because they are often sick and miss class time at school. They might also be less productive and unable to get good jobs. Later, when they could become servants in the church or active church members, it is the church that will suffer if the stunting problem is not prevented.

The prevention of stunting at this time by the church is critical, since the church has a very significant influence in the Nias Islands where the prevalence of stunting is the highest in North Sumatra Province—between 25 and 48 percent.³

The cooperation of local church leaders made it easy to organize activities. The BNKP then decided to help carry out this activity, asking local church leaders to support the activity by pregnant women and under-five mothers through women's organizations in the church. The BNKP church

assigned the Diakonia Commission at the Synod level to assist our activities.

First, educational activities always began with worship led by local pastors. The community was gathered by the church in the church building. The involvement of church leaders to invite the community was very important because, socio-culturally, the community still has a positive perception of the church. The implementation of activities generally ran very smoothly.

Second, our educational activities are in the Nias language. The rural areas of Nias Islands are underdeveloped. Even among the program participants, there are still those who have never been to school at all. Early marriage among

women is very high, a consequence of patriarchal tradition. However, in such a situation, as I was born as a Niasan, it is easy for me to explain the material in the participants local language.

Third, we provided materials and delivery techniques using a local approach. As a tribe with a different subculture compared to other tribes in Indonesia, we had to use material that was culturally easy to understand. For pictured teaching materials, we show typical Nias ornate, women's clothing (Figure 1). This cultural design appeals to participants and motivates them to see and listen.

Figure 1.



When we teach stunting to participants, we use dance or *maena*. *Maena* is a typical Nias dance that is sung at wedding parties. In the wedding context, *maena* is danced together with the members of the community who attend the party, both from the bridegroom's and the bride's side. The rhythm of *maena* is usually very pleasant, easy

to remember, and contains sentences containing moral messages.

We then composed the lyrics of the *maena* with stunting education messages using dance that is familiar to the participants. Five songs were created to be used during the training. When we asked participants to create *maena* songs

themselves, they did so. These dances were performed each time we offered the training, reflecting the knowledge they received from us. Routinely, meetings took place weekly for eight times.

At the end of a meeting, we distributed a calendar to the participants. The calendar

contained the selected training pictures (Figure 2) including the *maena* verses we taught them. Our hope was that participants would remember the lessons they had received.

Figure 2.



Reflection

The most important feature of these activities was the role of the church in addressing health problems. Before this, the BNKP church had never thought about the problem of stunting. At the same time, the government program was very limited because of budget constraints and because such programs were usually designed without considering a local approach. If left unsolved, stunting is very concerning especially because Christians are a majority in the Nias Islands.

The church’s willingness to shift slightly out of their “traditional norm” of spiritual and theological affairs was a big step. We were fortunate to have local church leaders who were willing to cooperate and get involved in the work of overcoming stunting. Our explanation of how the future of the church could be potentially affected was a very important early opening conversation to the church leaders.

In the future, churches around the world will face health problems. COVID-19 is a recent example. Some churches have responded by being

involved in vaccination activities. In different parts of the world, there are different patterns of disease. There are many problems that must be overcome that require the church. Even if it is unfamiliar territory, the church must be willing to care for the health of church members and show a willingness to heal as the Lord Jesus once did.

In the future, involving the church can have a wide-reaching impact. Every denomination has local churches. *BNKP* itself has more than 1000 branch churches in Nias Islands and in Indonesia. If well engaged, they can tackle stunting and other health problems. This involvement may well require cooperation with parties outside the church to plan and implement to have a real impact.

Our experience doing stunting education featured a local approach. Such communication channels can be developed by the church to teach God's word. We developed teaching materials using typical Nias ornaments, including *maena*, as an educational channel to increase education effectiveness. Local approaches promoted development of two-way communication between researchers and the subjects of education efforts.

There may be an impression that the church does not care about local circumstances where the church is located. This can be the consequence of traditional, one-way teaching, as in some ways of preaching. In fact, every church finds itself in a certain cultural context. The church needs to see the potential of the culture in which it is located. The church must hear the "voice" conveyed through the existing local culture, so the church can respond to it, even use it, for the purpose of service.

The church is challenged to be more creative for the benefit of the communities served in order to know God better and to be healthier and more prosperous. Instead of educational institutions being mere sources of scientific information, the church can be the greatest source of knowledge about people's social life. Every day, every week, and every year the church is close to society and serves the community. The local church is not born

by chance and is given the opportunity by God to solve local health problems within local contexts.

The visual representation of the activity can be accessed here: https://youtu.be/19BG_9XARoc

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Correspondence: Dr. Fotarisman Zaluchu, Indonesia fotarisman.zaluchu@usu.ac.id

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