

## The Effectiveness of The Culture-Based Anti-Stunting Education Package on Family Behavioral Changes in Stunting Prevention

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### ABSTRACT

Stunting remains a pressing global health concern, as evidenced by the prevalence of stunting in Indonesia. The Pasuruan Regency Government continues its efforts to reduce the stunting rate. Coastal areas are characterized by a relatively high incidence of stunting, which stands at 22.8%. The urgency of this research lies in the need for a change in family behavior toward stunting prevention through education optimization in coastal areas. Stunting prevention education within the family can be summarized into the "Anti-Stunting Education Package", consisting of education on nutritious maternal food intake starting from 1000 days before childbirth, exclusive breastfeeding, adolescent health, and access to clean water. This research aims to demonstrate the effectiveness of anti-stunting education package in changing family behavior to prevent stunting in coastal areas. This was pre-experimental study with a pretest-posttest design approach. The research is conducted in coastal areas with a sample size of 30 stunting families selected through purposive sampling. The results of the research indicate that the Anti-Stunting Education Package is highly effective in improving knowledge, attitudes, and behavioral changes among mothers in supporting stunting prevention in coastal areas. This study falls under TKT 3, which demonstrates the analytical concept and experimental functions, providing stunting education through booklets with a focus on local culture to prevent stunting in coastal areas. The outcomes of this research serve as an innovation and technological development for maritime community well-being.

**Keyword:** Stunting, Education, Coastal Area

### ABSTRAK

Stunting merupakan masalah kesehatan di dunia yang terus bergulir hingga saat ini, terbukti dari prevalensi stunting di Indonesia masih 21,6% pada tahun 2022. Pemerintah Kabupaten Pasuruan terus berupaya menurunkan angka stunting. Pesisir merupakan wilayah yang angka kejadian stunting masih relatif tinggi yaitu 22,8%. Urgensi dalam penelitian ini adalah perlu upaya perubahan perilaku keluarga akan pencegahan stunting melalui edukasi yang lebih optimal di wilayah pesisir. Edukasi pencegahan stunting di lingkungan keluarga dapat dirangkum menjadi "Paket Edukasi Anti Stunting" yang terdiri dari edukasi tentang asupan makanan bergizi ibu hamil yaitu 1000 HPL, ASI eksklusif, kesehatan remaja serta penyediaan air bersih. Tujuan penelitian ini untuk membuktikan efektifitas Paket Edukasi Anti Stunting terhadap perubahan perilaku keluarga dalam pencegahan stunting di wilayah pesisir. Metode penelitian menggunakan Pre-Eksperiment dengan desain menggunakan pretest-posttest design. Penelitian ini akan melakukan observasi dua kali yaitu sebelum (pretest) dan sesudah (posttest), penelitian dilakukan di wilayah Pesisir jumlah sampel 30 keluarga stunting dengan menggunakan teknik purposive sampling. Hasil penelitian menunjukkan "Paket edukasi Anti Stunting" sangat efektif dalam meningkatkan pengetahuan, sikap dan perubahan perilaku ibu dalam mendukung pencegahan stunting di wilayah pesisir. Penelitian ini termasuk TKT 3 pembuktian konsep fungsi secara analitis dan eksperimental yaitu memberikan edukasi tentang stunting dengan menggunakan media berbentuk booklet dengan berpedoman pada budaya setempat untuk mencegah stunting di wilayah pesisir. Hasil penelitian ini sebagai inovasi dan pengembangan teknologi kemaritiman untuk peningkatan kesejahteraan masyarakat maritim.

**Kata Kunci:** Stunting, Edukasi, Pesisir

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## Introduction:

Stunting continues to be a pressing global health concern, as evidenced by its worldwide prevalence, reaching 22.0% or affecting 149.2 million children under the age of five as of the year 2021 (UNICEF/WHO/WORLD BANK, 2021). According to data from the Basic Health Research Institutes (Riskesdas) in 2018, the national prevalence of stunting stood at 30.8%. Stunting is deemed a severe public health issue when its prevalence falls within the range of 30-39% (Kemenkes RI, 2018). The 2021 Study on Nutritional Status in Indonesia (SSGI) reported a stunting prevalence of 23.5% among toddlers in East Java Province, ranking East Java fifth in national stunting cases (Laksono & Megatsari, 2020).

Coastal areas in Pasuruan Regency have been specifically targeted for stunting reduction efforts. The high prevalence of stunting in coastal areas is due to low public knowledge about stunting, low implementation of clean and healthy living behaviors, and low socio-economic conditions of coastal communities. Despite achieving a stunting rate of 18.6% in 2022, the Pasuruan Regency Government remains committed to further reducing the incidence of stunting (Handayani et al., 2022). This prevalence is influenced by the number of toddlers in each village, with nearly all coastal villages still reporting relatively high stunting rates. Coastal areas continue to be focal points for stunting reduction endeavors (Handayani, Dwining, Kusuma E, Puspitasari H, nastiti, 2022). According to Tanzil & Hafriani 2021, risk factors for stunting among toddlers aged 24-59 months in coastal areas include inadequate energy and protein intake, limited maternal knowledge, low maternal education, and low family income (Tanzil & Hafriani, 2021). Toddlers affected by stunting not only suffer from physical growth disturbances but also face the risks of decreased intellectual abilities, hindered motor skills, reduced productivity, and an increased susceptibility to degenerative diseases in the future (Handayani et al., 2022).

The government has implemented various initiatives to reduce stunting in

Pasuruan Regency, including the "Kasih Bersanding Mesra" program (Families United Against Stunting Toward Prosperous Families). However, these efforts have primarily focused on meeting the needs of families with stunted children without effectively raising awareness and influencing behavior change. Interviews with parents of stunted children have revealed that many still lack understanding of child-rearing practices, proper nutrition, environmental sanitation, maternal nutrition, and childhood infection prevention. The lack of behavioral change within families to reduce stunting is a direct result of their limited knowledge (Rahmawati et al., 2020). Preventing and addressing stunting through a family-based approach is a suitable program, considering that families constitute the closest social unit (Handayan et al., 2022). To enhance family awareness and induce behavioral changes for stunting prevention, comprehensive education is required. Stunting prevention education within the family is encapsulated in the Culture-Based Anti-Stunting Education Package.

Coastal areas are the focus of agro-nursing care, encompassing agricultural aspects. The chosen program for stunting reduction involves education using the Culture-Based Anti-Stunting Education Package (Handayani et al., 2022). This approach aims to increase knowledge and awareness within the community, with the hope of instigating behavioral changes to reduce stunting in coastal regions. The research results are expected to contribute innovative and appropriate program interventions for addressing health issues in coastal areas, thereby swiftly reducing the prevalence of stunting.

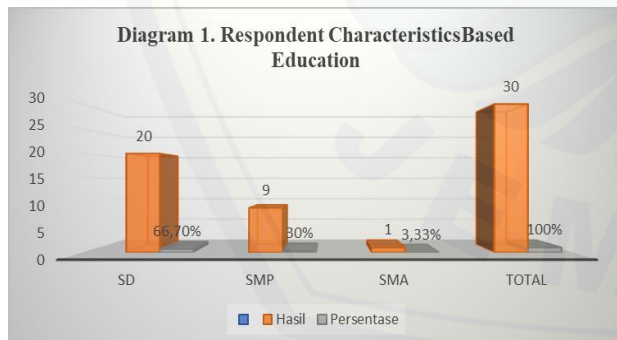
## Methods:

The research method employed in this study is a pre-experiment pretest-posttest design. This research was conducted in the Coastal areas of Pasuruan Regency (Kraton, Rejoso, and Nguling subdistricts) with a sample size of 30 families with stunted toddlers, selected through purposive sampling. There are two variables in this study: the independent

variable and the dependent variable. The independent variable is the cultural-based using a booklet entitled Anti-Stunting Education Package intervention, in the anti-stunting education package booklet, it contains knowledge about stunting, causes of stunting, characteristics and impacts of stunting, efforts to prevent stunting, as well as tips for preventing stunting, efforts to raise good children, efforts to provide the best food for babies and children, stimulation of baby and child development and about healthy teenagers. While the dependent variable is family behavioral change, consisting of three aspects: knowledge, attitude, and practices in stunting prevention. This research has been carried out ethically in the Health Research Ethics Committee University of Jember Faculty of Nursing with description of ethical approval No. 232/UN25.1.14/KEPK/2023. The data will be analyzed using a paired t-test with a significance level of  $p < 0.005$ , assisted by the statistical software SPSS 22.

**Results:**

The results of the effectiveness of culturally-based anti-stunting education on 30 families with toddlers in coastal areas are presented in the following diagram:



Based on Diagram 1, the data clearly indicates that several respondent characteristics include education levels, where the majority, 20 individuals (66.7%), have completed elementary school (SD), nearly half of them, 9 individuals (30%), have completed junior high school (SMP), and 3.33% have completed senior high school (SMA).

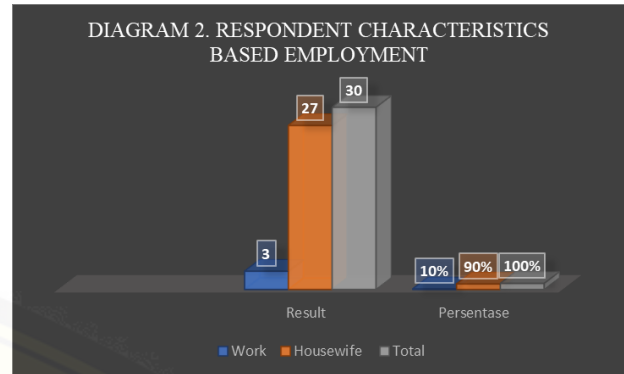
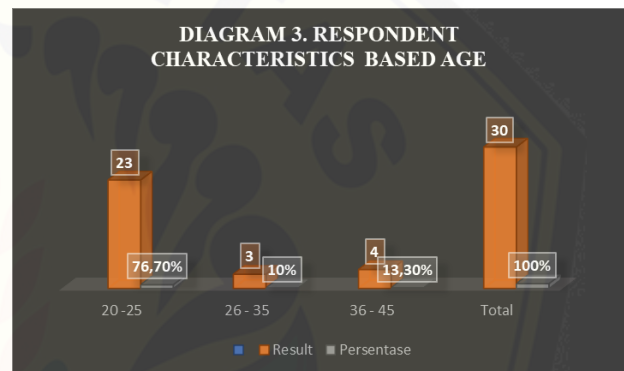


Diagram 2 in terms of occupation, the majority of respondents, 27 individuals (90%), are housewives, while only 3 individuals (10%) work as traders.



Regarding age, the majority of respondents, 23 individuals (76.7%), fall within the age range of 20 - 25 years, while a small portion, 3 respondents (10%), are aged between 26 and 35 years, and 4 individuals (13.3%) are aged between 36 and 45 years.

**Table 1.** Changes in Respondents Behavior (Knowledge, Attitude, and Practices in Stunting Prevention) Before and After the Intervention.

Variable	Result	
	n	%
<b>Before Intervention</b>		
<b>Knowledge</b>		
Good	5	16,70%
Average	11	36,70%
Poor	14	46,70%
<b>Attitude</b>		
Supportive	17	56,70%
Not Supportive	13	43,30%

Variable	Result	
	n	%
<b>Behavior</b>		
Not Doing	19	63,30%
Doing	11	36,70%
<b>Total</b>	<b>30</b>	<b>100%</b>
<b>After Intervention</b>		
<b>Knowledge</b>		
Good	20	66,70%
Average	10	33,30%
Poor	0	0
<b>Attitude</b>		
Supportive	24	80%
Not Supportive	6	20%
<b>Behavior</b>		
Not Doing	6	20%
Doing	24	80%
<b>Total</b>	<b>30</b>	<b>100%</b>

Based on Table 4.2, before the intervention, it is shown that the majority, 14 respondents (46.7%), had insufficient knowledge. After the intervention, there were no respondents with insufficient knowledge. Those with sufficient knowledge accounted for nearly half, with 11 respondents (36.7%), and after the intervention, there were 10 respondents (33.3%) with sufficient knowledge. Respondents with good knowledge were only a small portion, namely 5 individuals (16.7%), but after the intervention, the majority of respondents had good knowledge, which was 20 respondents (66.7%).

The respondents attitudes before the intervention were mostly supportive, with 17 respondents (56.7%), while after the intervention, the majority were supportive, with 24 respondents (80%). Those with unsupportive attitudes before the intervention accounted for nearly half, with 13 respondents (43.3%), whereas after the intervention, a small portion, 6 respondents (20%), had unsupportive attitudes.

The change in respondents behavior before the intervention indicated that the majority, 19 (63.3%) respondents, did not make any changes, whereas after the intervention, a small portion, 6 respondents (20%), did not make any changes in behavior. Respondents

who made changes in behavior before the intervention were nearly half, with 11 respondents (36.7%), while after the intervention, almost all respondents made changes in behavior, totaling 24 respondents (80%).

**Table 2.** Results of Family Behavior Change Analysis (Knowledge Score, Attitude, Behavior before and after Stunting Education Intervention Package)

Variable	T Value
<b>Knowledge</b>	
Mean	48.50
Standard Deviation	3.122
P Value	0.000
<b>Attitude</b>	
Sig 2-sided value	.001 <sup>a</sup>
<b>Behavior</b>	
Sig 2-sided value	.000 <sup>a</sup>

Based on the analysis results above, it shows that the respondents average knowledge score is 48.5 with a standard deviation of 3.122, and the significance level is ( $P < 0.000$ ). The results of behavior change in attitudes and behaviors related to stunting prevention before and after the intervention indicate a significant difference ( $P < 0.000$ ) in both attitude and behavior aspects before and after the intervention, demonstrating a significant difference ( $P < 0.01$ ).

### Discussion:

The results of the study showed that the anti-stunting education that was carried out was able to increase the knowledge of respondents, as evidenced by the increase in respondents' knowledge from 16.7% with poor knowledge to 66.7% with good knowledge after the anti-stunting education was carried out. The increase in respondents' knowledge after being given an intervention showed that the education provided using an anti-stunting education booklet was acceptable to respondents. This is in accordance with the results of Ringgi's study which stated that "there is an influence of nutritional education for mothers in the feeding process, which has an impact on reducing the

percentage of stunted toddlers by 50% from previous years" (Ringgi & Keuytumu, 2022). In addition, it was also conveyed that providing education to mothers is also one of Unicef Indonesia's recommendations to eradicate the problem of stunting in Indonesia. Education is also influenced by a person's level of education, the higher the education, the easier it is to receive information (Sugiyanto & Sumarlan, 2021). This nutritional education can be carried out individually or in groups, especially based on local culture (local wisdom). Increasing a person's knowledge can provide experience of new information that has been learned. Knowledge is obtained from the learning process through the five senses, especially the eyes and ears, so that a person tends to make behavioral changes (Handayan et al., 2022). Knowledge is an important and fundamental thing in shaping a person's attitude, by having high knowledge it will increase a person's ability to think effectively, directed, easily absorb information and advice (Kusuma et al., 2023). Several factors that influence the education process are the method, material or message, the speaker who does it, and the tools or media used to convey the message (Ringgi & Keuytumu, 2022). Stunting prevention education cannot be separated from interesting methods, one of which is the brainstorming method so that the messages conveyed can be more interesting and understood, so that the target can adopt positive behavior .

The results of the study on the aspect of attitude change showed that before education, 56.7% of attitudes were supportive and after education, there was an increase to 80% of respondents' attitudes were supportive. This study is in accordance with the results of research conducted by Widiyanti and Khalik which stated that there was an increase in knowledge and attitudes after intervention was given to families, in this case mothers, regarding stunting prevention through education (Rita Kirana, Aprianti, 2022). Stunting prevention is influenced by knowledge, attitudes, culture, and parenting patterns (Handayani et al., 2022). In terms of increasing knowledge, researchers have

provided education to respondents by providing educational materials packaged in a booklet in the form of an Anti-Stunting Education Package booklet that uses an approach method, lectures, discussions and demonstrations with respondents and re-explain the material they have received to other participants, so that it effectively increases involvement and absorption of knowledge to be maximized. The material is packaged in the form of a booklet and delivered together with cultural activities, this is in accordance with what was conveyed by Nootoadmojo about Health promotion is an effort to improve community capabilities through learning from, by, for, and with the community, which can develop community-based activities according to local socio-cultural conditions (Nabilah et al., 2022). Education can make it easier for respondents to remember what has been discussed together, thereby motivating families in preventing stunting through increased knowledge and changes in attitudes and behavior (Arsyati, 2019). Families of toddlers can learn about stunting prevention after receiving education on anti-stunting education packages including: fulfillment of nutrition for pregnant women, visits to pregnant women at least 6 times, exclusive breastfeeding, followed by MP-ASI according to WHO guidelines, implementation of PHBS, visits to integrated health posts, to get vitamin A and immunization for children, children's play environment, selection of nutritious foods, parenting patterns by meeting balanced nutrition (Akombi et al., 2017). Increasing a person's knowledge and attitude is also supported by a person's motivation to seek information to improve their health (Januarti & Hidayathillah, 2020).

The results of the study showed an increase in behavioral changes in respondents, namely before the intervention 36.7% made behavioral changes and 80% made behavioral changes after the intervention. This behavioral change shows that respondents understand what is conveyed and can apply it. According to the concept of behavior (Hendri, 2019) one of the things that influences a person's health is a person's knowledge and attitude. Knowledge

certainly plays an important role because by having good knowledge about parenting patterns, mothers can decide what attitudes can be taken to overcome health problems, especially reducing the risk of stunting in toddlers (Badawi et al., 2023). This study also shows that along with increasing knowledge of stunting, it can improve family attitudes in preventing stunting so that mothers and families change their behavior in preventing stunting. As also stated in Umami's research, 2023, increasing a person's knowledge and attitude will change a person's behavior to be better and more correct (Umami et al., 2023). This can be seen, after being given education on anti-stunting education packages, mothers showed an increase in attitudes and changes in behavior in providing exclusive breastfeeding, bringing children to the integrated health post for complete immunization, consuming nutritious food and blood tablets during pregnancy, giving children deworming medicine, checking children's growth and development at the integrated health post, maintaining environmental sanitation and cleanliness, and providing varied foods for children. Coastal areas have great potential in obtaining sea fish, because most of the coastal areas are waters or seas and the community has a livelihood looking for fish. When viewed from a cultural perspective, coastal communities also has a unique culture, for example, skilot which is a cultural activity of playing sky which depicts people looking for fish or shrimp and shellfish. This cultural activity is a community activity where they gather together and bring typical food in the coastal area. Activities like this are very helpful for the community in efforts to implement education by utilizing these activities to support the fulfillment of family nutrition with processed sea fish foods that contain protein. Providing education to prevent stunting using booklets is essentially an activity or effort to convey messages to the community, groups, or individuals with the hope that they can gain better knowledge so that they can influence attitudes and behavioral changes (R.A. Helda Puspitasari, 2020).

The results of the analysis test showed that the average respondent's knowledge was 48.5 with a standard deviation of 3,122. with a significance level ( $P < 0.000$ ). The results of behavioral changes from attitudes and behavior in preventing stunting before and after the intervention showed a significant difference ( $P < 0.000$ ) in the aspects of attitudes and behavior before and after the intervention showed a significant difference ( $P < 0.01$ ). These results indicate that the "Anti-Stunting Education Package" is very effective in increasing knowledge, attitudes and behavioral changes in mothers in supporting stunting prevention in coastal areas. The education package packaged in the form of an Anti-Stunting booklet can be studied by all groups and is easy to understand. Booklets are a medium for conveying messages in the form of books, either in the form of writing or pictures. According to Roymond S. Simamora (2016), booklets are small (half quarto) and thin books, no more than 30 double-sided sheets containing writing and pictures (Syarfaini et al., 2024).

The limitation of this study is when the study adjusts the cultural activities that exist in the community because public awareness is still lacking so that they have to wait for cultural activities that have been scheduled in the community and in conjunction with local cultural activities. It is recommended that further researchers focus more on the application of the provision of nutrition based on local coastal products in handling the incidence of stunting.

### **Conclusion:**

Based on the research results, it can be concluded that education using a culture-based anti-stunting education package has a significant impact on the transformation of knowledge, attitudes, and behavior of coastal communities. This education is delivered through the use of an anti-stunting education package. The results of the statistical analysis demonstrate a statistically significant difference between the pre-education and post-education phases, with a significance level of  $P < 0.01$ .

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