Facilitation of Non-Formal Education for Families at Risk of Stunting Through Mobilization of Family Planning Instructors

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Abstract

Stunting is the government's main concern issue at the moment. The impact of stunting is not only related to health factors, both physical and cognitive, but can result in multidimensional problems. Various efforts have been made by the current government to anticipate the real threat of stunting which is still quite high in Indonesia. One effort that can be made is to optimize the role of family planning instructors as educators in non-formal family education, namely by facilitating non-formal education for families at risk of stunting through the mobilization of family planning instructors. This article is the result of descriptive analysis based on a qualitative approach. The research results show that the mobilization of family planning instructors to increase maternal knowledge and good parenting patterns, as well as health education through IEC about stunting, for mothers from families at risk of stunting, is very important to reduce the prevalence of stunting in toddlers, especially in villages where stunting is located. Optimizing the role of family planning instructors so that they are effective is implemented by making instructors as educators, mentors/companions, motivators and communicators for families at risk of stunting. On the other hand, so that family planning instructors can reach remote rural areas and provide informal education directly to families at risk of stunting, this can be done through changes to the Mobile Information Units at BKKBN Representatives.

Keywords: Facilitation, Non-Formal Education, Family, Stunting, Counselor, Family Planning.

Introduction

Indonesia's centenary year in 2045 is getting closer and only 22 years remain. At that time, the hope of achieving ideal conditions for the Vision of Golden Indonesia to become a more advanced, sovereign, just and prosperous country could be realized. The government continues to strive for optimism in achieving these ideals through the realization of development in various aspects of life. This is in accordance with the mandate of Presidential Regulation Number 18 of 2020 concerning the National Medium Term Development Plan (RPJMN) for 2020-2024.

The 2020-2024 RPJMN as a starting point towards a Golden Indonesia, mandates 4 (four) main pillars of development in realizing Indonesia's Vision 2045, namely: Human Development and Mastery of Science and Technology, Sustainable Economic Development, Equitable Development, and Strengthening National Resilience and Governance. These four pillars, especially the first pillar, show that Indonesia's development is based on inclusive management of Indonesia's Human Resources (HR) by making them both objects and subjects in national development.

Realizing an Indonesian nation that is independent, advanced, just and prosperous requires accelerated development in various fields. Not only does the acceleration of development in the economic sector and physical development be based on equality in each region, but it also needs to be supported by quality and competitive human resources. This is in line with the 5 (five) main directives of the President as a strategy in implementing the Nawacita mission, including building hardworking human resources who are dynamic, productive, skilled, mastering science and technology supported by industrial cooperation and global talent.

The performance of the Government of the Republic of Indonesia under the leadership of President Joko Widodo in accelerating human resource development has brought about major changes. Over the past few years, the government has allocated significant resources to implement several programs to improve education, health and social protection. These efforts have produced positive results, which are marked by the achievement of the Human Development Index (HDI), which continues to increase. Over a period of 7 years (2016-2022) Indonesia's HDI increased by 3.89% or the equivalent of 2.73 points.

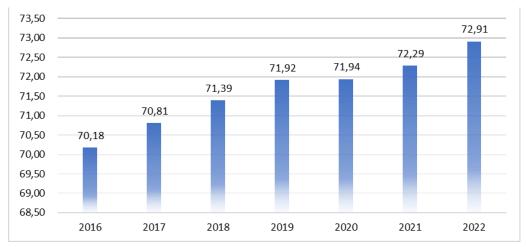


Figure 1. Indonesian Human Development Index 2016-2022

Source: BPS (2022)

Based on data from the Central Statistics Agency (2022), Indonesia's HDI in 2022 has reached 72.91. This condition represents that Indonesia's human development has entered the high category, both in terms of educational standards, health status and the quality of the family economy. Even though Indonesia's HDI achievement value has progressed over the last 7 years, the government is still required to be able to meet the HDI target that has been set at 75.54 in 2024. This is not an easy task, considering the dynamics of various issues, both local, national and global. which is increasingly complex and threatens the sustainability of national development, especially human development. One of them is the threat of stunting which is currently the government's main concern issue. Which has been proven to have the potential to hamper Indonesia's human development achievements in realizing the Golden Indonesia Vision 2045.

The real threat of stunting in Indonesia is proven by the stunting prevalence rate which is still relatively high. Based on the results of the Indonesian Nutrition Status Survey (SSGI) of the Ministry of Health (Kemenkes) in 2022, the national stunting prevalence rate reached 21.6%. This means that 1 in 5 toddlers in Indonesia suffer from stunting. The stunting condition is counter-productive to the demographic bonus that Indonesia is currently experiencing until 2035. A time when the productive generation will outnumber the non-productive. If this productive generation is not of good quality due to stunting, then it will not be benefits that will be obtained from the demographic bonus but disaster.

The impact of stunting is not only related to health factors, both physical and cognitive, but can result in multidimensional problems. Based on data processed from the World Bank Investing in Early Years Brief report, 2016, stunting can cause economic growth and labor market productivity to be hampered and exacerbate inequality. The research results of Suryana and Azis (2023) show that the incidence of stunting among toddlers in Indonesia in 2021 is 24.4%, with a potential economic loss of IDR. 15,062-67,780 billion from the total value of Indonesia's

Gross Domestic Product (GDP) in 2021 of IDR 16,970.8 trillion.

Banten Province has also not been able to escape the threat of stunting. The results of the Ministry of Health's 2022 Indonesian Nutrition Status Survey (SSGI) show that the stunting prevalence rate in Banten Province is still relatively high, reaching 20%. This high value makes Banten Province one of the 12 priority provinces for accelerating stunting reduction. Not only that, the results of family data collection carried out by the National Population and Family Planning Agency (BKKBN) in 2022, it was recorded that 532,580 families in Banten Province had the status of families at risk of stunting with a high potential of giving birth to stunted children.

Stunting sufferers are not only caused by direct factors, either repeated infections or lack of nutritional intake in children. However, it can also be influenced by indirect causal factors, such as the mother's level of knowledge about parenting styles. According to Ramdhani, et al (2020), the higher a mother's knowledge about stunting and health, the better her feeding will be, whereas mothers with low knowledge often feed their children without meeting their nutritional needs. The same thing was conveyed by Trihono et al. (2015), educational factors and economic status influence the occurrence of stunting. The higher the education and the more prosperous the family, the lower the prevalence of stunting. The research results of Atamou et al. (2023), states that good maternal knowledge makes a smaller contribution of 6.7% to the prevalence of stunting, compared to poor maternal knowledge. Which is higher, namely 27.5% and dominates the incidence of stunting in children under five years of age.

Various previous studies have proven that the mother's level of knowledge plays an important role in preventing the emergence of stunting cases. This condition is still in contrast to the dissemination of stunting information in Banten Province which has not been able to reach it evenly and comprehensively, especially for people living in villages. In fact, there are 386,447 families at risk of stunting (KRS) or the equivalent of 72.56% of the total families at risk of stunting in rural areas. Various obstacles, such as the low level of education of mothers in villages, the lack of teaching staff, facilities and infrastructure, as well as distance and difficult terrain, are factors that hinder mothers' understanding of good parenting.

Increasing understanding of stunting for mothers in rural areas requires adaptive Communication, Information and Education (KIE) service mechanisms. According to Atamou et al. (2023), mothers' knowledge needs to be increased by disseminating information related to stunting through formal and non-formal education and teaching good parenting patterns to reduce the prevalence of stunting in children under five years of age in stunting locus villages. One way to do this is by optimizing the role of family planning instructors as educators in non-formal family education. Therefore, it is necessary to facilitate non-formal education for families at risk of stunting through the mobilization of family planning instructors, so that it is hoped that it will be able to increase understanding of families at risk of stunting effectively and efficiently, both in terms of time and range of IEC exposure for families at risk of stunting.

Method

This scientific article is the result of descriptive analysis based on qualitative methods. Where researchers collect secondary data originating from literature studies, both government documents and previous research articles. Then the data is compiled, processed and analyzed to provide an interpretation of the existing problem. According to I Made Winartha (2006), the qualitative descriptive analysis method is analyzing, describing and summarizing various conditions and situations from various data collected in the form of interviews or observations regarding the problems being researched that occur in the field. In this way, it is hoped that it

will be able to describe the objectives of this research.

Results and Discussion

Regulatory Basis

The problem of stunting requires the government to be serious and alert in dealing with it. In 2020 the government will focus on stunting prevention as a National Strategic Priority Project (Major Project). In 2021, the government will increase efforts to accelerate stunting management by issuing Presidential Regulation Number 72 of 2021 concerning the Acceleration of Stunting Reduction. Where it was ordered to form a national Stunting Reduction Acceleration Team (TPPS) from the central, regional to village/sub-district levels. At the same time appointing the chief executive of the National TPPS, namely the Head of the National Population and Family Planning Agency (BKKBN).

The President's mandate to the BKKBN as head of implementing the acceleration of stunting reduction, was followed up with the preparation of a national strategy in order to meet the stunting prevalence target set by the President at 14% in 2024. This is stated in BKKBN Regulation Number 12 of 2021 concerning the National Action Plan for the Acceleration of Reducing Rates Stunting Indonesia (RAN PASTI) 2021-2024.

RAN PASTI is an operational technical derivative of Presidential Regulation Number 72 of 2021, which describes in detail the performance indicators that must be met at each level of the TPPS. There are 5 Pillars for Accelerating Stunting Reduction which include 91 performance indicators. Where BKKBN is not only given the mandate to prepare the action plan, but is also obliged to be directly responsible for meeting targets based on the following performance indicators:

- 1. Specific Intervention through:
 - a. Postpartum Family Planning (KB) Services;
 - b. Reducing unwanted pregnancies;
 - c. Prospective couples of childbearing age (PUS) who receive a health examination as part of marriage services;
 - d. Families at risk of stunting who receive assistance.
- 2. Strengthening the Integrated Monitoring and Evaluation System for the Acceleration of Stunting Reduction through the implementation of Monitoring and Evaluation of the National Strategy for the Acceleration of Stunting Reduction.
- 3. Availability of a screening and counseling system for prospective couples of childbearing age (PUS) ready for marriage.
- 4. Strengthening research and innovation as well as developing the use of research and innovation results through the percentage of districts/cities that receive assistance for the Acceleration of Stunting Reduction through the Tri Dharma of higher education.

The existence of new legal products as an explanation of changes in government political policies in the concept of national development plans. These regulations are in the form of Presidential Regulation Number 72 of 2021 concerning the Acceleration of Reducing Stunting, BKKBN Regulation Number 12 of 2021 concerning the National Action Plan for the Acceleration of Stunting Reduction (RAN PASTI) and then Presidential Instruction Number 4 of 2022 concerning the Alleviation of Extreme Poverty. And there is Law Number 52 of 2004

concerning Regional Government which states that the Bangga Kencana Program is a non-basic mandatory matter that must be carried out by the regional government. This encourages the fulfillment of performance indicator targets to accelerate stunting reduction, which is the responsibility of the BKKBN, including in every regional representative office. One of which focuses on changing behavior, especially for families at risk of stunting. Therefore, the Interpersonal Communication Information and Education (KIE) extension service program for families at risk of stunting is one of the strategic tasks that needs to be supported by family planning extension workers.

The Role of Family Planning Instructors

Based on data analysis carried out by researchers, the KIE stunting program is part of the non-formal education system. This education is carried out in the form of training and counseling, which is a means for families at risk of stunting as learning citizens to gain access to education on preventing stunting cases. In the learning process, there are family planning instructors as educators who act as a bridge between science and the learning community.

Optimizing the role and function of family planning instructors is carried out by all instructors in Banten Province in carrying out the learning process. To date, there are 139 family planning instructors with both PNS and PPPK status. Family planning instructors are one of the determining factors for learning success. The role of family planning instructors also influences how mothers can learn to behave and take part in learning participation. Sundari (2015) states that instructors can influence targets in their roles as motivators, educators, dynamists, organizers, communicators and advisors. Another opinion is from Sardiman (2010), who stated that the role of educators consists of informator, organizer, motivator, director/guide, initiator, facilitator, mediator and evaluator. In this article, the researcher focuses on the role of family planning instructors as educators, mentors/companions, motivators and as communicators.

1. Educator/Mentor

Family planning instructors have a role as people who accompany, guide and provide assistance to families at risk of stunting as learning residents in solving the problems they face. Facing residents studying non-formal education, instructors must understand the characteristics of their students. Therefore, the implementation of assistance must be able to adapt to the conditions needed by the learning community, namely families at risk of stunting, especially the characteristics of rural mothers.

2. Motivator

Family planning instructors as motivators are defined as people who can channel and support changes in parenting behavior, so that they are willing to learn, treat children, educate, guide and discipline and protect children in achieving optimal growth and development. Family planning instructors must have the ability to work to motivate families at risk of stunting to have more interest and participation in learning. Apart from that, extension workers are also required to be able to raise the enthusiasm of families at risk of stunting to be willing to apply the learning results they have obtained. Family planning counselors must have an open nature in receiving complaints about problems. If families at risk of stunting as learning residents have problems, family planning instructors always try to provide solutions and motivation so that the problems can be resolved quickly. This is in line with Putra's statement (2016), which revealed that instructors who can act as educators are teachers in non-formal education who have high ideas for overcoming obstacles that arise from students learning.

3. Communicator

According to Langit (2016), an instructor as a communicator is defined as someone whose role is to convey messages so that they can influence the audience or students by developing effective strategies. This is necessary so that the message of stunting prevention and curative efforts is delivered appropriately to families at risk of stunting. The message in question is an idea, the main thoughts that the instructor as a communicator has to convey to families at risk of stunting. This is in accordance with the role of family planning instructors who work in rural areas and officers who are closest to families to carry out effective communication steps. Marijono (2015) expressed an opinion regarding several things that extension workers as communicators can do to produce maximum results, including:

- a. The instructors painstakingly train the residents to learn.
- b. Provide opportunities for residents to learn as speakers, and instructors as listeners.
- c. Train students to be able to express opinions.
- d. The instructor is creative in creating a fresh atmosphere and attraction in the learning process.

It is hoped that the roles of family planning instructors previously explained will be able to have an influence on increasing learning participation for families at risk of stunting. According to Mulyasa (2014) learning participation is defined as the involvement of learning citizens in planning, implementing and evaluating learning. Learning participation will require students to take responsibility for the success of achieving learning goals. In simple terms, learning participation can be interpreted as how much families at risk of stunting are involved in the learning process.

Mobilization of Family Planning Instructors

So far, interpersonal KIE services are still carried out using static, classical counseling methods. This condition is believed to have limitations and weaknesses, especially not being efficient and effective both in terms of time and range of KIE exposure for families at risk of stunting. Therefore, innovation and change are needed to increase the coverage of families at risk of stunting who receive interpersonal JIE according to standards. One of them is by facilitating the mobilization (movement) of family planning instructors through a service development program by rebranding (changing) the function of the Proud Kencana Program Information Unit Car to become a Car for Confidence for Stunting Care Families. In this way, outreach mobility is able to penetrate the boundaries of remote areas to attend and provide direct services to families at risk of stunting. There are several reinforcements carried out in the Stunting Care Family Confide Car program, including:

- 1. Strengthening Convergence Function:
- 2. Mobil Confide in Family Cares for Stunting will provide advocacy, communication, information and education for stakeholders and private work partners to participate in pentahelix support in the efforts being made.
 - a. Strengthening the Information and Education Communication Function;
 - b. The Stunting Care Family Confidential Car will provide communication, information and education for the community in general through communities and community groups, including mass events such as car free days, meaningful weekend nights, classes for pregnant women, etc.
 - c. The Confidential Family Car will be equipped with counselors including expert child and family counselors who will strengthen the IEC process for the community.
 - d. Implementing consultation media through call centers and chat boards regarding Bangga Kencana and Stunting

3. Innovation in providing nutrition for Stunting Children and Families at Risk of Stunting, Warung Dulur Important Program (Storage Caring for Stunting Egg Donors) Mobile; Accommodate and distribute egg aid from the wider community for stunted children and families at risk of stunting.

So that the implementation of the transformation of the Bangga Kencana Program Information Unit Car into a Stunting Caring Family Confidence Car can run optimally in 8 regencies and cities of Banten Province, branding is also carried out on the Information Unit Cars in the districts/cities and not only staffed by the OPD supporting the Bangga Kencana Program and Accelerated Reduction of Stunting. However, it can also be supported by other OPDs who are members of the Stunting Reduction Acceleration Team. The support activities from the Stunting Care Family Confide Car facility include:

- 1. Anti-anime movement for teenagers, this activity involves District and City Education and Culture. One of them is by forming an Anti-Anemia Task Force by branding the Youth/Student Counseling Information Center which has been established in schools;
- 2. Establish and optimize classes for pregnant women and postnatal mothers to receive assistance from the Family Assistance Team and community health centers through "Integrated Services to Prevent Stunting". This will be carried out by the Health Service through the Regional Hospital which is also a Referral Hospital for Families at Risk of Stunting and stunted children;
- 3. Encourage an increase in the budget for each OPD which provides support for ideas in increasing the quantity and quality of the Stunting Care Family Confidence Car. This activity will be carried out by BKAD (Regional Finance and Assets Agency) and Bappeda.

In general, the Rebranding of the Car Confide in Families Cares for Stunting (MOCUGA PENTING), results in more and more families at risk of stunting being able to receive access to information and KIE counseling services, referrals and ease in distributing social assistance programs. As for other benefits, they can be specifically categorized as follows:

- 1. For Organizations
 - a. Lessons learned to determine the interventions that need to be carried out;
 - b. Responding to challenges resulting from changes in the strategic environment;
 - c. Boosting organizational performance achievements;
- 2. For BKKBN Work Units
 - a. Increasing the effectiveness of mobile service management;
 - b. Optimal public services
 - c. Boost the achievement of work unit performance targets.
 - d. Expanding the scope of information
 - e. Improving the quality of work unit accountability
- 3. For Stakeholders
 - a. Creating synergy and collaboration;
 - b. Improving the quality of public services quickly and precisely to those in need;
- 4. Communities/Families at Risk of Stunting
 - a. Increase understanding of the Bangga Kencana and Stunting Program;
 - b. Increasing the ease of obtaining information on the Bangga Kencana and Stunting Program;
 - c. Increasing access to distribute and obtain egg donation assistance in an effort to accelerate stunting reduction.

Conclusion

Mobilizing family planning instructors to increase maternal knowledge and good parenting patterns, as well as health education through KIE about stunting, for mothers from families at risk of stunting, is very important to reduce the prevalence of stunting under five, especially in villages where stunting is located. Optimizing the role of family planning instructors so that they are effective is implemented by making instructors as educators, mentors/companions, motivators and communicators for families at risk of stunting. On the other hand, so that family planning instructors can reach remote rural areas and provide informal education directly to families at risk of stunting, this can be done through changes to the Mobile Information Units at BKKBN Representatives.

References

- Atamou, L., Rahmadiyah, D. C., Hassan, H., & Setiawan, A. (2023, March). Analysis of the Determinants of Stunting among Children Aged below Five Years in Stunting Locus Villages in Indonesia. In *Healthcare* (Vol. 11, No. 6, p. 810). MDPI.
- Badan Pusat Statistik. (2023). Statistik Indonesia 2023. Jakarta: Badan Pusat Statistik.
- Langit, R. A. S., & Utari, W. M. P. (2016). Penyuluh Sebagai Komunikator Program Keluarga Berencana. *Jurnal Ikon*, 2(4), 52-62.
- Peraturan BKKBN Nomor 12 Tahun 2021 tentang Rencana Aksi Nasional Percepatan Penurunan Stunting (RAN PASTI).
- Peraturan Presiden Republik Indonesia Nomor 18 Tahun 2020 Tentang Rencana Pembangunan Jangka Menengah Nasional 2020-2024
- Peraturan Presiden Republik Indonesia Nomor 72 Tahun 2021 tentang Percepatan Penurunan Stunting
- Putra, S. (2016). Peran Penyuluh Pertanian Dalam Pengembangan Kelompoktani Padi Sawah Didesa Rambah Baru Kecamatan Rambah Samo Kabupaten Rokan Hulu. *Jurnal Mahasiswa Fakultas Pertanian UPP*, 3(2).
- Ramdhani, A., Handayani, H., & Setiawan, A. (2021, February). Hubungan Pengetahuan Ibu Dengan Kejadian Stunting. In *Prosiding Seminar Nasional LPPM UMP* (Vol. 2, pp. 28-35).
- Sardiman. (2010). Interaksi dan Motivasi Belajar Mengajar. Jakarta: Rajawali Pers.
- Suryana, E., & Azis, M. (2023). The Potential of Economic Loss Due to Stunting in Indonesia. *Jurnal Ekonomi Kesehatan Indonesia*, 8(1), 52-65.
- Trihono, T., Atmarita, A., Tjandrarini, D. H., Irawati, A., Nurlinawati, I., Utami, N. H., & Tejayanti, T. (2015). *Pendek (stunting) di Indonesia, masalah dan solusinya*. Lembaga Penerbit Badan Litbangkes.
- Winartha, I. M. (2006). *Metodologi Penelitian Kuantitatif dan Kualitatif*. Yogyakarta: Gaha Ilmu.