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# THE DETERMINANTS OF FAMILY PLANNING COUNSELORS' STUNTING PROGRAM OBJECTIVES DURING COVID-19: A CASE STUDY IN EAST JAVA

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### Abstract

Out of the 34 provinces, 12 of them in East Java did not achieve the national stunting prevalence target during the Covid-19 pandemic until 2024. The delay in achieving the work goals of family planning counselors (KB) in the stunting program requires concrete steps to overcome existing obstacles. This study aims to identify the problems that determine the goals of the stunting program for family planning counselors and offer solutions so that they can be used as practical references for family planning counselors. This case study research with descriptive design includes three stages: theoretical exploration and case identification, document collection and review, as well as data processing and case study analysis. The first and second stages were obtained from review documents taken from Google Scholar and other eligible sources (Ministry of Health, National Coordination of Family Planning). Then the determinants of the stunting program objectives for family planning counselors were obtained by filtering documents using the PICOT (Population, Intervention, Comparison, Outcome, Time) model. The results of the PICOT selection show that 7 (n=7) of 29 (n=29) documents were selected with the main determinants of the stunting program being communication, information, education which includes fostering youth, prospective brides, families of toddlers, family companion teams, pregnant women, and collaboration with other health workers.

**Keywords**— Stunting, family planning counselors, case study, Covid-19

# **INTRODUCTION**

The stunting program for family planning extension workers commonly known as *Keluarga Berencana* (KB) was disruptive during the Covid-19 pandemic, considering that 70% of their activities were communicating, informing, and educating or IEC (1). This activity, commonly referred to as KIE, dominates the work of family planning counselors (PKB) in Indonesia (2). The existence of restrictive rules from the government during the pandemic made the PKB automatically unable to meet face to face with clients (3). The role of PKB in the community is clear in guiding the IEC umbrella (4). Research from various countries states that family planning officers experience similar obstacles (5). One of the biggest roles of the PKB is related to the stunting program (6). Stunting in various countries is one of the key performance indicators (KPI) of national health programs, especially in developing countries (7). During the pandemic, achieving the goals of this program is not easy (8). However, countries like Peru can overcome this with an integrated approach that focuses on eliminating poverty in poor areas (9). However, various opinions regarding the stunting prevention and control program, both in terms of supporting and hindering the

achievement of program objectives (10). What is striking is the role of nutrition as a cause of stunting (11). Another opinion mentions economic factors, poor environmental health, inadequate clean water supply, smoking parents, and maternal age (12). The majority think that the cause of stunting is a combination of the various components mentioned above (13).

Indonesia has a goal of achieving the prevalence of the stunting program by 2024 at 17% (14). In East Java, one of the most populous provinces with a population of more than 40 million people, nationally in 2021 it exceeded the achievement target of 23.5% (15). However, 12 (35.3%) of the 34 provinces, namely Mojokerto, Madiun regency and Madiun town, Blitar regency and Blitar town, Tulungagung, Sidoarjo, Batu Magetan, Kediri, Ngawi, and Sampang prevalence rates are below the national standard (15). Nationally, the achievement of East Java (32.81%) is still above the national level (30.80%) (2). Therefore, it is necessary to make improvements to the program in 12 towns with low achievement rates. Research shows that the involvement of PKB in various developing countries can help prevent stunting and tackle the stunting problem so that the consequences do not get worse (7).

This case study research was conducted to identify the problem determining the goals of the stunting program for family planning counselors and to offer solutions so that they can be used as practical references for PKB. Research with this case study method is considered as one of the effective and efficient approaches in the era of the Covid-19 pandemic (8,13,16). Especially in densely populated areas such as East Java which is prone to the spread of infectious diseases. The implications of this research can be used as a reference in dealing with stunting cases by involving family planning counselors.

### **METHODS**

This research used the case study method with a descriptive design. The steps include three stages: theoretical exploration and case identification, document collection and review, as well as data processing and case study analysis. At the initial stage, we explored the theory to identify the stunting problem in which East Java was our target focus. Apart from being a population in the big 3 categories, stunting cases in 12 districts in East Java are unique. In the midst of a dense population, increasing socioeconomic levels, adequate health facilities, it turns out that 32% of the area did not reach the stunting target (15,17). The second stage is to prepare and collect data and review documents. Then the last step is to analyze the case. The flow of the case study is depicted in the following diagram:

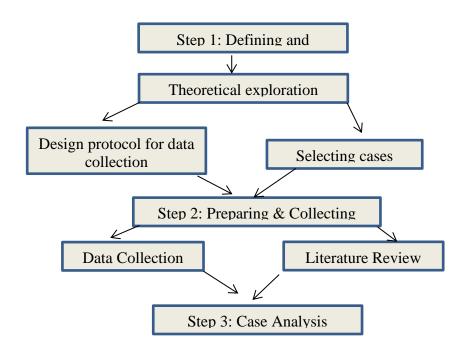


Figure 1: Case Study Flow

At the document review stage, we took data from Google Scholar and other eligible sources (Ministry of Health, National Coordination of Family Planning-BKKBN). Determinants of stunting program goals for family planning counselors were filtered using the PICOT (Population, Intervention, Comparison, Outcome, Time) model (Table 1) combined with data collection criteria through eligible documents (keywords). After this last analysis, data analysis was carried out followed by conclusions, namely the determinants of the stunting program goals for PKB during the Covid-19 Pandemic (Table 3).

# RESULTS AND DISCUSSION

# **Theoretical Exploration**

The following are the results of theoretical exploration obtained from document collection through search engines. The components obtained refer to the Case Study flow formulated by the World Health Organization (WHO) (8,16). The following are the components that must be met in the preparation of our case study.

**Table 1:** Case study components

No.	Components	Results
1	Research question	What are the determinants of the stunting goals of the PKB program in the Covid-19 era?
2	Theoretical proposition	Family Planning and Stunting
3	Analysis units	Family planning counselors, Stunting Determination Program
4	Data linkage	Analytical approach, selection of eligible documents using Google Scholar.
5	Criteria for the	Use of PICOT model

findings

The table above shows 5 components that need to be explored in a case study and provides answers to each component that is requested as a requirement based on theory. The conclusion of this case study theory is that we have obtained the determinants of the goals of the stunting family planning counselor program through documents obtained from the Google search engine and filtered using the PICOT model. The full results are in Table 3.

# **Data Collection and Literature Review**

Table2: Document criteria against PICOT Model

Documents Criteria (Keywords)	Population	Intervention	Comparison	Outcome	Time	
Family planning program, stunting, Covid-19	KB Counselors	Stunting program	Program di luar stunting	Penentu program	Covid- 19 era	

The table above shows the criteria (keywords) that must be met in searching documents according to the research title, namely 3 keywords (family planning, stunting, and Covid-19) then combined according to the PICOT model. PICOT model requires population, intervention, comparison, outcome, and time. The complete PICOT model results are in Table 3.

# **Reviewed Documents**

In the search engine stage on Google Scholar, 29 documents were obtained (n=29). After filtering, there were 7 (n=7) eligible documents selected by the PICOT selection, the rest were discarded because they did not meet the requirements, were duplicated, or were irrelevant (n=22). The final result of the PICOT selection is the document analysis followed by case analysis based on the results of journal reviews as shown in the following table:

**Table 3**: Reviewed Documents

No.	Title	Authors and year of publicatio n	Location and Country	Results
1	How Family Planning Services Respond to the Covid-19 Pandemic in Indonesia: Case Studies in 8	Soewondo et al., 2020	Regencies/Citi es, 4 provinces DKI Jakarta, West Java,	acceptors at the Puskesmas and the independent practice

	Regencies/Cities.		Sulawesi.	
2	Health Education for Caring Grandmothers In Preventing Stunting in 36 Months Old Children In the Coastal Area	Sary, YNE., 2020.	Probolinggo, East Java.	Health education on stunting prevention given to caregivers is effective in increasing the weight and height of 36-month-old children in coastal areas (19).
3	Community Participation in the Family Planning Village Program during the Pandemic (Case Study of Sumberkarang Village, Dlanggu District, Mojokerto Regency).	Putri, RS., 2021	Mojokerto	Community participation in the family planning program has decreased due to concerns about the spread of Covid-19. KB Village Program Activities are limited as an effort to prevent the spread of Covid-19 (20).
4	Nutrition Education Likes to Eat Fish as an Effort to Increase Mother's Knowledge about Stunting Prevention	Rachmah et al., 2020	Gempolmanis Village, Sub- district of Sambeng Lamongan Regency of East Java Province	mothers' knowledge regarding stunting prevention in children at the age of the
5	Family School Initiation In Parenting Era Industry 4.0	Nurhajati, WA., 2020	Jombang Regency, East Java	The Family School Initiation is an initiative to provide understanding and skills so that parents can build their families (22).
6	Implementation of a Healthy Lifestyle Among Children to Prevent Stunting	Sriwijayan ti, RP. And Devi, NUK., 2020	Pakistaji Village, Wonoasih District, Probolinggo City	Providing stunting counseling to participants helps increase knowledge, raise awareness, and add expertise (23).
7	Stunting Problems and Prevention	Rahmadita , K., 2020	National scale	Launching an integrated stunting reduction intervention in districts/cities, and gradually expanding the location of the intervention. It is hoped that all stunting prevention efforts will decrease this number and be

accompanied by a serious commitment between the government and the community (24).

# **Case Study Analysis**

Table 3 above is a summary of 7 journals that discuss stunting and PKB activities in East Java in particular as well as stunting problems faced in Indonesia in general. Those problems include the role of PKB in the pandemic era, toddler nutrition, cross-sectoral interventions, establishment of family schools, PKB visits, and community participation.

# Limitations

The limitation of this case study research is that it does not include detailed data on stunting cases individually in each city. The limited data and information available in each city and province, the funds, time, and effort to obtain it are challenges for researchers. Many previous studies have discussed stunting nutrition, which is very dominant, at the provincial, national and international levels. Very little has been explained about the role of PKB in stunting. This gap can be used as research material in the future.

# **Discussion**

If the results of the analysis of the problems in the Table are grouped, 3 basic problems need to be underlined, namely the role of PKB in stunting prevention, cross-sectoral intervention in stunting reduction, and stunting prevention in the Covid-19 pandemic era.

The first is about the role of PKB in handling stunting. In general, the role of PKB includes data collection, analysis of determining priority issues, preparation of work plans, expanding program knowledge and insight, recruiting cadres, developing capabilities and playing cadres and other partners in the National Family Planning (BKKBN) program, forming cadres, providing training/orientation for improving the knowledge and skills of cadres, as implementers and managers of activities starting from preparing Rural Community Institution (IMP) and other partners in implementing the program, facilitating the role of IMP and other partners in preparing support for the implementation of the National Family Planning program in villages/kelurahan, advocacy, IEC/counseling as well as providing family planning program services. 70% of the roles, functions, duties, and responsibilities of the PKB are carried out in the field (6). This means that PKB works outside the office meets with the community, discusses with cadres, trains, and carries out evaluations. During the Covid-19 period, those activities were disrupted. Therefore, the achievement of the national stunting program from the PKB perspective is hampered and has decreased. What is done in Peru, South America can be followed. By continuing to enforce the health protocol, it is necessary to prioritize problems and their handling. In East Java, for example, it can be done through PKB contacts with family planning acceptors, cadres, or related agencies. 50% of direct contacts are targeted based on priorities and a SWOT analysis (strengths, weaknesses, opportunities, threats) in certain districts or cities according to priorities (25).

Second, inter-sectoral intervention. In article number 7, table 3 it is stated that during the pandemic it is necessary to gradually expand the location on a national scale. Those activities must be accompanied by a serious commitment between the government and the community. In East Java, that activity can be carried out by preparing a pilot project proposal for certain priority areas by involving other cities that have been successful in stunting programs during the pandemic, for example, the cities of Bondowoso, Pamekasan, and Bangkalan whose prevalence is above 35%.

The third is the obstacles to activities during the Covid-19 pandemic. The spread of a pandemic with a new variant of Omicron at the end of 2021 has added to PKB's concerns in achieving program goals (26). Restrictions on the provision of meetings or restrictions on direct contact make PKB's space for movement in the field even narrower, especially in big cities. Therefore, tightening health protocols must continue to be prioritized (27). As far as possible, contact is made online with cadres, family planning acceptors, and other PKB work targets, such as couples of childbearing age and teenagers (28). Prioritization of the program continues to be prioritized with consistent evaluation so that the results can be monitored. Making work programs based on KPIs is a demand considering the limited space for movement during a pandemic will greatly assist PKB in determining stunting program goals.

### **CONCLUSION**

The purpose of this case study is to identify the problem determining the goals of the stunting program for PKB (family planning counselors) and offer solutions so that they can be used as practical references for PKB. As the determinants, we found three basic problems faced by PKB in East Java in dealing with stunting that occurred in 12 cities and districts. The findings of this case study recommend prioritizing the roles, duties, and responsibilities of PKB in certain areas through pilot projects, prioritizing health protocols and implementing programs by involving related or cross-sector institutions/agencies. The limitations of this case study research are that it does not present a more varied, focused case and does not conduct direct research in places where the stunting program objectives are not achieved according to the target. However, at least the results of the case study can be used as a reference for future research.

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# ETHICAL CLEARANCE

This research is not an institutional-based study. It does not belong to or represents any particular institute. So, ethical clearance is not applicable in our study.

# **CONFLICT OF INTEREST:**

None of our authors in the study has a conflict of interest.

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