

Stunting Paradigm by Adolescent Cadres: A Qualitative Study in the Urban Area of Yogyakarta City

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ABSTRACT

The stunting condition is triggered by malnutrition, from the womb until the child (especially women) enters adolescence, namely the first 8000 days of life (HPK). Fulfilment of proper nutritional needs must be provided since that time. Therefore, the author has designed a grand design for the formation of adolescent cadres for stunting prevention in urban areas of Yogyakarta City since 2022. This study aims to further analyse how the paradigm of stunting by adolescent cadres. This research uses qualitative methods, with a descriptive qualitative design, conducted for 3 months, in 2023, in Tegalrejo District, Yogyakarta City. Total sampling was the sampling technique in this study, involving 10 adolescent cadres as participants. Data were collected through in-depth interviews of approximately 45 minutes, with each participant. Data were analysed using six stages of thematic analysis, including: data introduction; initial coding; theme search; theme study; theme definition and naming, and reporting. NVivo 12 software was used by the researcher to conduct iterative data management and emerging themes. The findings showed three themes on the stunting paradigm by adolescents: the urgency of eliminating stunting stigmatisation, the fundamentalism of parental readiness in childcare, and the importance of adolescent cadres moving in each school. Adolescent cadres have understood the current stunting paradigm, that its reduction is urgent to create healthy generations in the future.

INTRODUCTION

Yogyakarta City is one of 320 districts/cities included in the focus location (locus) of the integrated stunting reduction intervention in 2022. This designation makes it one of the developed cities in Indonesia with a reduction target of 2.33%. This is done

so that by 2022, the incidence of stunting will only reach 12% (Yogyakarta City Health Office, 2021). The target of reducing the prevalence of stunting in Yogyakarta City to 12% was realised in 2024 and further planning in 2025 to zero (new) cases of stunting (Yogyakarta City Health Office, 2024).



The Yogyakarta City Government has passed the Mayor's Regulation on the Regional Action Plan to prepare superior generations through the 8000 HPK programme for 2021-2025 (Mayor of Yogyakarta, 2021) . This is a strategy that is considered appropriate in preventing stunting, by not only focusing on the first 1000 days of life (HPK), but still paying attention to the next 7000 days, namely until adolescence (Bundy DAP et al., 2017, 2018) . In the 8000 HPK concept, systematic efforts to appropriate interventions can be implemented in the three phases of life after 1000 HPK, one of which is the theory that the availability of adequate nutrition during adolescence with proper preparation will create a healthy generation free of stunting (Renyonet, Dary and Nugroho, 2023) . This is in line with the results of other studies which state that other factors that contribute to stunting are nutritional status in the preconception period and during pregnancy (Bove I et al. , 2012)

Based on the problems related to the preparation of a stunting-free generation through the 8000 HPK programme in Yogyakarta City, the author designed a solution from the

design thinking that the author's team had done last year, oriented towards users and human values, in the form of "Gerakan Remaja Bergerak 8000 HPK". Past research studies have reported that, after a series of capacity building workshops and peer group support "Teenage Movement 8000 HPK" there was a significant difference in the increase in Hb levels at all examinations, be it the first and second, second and third, or third and fourth examination (Yunita et al., 2022)

The important elements that have been mentioned above are one of the bases for this research which aims to further analyse how the paradigm of stunting by the adolescent cadres.

RESEARCH METHODS

Design Study

This research design uses qualitative methods, with a *descriptive qualitative* design. This research aims to explore the stunting paradigm from the perspective of adolescent cadres.

Setting, participants, and recruitment process

The study was conducted for 3 months, from August to October 2023, in Tegalrejo Sub-district, Yogyakarta City. The researcher included all



participants in this study, involving 10 adolescent cadres

Data Retrieval

Data were collected using *in-depth interview* techniques for approximately 45 minutes, in each session. The interview process was conducted in the closed room of the Kalurahan meeting hall, recorded using a mobile phone recorder. Open-ended questions were asked, starting with: "How is the experience of being a adolescent cadre in the stunting locus?", "What are the obstacles experienced during being a adolescent cadre?", "What are the suggestions given and the strategies developed for prevention in the future?", then other questions were developed by the researcher according to the answers of the participants during the interview.

Data Analysis

Data were analysed using six stages of thematic analysis, including: 1) data familiarisation; 2) initial coding; 3) theme search; 4) theme study; 5) theme definition and naming; and 6) reporting (Creswell and Poth, 2017). NVivo 12 *software* was used to perform iterative management of the data and emerging themes.

Rigour and Trustworthiness

Data validity techniques were carried out from the beginning of data collection, during data reduction, data display, and drawing conclusions or verification. To ensure the accuracy of the data, the data were shared with five participants in different sessions and asked for their opinions to conduct a *member check*. Expert opinions (other qualitative researchers) were also sought to confirm the consistency between the data collected and the participants' statements. To increase transferability, the results of the study were given to three individuals from outside the study, who had similar characteristics to the participants, to assess the similarity of the results with their own experiences.

Ethical Clearance

This study has passed the ethical feasibility test by the Health Research Ethics Committee, Respati University Yogyakarta, with number 307.3/FIKES/PL/VI/2023.

RESULTS AND DISCUSSION

Results

The participants in this study were mostly 16 years old and in senior high school. In detail, the information is



contained in table 1 below:

Table 1. Participant Profile

Initials/Age	Profile
I1/15 years	1st year high school student, normal BMI, normal Hb level, family income above the minimum wage in Yogyakarta City, Mobile Adolescent Cadre
I2/15 years	1st year senior high school student, normal BMI, normal Hb level, family income above the minimum wage in Yogyakarta City, Mobile Adolescent Cadre
I3/16 years	1st year senior high school student, normal BMI, normal Hb level, family income above the minimum wage in Yogyakarta City, Mobile Adolescent Cadre
I4/16 years	1st year senior high school student, normal BMI, normal Hb level, family income above the minimum wage in Yogyakarta City, Mobile Adolescent Cadre
I5/16 years	2nd year senior high school student, normal BMI, normal Hb level, family income above the minimum wage in Yogyakarta City, Mobile Adolescent Cadre
I6/16 years	2nd year senior high school student, normal BMI, normal Hb level, family income above the minimum wage in Yogyakarta City, Mobile Adolescent Cadre
I7/17 years	2nd year senior high school student, normal BMI, normal Hb level, family income above the minimum wage in Yogyakarta City, Mobile Adolescent Cadre
I8/17 years	2nd year senior high school student, normal BMI, normal Hb level, family income above the minimum wage in Yogyakarta City, Mobile Adolescent Cadre
I9/18 years	2nd year senior high school student, normal BMI, normal Hb level, family income above the minimum wage in Yogyakarta City, Mobile Adolescent Cadre

Initials/Age	Profile
I10/19 years	Private employee, normal BMI, normal Hb level, income equal to the minimum wage in Yogyakarta City, Mobile Adolescent Cadre

The new findings on the stunting paradigm by adolescent cadres are summarised in three themes. The three themes are outlined in table 2 below:

Table 2: Theme Findings of the Stunting Paradigm by Adolescent Cadres

Theme	Subtheme
Elimination of stigmatisation of stunting	a. Negative stigma on stunted children in the community b. Refusal to attend Posyandu from mothers with children suspected of stunting
Parental readiness for parenting	a. Inappropriate way of feeding the child b. Childcare mismatch
The Urgency of Mobile Adolescent Cadres in Every School	a. Routine monitoring of Fe tablet administration for adolescents in schools b. The need for adolescent peer group support at school

Elimination of stigmatisation of stunting

Kader Remaja Bergerak said that most mothers whose children are suspected of stunting feel embarrassed because of the bad stigma circulating in the community. The assumption of



coming from a lower middle class family makes the community embarrassed if their child is suspected of stunting.

"Many do not want to go to Posyandu, Buk, because they are embarrassed that their children are said to be stunted" (I1).

"There is also a doctor's child here Mba, but it is not included in the stunting report, the information I got from Kader's mother, the doctor doesn't like it if his child is included in the list of children suspected of stunting, for fear of embarrassment and then it becomes a problem, Mba" (I2).

"In the community, almost all of them already know about stunting, ma'am. But yes, because it may be circulating in the community, so children who are suspected of being stunted are often bullied." (I7)

"The stigma in the community is that stunting is really bad, Mum. So the assumption is malnourished, from a middle to lower class family, so the parents are embarrassed" (I8).

"There are 5 mothers who are difficult to invite to Posyandu, because their children are diagnosed with stunting by the midwife. They are routinely given additional food from Posyandu, which is a programme of the Jogja City Government, but it doesn't affect them, it's not on target. The problem is that the food is not eaten either. It's embarrassing to get special supplementary food for stunted children, Mum" (I10).

Parental readiness in childcare

Parenting readiness is considered one of the causes of stunting in children. Some of them are due to the way of parenting, feeding, and the smoking environment around the child.

"My next door neighbour is suspected of stunting, initially because of coughing until 3 months did not heal, the cause was because the environment was smokers, it was dirty too, mba. His father smoked, his grandfather who lived there also smoked. If you are a parent who understands not to smoke around your child, but maybe because you are not ready to be a parent, or there is a sense of ego too, ma'am."

"It's the same as a neighbour also in the same RT, Ma'am, he coughs repeatedly, because his father smokes, if he smokes he says inside the house, which also has minimal ventilation. Because of the coughing, it was difficult for her food to enter. Finally, her weight is difficult to increase. Yesterday the midwife said at the Posyandu, the child has been referred to DKT Hospital." (I2)

"Here, there are many children who already have children, so yes, they are not ready to have children. When given a child, the parenting is not good, giving food to the child is also not good, the impact is that the child is stunted" (I3).

"It's too young to have a child Mba, and when the cadre told me about it, I didn't even pay attention. Basically, they are not ready to have children, and the cadres give them extra food, but the mother eats instead of the child" (I4).



"She is raised by her grandmother, because her mother works, maybe because of this, her nutritional needs are not met, Buk. Besides that, the information I got was that the mother doesn't have time to cook, she has to leave in the morning. The mother takes care of everything, because her father doesn't take care of her." (I9)

"If I get information, it's actually not because mothers are lazy to cook for their children, but because mothers are confused about how to cook MP-ASI for their children. They already feel complicated and confused first, she said." (I10)

The Urgency of Mobile Adolescent Cadres in each school

Participants felt the need for Mobile Teen cadres in each school, to help monitor Fe tablet consumption, as well as peer groups with peers, in order to increase awareness of adolescent health to prevent stunting in future generations.

"...This programme can actually be harmonised in schools with PIK-R which is usually available in schools" (I7).

"...It is important that this programme is implemented continuously in schools, starting from junior high school to senior high school. Then there is monitoring from the Puskesmas, for the provision of Fe tablets, ma'am." (I11)

"...The PIK-R organised at school can be filled with activities to support the cadres of Remaja Bergerak, to their other friends, Mbak." (I12)

"...The peer group seems to be able to be continued at school, ma'am, to their friends. For here, to mothers whose children are suspected of stunting, it is a bit difficult, because the age gap is quite large, so it is difficult to discuss." (I13)

Discussion

De-stigmatising stunting

So far, people often think that stunting is a verdict. The verdict is inherent and genetic, even though stunting is not the end of the world. If in the first 1,000 days of life, a child falls behind in nutrition, then the parents can still catch up even though the level is different from other healthy children. Other abilities can still be stimulated (Bliss et al., 2016; Sheikhan et al., 2023).

In the community in Kricak Sub-district, Yogyakarta City, local knowledge systems commonly referred to as indigenous knowledge are concepts about all phenomena that can be seen, felt, experienced, and thought, formulated according to the patterns and ways of thinking of a community group. Local knowledge systems deal with very broad aspects of community life. The system is interpreted differently by a community group in this Kalurahan, leading to a stigma among residents that



short stunting is genetically inherited, comes from poor people who are malnourished, and fails to care for children.

Stunting can be corrected with proper handling, so that the phenomenon in society that cornered the stunting condition in these children can be eliminated (Sheikhan et al., 2023).

Parental readiness in childcare

Parents play an important role in children's growth and development as well as their knowledge. Efforts to address stunting in children should focus on the nutritional knowledge of parents. Most parents have difficulties in providing a good home and social environment for their children (Lee et al., 2020; Straughan and Xu, 2023). The number of research reports on stunting risk factors and measures to reduce stunting is increasing. Although health workers and policymakers have learnt about parenting, current key concepts about the role of parents' role in child development may still be missing. Moreover, in Indonesia, health workers and patients may have different understandings of parental functions, but there is a need to have a different

understanding of the role of parents in child development (Vaughn, Ward and Fisher, 2016; Putri and Rong, 2021).

Midwives as health workers need to understand how to enable parents to strengthen their role (ICM, 2013, 2024; Butler, Fullerton and Aman, 2018). The complexity of the parental role certainly relates to parenting and all associated responsibilities, as these actions affect the final outcome of the child, being stunted or not. Midwives need to promote parenting functions in order to reduce cases of stunting in children (UNFPA WHO & ICM, 2021). Evaluation of the parenting function is a benchmark for its function as expected. At a broader level, midwives as health workers need to take more action in policy making. Empowering parents with stunted children is a good way to discuss the issue of stunting and its relation to parenting functions.

The Urgency of Mobile Adolescent Cadres in each school

The unique intellectual transformation of the adolescent way of thinking provides the possibility to achieve integration in adult social relationships (National Academies of



Sciences, Engineering, and Medicine; et al, 2019) . In the first 8000 days of life, adolescence plays an important role in the formation of nutrition, to prepare her physical condition during pregnancy later in life (Oddo, Roshita and Rah, 2019) . In Indonesia, the policy of establishing a Adolescent Information and Counselling Centre (PIK-R) as a forum for Generasi Berencana (GENRE) programme activities, has a significant role for adolescents in providing information and counselling services on family life planning for adolescents as well as other supporting activities (Yulianti, 2017) . However, although adolescent reproductive health services already exist, in reality, utilisation is still low. Some influencing factors include lack of confidentiality or privacy, lack of knowledge, economic factors, culture/stigma, and discomfort.

The Mobile Adolescent Cadres that have been formed and mentored will have a good impact on adolescents' awareness of stunting conditions. Therefore, Mobile Adolescent Cadres need to be formed within the school PIK-R body, so that in each class, there is one cadre, as a mobiliser and *peer support group*.

CONCLUSIONS

This research found three themes in the stunting paradigm by adolescents, including: the urgency of eliminating stunting stigmatisation, the fundamentalism of parental readiness in childcare, and the importance of adolescent cadres in every school. Adolescent cadres have fully understood the current stunting paradigm, that accelerating the reduction and prevention of stunting is necessary to create healthy generations in the future. Furthermore, other studies can expand the scope of the teen cadre coaching area by synergising and collaborating with the Yogyakarta City Government into health programmes that have been prepared annually. The synergy of programmes that are carried out for future improvement needs to refer to the results of this study related to efforts to eliminate the bad stigma of stunting in the community, prepare to become parents, and establish and foster mobile adolescent cadres in every school in Yogyakarta City.



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