



KNOWLEDGE AND READINESS OF ADOLESCENTS AS PROSPECTIVE BRIDES AND GROOMS IN STUNTING PREVENTION EFFORTS

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Original Research

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ABSTRACT

Introduction: Stunting is currently happening and is a threat to Indonesia. Planning is needed starting from adolescence, having good knowledge and readiness regarding how to prevent having stunted offspring. The target of the Sustainable Development Goals (SDGs) in 2030 includes the second goal, eliminating hunger and all forms of malnutrition and achieving food security, reducing stunting rates by 40% by 2025. The purpose of this study is to analyze the level of knowledge and readiness of adolescents to become prospective brides in an efforts to prevent stunting. **Methods:** This study uses a survey research design with a sample size of 67 adolescents taken in two cities, DKI Jakarta and Surabaya in 2024. This sampling used purposive sampling. The research variables consist of the knowledge and readiness of adolescents as prospective brides and grooms in efforts to prevent stunting. The instrument used was a questionnaire distributed via Google form distributed by researchers in both areas. The data collected used Spearman rank correlation analysis. **Results:** There is a relationship between knowledge and the readiness of prospective adolescent brides in efforts to prevent stunting ($p=0.001$). **Conclusions:** Health education on stunting, nutritional status, and reproductive health during adolescence must be a mutually supportive program between the Ministry of Health and the Ministry of Education and Culture, both in schools and in integrated "posyandu" that also involve families.

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INTRODUCTION

Adolescents are social creatures who will build a household through marriage, whereas adolescents who become prospective brides and grooms need sufficient provisions in terms of health, especially in continuing the lineage with the hope of obtaining healthy offspring who do not experience stunting (Adyani & Wulandari, 2023). The current stunting is a threat to Indonesia because it reflects that in 2023 Indonesia will receive a demographic bonus where adolescents (aged 15-19 years) occupy the first position (11.71%), these adolescents will later give birth to the nation's successors (Kemenkes, 2018). Planning is needed in preparing family life for adolescents as prospective brides and grooms, by the BKKBN program, namely GenRe (Planned Generation) (BKKBN, 2023), This planning begins during adolescence, having good knowledge and readiness regarding how to prevent having offspring with stunted growth. Special family planning services for adolescents need to be

implemented to prevent pregnancy due to malnutrition. Stunting can be prevented with careful planning before marriage (Forh et al., 2022). However, not all adolescents are ready and have good knowledge to prepare for marriage in terms of health, especially preventing stunting (Mulidah et al., 2022). Stunting is a condition of growth failure in children under the age of five due to chronic malnutrition and repeated infections, especially in the first 1000 days of life. This problem is one of the nutritional problems faced by the world in developing countries including Indonesia. The immediate causes are inadequate dietary intake and infectious diseases. If traced further, adolescent girls can also cause stunted growth in later children, especially in adolescents who suffer from anemia (Renyonet et al., 2023), chronic energy deficiency (Dinas Kesehatan Kota Bandung, 2020), obesity (Mahmudiono et al., 2018). Where the adolescents know about reproductive health, wrong parenting



patterns, poor sanitation and hygiene. Stunted children born to adolescents who do not understand the health aspects of marriage preparation will have an impact on the child, family, and country (Kemenkes, 2018).

The world's target through the 2030 Sustainable Development Goals (SDGs) in the second goal is to eliminate hunger and all forms of malnutrition and achieve food security (Kemenkes RI, 2018). The target set is to reduce stunting rates by 40% by 2025 (Kemenkes, RI 2018). Efforts that can be made to reduce the incidence of stunting include providing education to female adolescents to increase their knowledge and readiness as prospective brides. The purpose of this study was to analyze the level of knowledge and readiness of female adolescents to become prospective brides in an effort to prevent stunting.

MATERIALS AND METHODS

This study uses a quantitative research design with a sample size of 67 adolescents taken

in two cities, DKI Jakarta and Surabaya in 2024. This sampling used purposive sampling according to the criteria set by the researcher. The research variables consist of knowledge and readiness of adolescents as prospective brides and grooms in efforts to prevent stunting with inclusion criteria of adolescent age, willingness to be respondents, and reading and writing skills. This instrument is adopted from previous research and distributed via Google form distributed by researchers in both areas. The researcher sent a Google form to the respondents. The form contains the title of the study, the purpose of the study, the benefits for the respondents, and consent to participate in the study. After the respondents are willing, the respondents can fill out the questions on the google form. The data collected used Spearman rank correlation analysis. This study has also obtained ethical permission with the number 028/KEPPPPKSTIKSC/IV/2024.

RESULTS

The distribution of research results will be presented in the form of a table that provides a general overview of patient factors (age, gender, education, and religiosity), psychological well-being, and the relationship between patient factors (age, gender, education, and religiosity) and psychological well-being.

Table 1. Characteristics of adolescents by age, education, menstrual status, and information sources (n=67).

| Characteristics | Total | Percentage (%) |
|--|-----------|----------------|
| Age | | |
| <15 years | 0 | 0 |
| 15-19 years | 67 | 100 |
| >19 years | 0 | 0 |
| Total | 67 | 100 |
| Educations | | |
| Junior High School | 0 | 0 |
| Senior High School | 0 | 0 |
| College | 67 | 100 |
| Total | 67 | 100 |
| Menstrual Status | | |
| No | 0 | 0 |
| Yes | 67 | 100 |
| Total | 67 | 100 |
| Information Sources about Stunting | | |
| Ttelevision | 11 | 16.5 |
| Website | 25 | 37.5 |
| Social Media | 15 | 22.5 |
| Learning in Class/seminar (face-to-face) | 16 | 23.5 |
| Total | 67 | 100 |

Based on Table 1, the age group is all adolescents aged 15-19 years (100%), who have high school education (100%), and have menstruated (100%). Almost half of the adolescents get information about stunting from websites (37.3%).

Table 2. Characteristics of adolescents by level of knowledge and readiness (n=67).

| Characteristics | Total | Percentage (%) |
|-----------------|-------|----------------|
| Knowledge | | |
| Good | 53 | 79.1 |
| Enough | 10 | 14.9 |

| | | |
|--------------------------------|-----------|------------|
| Less | 4 | 6 |
| Total | 67 | 100 |
| Readiness (nutritional status) | | |
| Underweight | 14 | 20.9 |
| Normal | 32 | 47.7 |
| Overweight | 15 | 22.4 |
| Obese | 5 | 7.5 |
| Very Obese | 1 | 1.5 |
| Total | 67 | 100 |

Based on Table 2, most adolescents have good knowledge (79.1%) and have good readiness with normal nutritional status (47.7%).

Table 3. The relationship between knowledge and readiness of prospective adolescent brides in efforts to prevent stunting (n=67).

| | | | Knowledge | Readiness |
|----------------|-----------|-------------------------|------------------|------------------|
| Spearman's rho | Knowledge | Correlation Coefficient | 1.000 | .386** |
| | | Sig. (2-tailed) | . | .001 |
| | | N | 67 | 67 |
| | Readiness | Correlation Coefficient | .386** | 1.000 |
| | | Sig. (2-tailed) | .001 | . |
| | | N | 67 | 67 |

** . Correlation is significant at the 0.01 level (2-tailed)

Based on table 3, shows that there is a relationship between knowledge and the readiness of prospective adolescent brides in efforts to prevent stunting (p= 0.001).

DISCUSSION

Most adolescents have good knowledge, this is by Adhi's et al research (2024) which states that adolescents' knowledge about stunting is good. Knowledge about stunting is related to age, therefore counseling related to stunting is needed from adolescence (Anggraeni et al., 2023). Adolescents who have good knowledge about reproductive health and nutrition can reduce the risk of stunted growth in their children later in life (Permatasari et al., 2021; Renyoet et al., 2023). Adolescents should marry at a mature age because early marriage and adolescent pregnancy will result in development and growth disorders in their children. (Pangaribuan et al., 2020). If this happens, then parenting coaching can be provided so that their children do not grow up to be stunted children (Saleh et al., 2024).

More intensive premarital education programs on nutrition and reproductive health are effective in increasing adolescents' readiness for marriage (Kemenkes, 2018; Tamirat et al., 2021). The importance of understanding of maternal and child health for prospective brides and grooms, and how it relates to reducing stunting rates. WHO (2022) explains that understanding nutrition from premarital times can significantly reduce the risk of stunting. Therefore, government programs must continue to be implemented and it is necessary to

look at the needs in certain areas so that interventions are right on target.

Almost half of adolescents have good readiness with normal nutritional status. This is based on research by Ulfa et al (2024) and based on data from the 2023 Indonesian Health Survey, there where 76.3% of adolescents aged 16-18 years with normal nutritional status (Kemenkes, 2023). Based on this research and data, adolescents are now ready to get married by minimizing one of the factors that cause stunting in children. Normal nutritional status is influenced by one of the educational strategies that have been established through counseling activities in schools (Anggraeni et al., 2023), nutritional actions in junior high and high schools through UKS, curricular and extracurricular activities (Rachmi et al., 2019), including reproductive health (Kemendikbud & Kemenkes, 2022).

The life cycle approach theory introduced by WHO (2022) states that a child's health is determined by the mother's health condition, which begins before pregnancy. Preparing adolescents in terms of nutrition and reproductive health is key to preventing stunting in future generations. This theory is also supported by research conducted by Unicef (2023) which emphasizes the importance of intervention during adolescence to break the stunting cycle. In order

not to be too late, it is better for us to break the chain early, where adolescents have a long time to improve their nutrition and understand their reproductive health, so that it is hoped that these adolescents are ready to get pregnant at the right time (according to the recommended gestational age) and can give birth to children who are not stunted.

There is a relationship between knowledge and the readiness of prospective adolescent brides in efforts to prevent stunting. Good knowledge and readiness in terms of normal nutritional status will make adolescents ready to marry and hopefully have good children who do not experience growth retardation (Ulfa et al., 2024). Knowledge is a very important domain in shaping one's actions. Knowledge about health, especially nutritional status, and maintaining growth and development with food intake that meets nutritional needs will reduce the incidence of anemia chronic energy deficiency, and malnutrition. Regulation of the Minister of Health Number 39 of 2016 how concerning Guidelines for the Implementation of the Healthy Indonesia Program with a Family Approach, efforts to reduce the prevalence of stunting include those carried out on adolescent girls through education to increase knowledge and readiness of prospective brides. Where the Directorate General of Public Health will assist the Directorate General of Islamic Community Guidance in obtaining materials on reproductive health for marriage guidance, assisting health workers as facilitators in providing reproductive health materials in the implementation of marriage guidance (Firmansyah, 2020). This government program has been implemented, and education has been provided, but it needs to be studied further why there are still many early marriages so that adolescents are not ready to face their pregnancies. Parents of adolescents need to be involved in every activity that has been programmed by the government so that parents can also play a role in changing mindsets, supervising and providing education to their adolescents properly so that early marriage does not occur.

CONCLUSIONS

There is a relationship between knowledge and readiness of prospective teenage brides in efforts to prevent stunting. Health education on stunting, nutritional status, and reproductive health during adolescence must be a mutually supportive program between the Ministry of Health and the Ministry of Education and Culture, both in schools and in integrated "posyandu" that also involve families.

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