



## **THE ROLE OF FAMILY PLANNING COUNSELOR IN PREVENTING FAMILIES AT RISK OF STUNTING (CASE STUDY IN SARAGI VILLAGE, PASARWAJO DISTRICT, BUTON REGENCY)**

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### **Abstrak**

Stunting merupakan masalah gizi kronis yang berdampak jangka panjang terhadap pertumbuhan fisik, perkembangan kognitif, kualitas hidup, dan produktivitas anak di masa mendatang. Upaya pencegahan stunting memerlukan intervensi multisektor, salah satunya melalui optimalisasi peran konselor Keluarga Berencana (KB) dan kader Posyandu sebagai aktor kunci di tingkat masyarakat. Penelitian ini bertujuan untuk menganalisis peran konselor KB dalam pencegahan stunting pada keluarga berisiko di Desa Saragi, Kabupaten Buton, dengan meninjau dimensi edukasi dan konseling, pendampingan keluarga, koordinasi lintas sektor, dan monitoring program. Pendekatan penelitian menggunakan metode kualitatif dengan wawancara mendalam terhadap konselor KB, kader Posyandu, ibu hamil, keluarga balita, dan tokoh masyarakat. Hasil penelitian menunjukkan bahwa konselor KB memiliki kontribusi yang signifikan dalam meningkatkan pengetahuan dan kesadaran keluarga mengenai pengertian stunting, faktor penyebabnya, dan dampaknya terhadap kesehatan anak. Edukasi diberikan melalui konseling kelompok, KIE, dan kunjungan rumah, yang terbukti efektif dalam memengaruhi perilaku gizi, pola asuh, dan pemanfaatan layanan kesehatan. Dalam hal pendampingan, penyuluh melakukan kunjungan rutin untuk memantau kondisi ibu hamil dan balita, mendeteksi risiko stunting, dan memberikan rekomendasi gizi dan kesehatan yang disesuaikan dengan kondisi keluarga. Koordinasi dengan tenaga kesehatan, perangkat desa, dan kader Posyandu memperkuat efektivitas program, meskipun masih terdapat tantangan, termasuk keterbatasan fasilitas dan beban kerja lintas sektor. Lebih lanjut, kondisi ekonomi keluarga secara signifikan memengaruhi kemampuan untuk menyediakan makanan bergizi, sehingga penyuluh berperan dalam menyediakan strategi manajemen gizi adaptif yang disesuaikan dengan kapasitas rumah tangga. Studi ini menyimpulkan bahwa keberhasilan pencegahan stunting dipengaruhi oleh sinergi antara peran aktif penyuluh keluarga berencana, dukungan kader Posyandu, dan perilaku serta kesejahteraan keluarga.

**Kata Kunci:** *Peran Konselor Keluarga; Pencegahan, Stunting*

### **Abstract**

Stunting is a chronic nutritional problem that has long-term impacts on children's physical growth, cognitive development, quality of life, and future productivity. Efforts to prevent stunting require multi-sectoral interventions, one of which is through optimizing the role of Family Planning (KB) counselors and Posyandu (Integrated Service Post) cadres as key actors at the community level. This study aims to analyze the role of KB counselors in preventing stunting in at-risk families in Saragi Village, Buton Regency, by reviewing the dimensions of education and counseling, family assistance, cross-sector coordination, and program monitoring. The research approach used a qualitative method with in-depth interviews with KB counselors, Posyandu cadres, pregnant women, families of toddlers, and community leaders. The results showed that KB counselors have a significant contribution in increasing family knowledge and awareness regarding the definition of stunting, its causative factors, and its impact on child health. Education was provided through group counseling, IEC, and home visits, which have proven effective in influencing nutritional behavior, parenting patterns, and utilization of health services. In terms of mentoring, extension workers conduct regular visits to monitor the condition of pregnant women and toddlers, detect stunting risks, and provide nutritional and health recommendations tailored to the family's circumstances. Coordination with health workers, village officials, and Posyandu (Integrated Service Post) cadres strengthens the program's effectiveness, although challenges remain, including limited facilities and cross-sectoral workloads. Furthermore, a family's economic situation significantly impacts the ability to provide nutritious food, so extension workers play a role in providing adaptive nutrition management strategies tailored to household capacity. This study concludes that the success of stunting prevention is influenced by the synergy between the active role of family planning extension workers, the support of Posyandu cadres, and the behavior and well-being of families.

**Keyword:** *The Role Of Family Counselor; Prevention, Stunting*

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## INTRODUCTION

The family is the smallest social unit that plays a strategic role in shaping the quality of human resources from an early age. As the first environment where children grow and develop, the family is the primary foundation for meeting basic needs, including nutrition, health, and ongoing psychosocial stimulation. (Novianti et al., 2017) emphasized that the quality of parenting and the family's capacity to meet children's needs are key determinants of future public health. Therefore, developing healthy, nutrition-conscious families with good health literacy is a fundamental aspect in efforts to improve the quality of human resources nationally. In the context of health development, family-based intervention models are increasingly prioritized because they are considered capable of directly and sustainably addressing root causes, particularly related to the prevention of chronic nutritional problems such as stunting (Rezki et al., 2024).

Stunting is a condition of growth failure in children caused by chronic malnutrition, repeated infections, and a lack of optimal stimulation during the First 1,000 Days of Life (HPK). This period, spanning from pregnancy to the age of two, is a critical phase of human growth and development. Malnutrition during this period not only stunts physical growth but also disrupts a child's cognitive, motor, and intellectual development. The long-term impacts of stunting include poor learning ability, decreased productivity in adulthood, and an increased risk of non-communicable diseases such as diabetes and hypertension (Majid, Tharikh, & Zarkasyi dalam (Yanti & Nofianti, 2025). Therefore, preventing stunting is a crucial long-term investment in the quality of future generations. The Indonesian government's commitment to addressing this issue is reflected in various strategic policies, including the 2020–2024 National Medium-Term Development Plan (RPJMN) and Presidential Regulation No. 72 of 2021 concerning the Acceleration of Stunting Reduction. The government targets a reduction in the national stunting prevalence to 14% by 2024 through strengthening specific and sensitive nutrition interventions, improving basic health services, improving sanitation and clean water access, and empowering communities through education and behavioral change. This effort requires cross-sector collaboration, from the central government and regional governments down to the village and family levels as implementing units on the ground (Mutmainah & Husaini, 2024).

However, implementation at the local level often does not align with national planning. This is reflected in the high stunting prevalence in various regions, including Buton Regency, which recorded a rate of 22.3% in 2024, still above the national target of 14% (BPS Buton Regency, 2024). This high rate indicates a gap between policy and program implementation on the ground. One area with a relatively high stunting rate is Saragi Village. The socioeconomic status of the community is generally lower-middle class, with limited access to health services, low nutritional literacy, and

minimal practice of clean and healthy living. This situation increases the risk of stunting in families lacking adequate resources to support optimal child growth and development.

This gap demonstrates that stunting cannot be addressed solely through medical approaches or formal health programs. It requires actors capable of reaching families directly through interpersonal, educational, and culturally-based approaches. In this context, Family Planning (KB) counselors hold a strategic position in accelerating stunting reduction efforts. Unlike medical personnel such as midwives and integrated health post (Posyandu) cadres, who focus more on technical health services, KB counselors excel in building interpersonal communication, providing family support, and increasing community knowledge regarding family planning, reproductive health, and the importance of balanced nutrition (Djarati et al., 2024)

KB counselors serve as a liaison between government policy and the community. They not only convey information but also facilitate family behavior change through a more personalized and contextual approach. In communities like Saragi Village, where understanding of the causes of stunting is often misconstrued and considered solely hereditary, the role of family planning counselors is crucial in raising awareness that stunting is a preventable condition through good parenting, nutritious food, adequate sanitation, and regular health services.

Therefore, it is crucial to conduct research that describes the role of family planning counselors in supporting the acceleration of stunting reduction in Saragi Village, Buton Regency. This research will provide an empirical overview of the extent to which family planning counselors are able to contribute to preventing families at risk of stunting and the factors that support and hinder the implementation of this role. Furthermore, the results of this study are expected to serve as a foundation for local governments and stakeholders in formulating strategies to strengthen support for families at risk of stunting, so that the implementation of policies to accelerate stunting reduction can be more effective and targeted.

## METHODE

This study employed a descriptive qualitative approach with the aim of in-depth description of the role of family planning counselors in preventing families at risk of stunting in Saragi Village, Pasarwajo District. This method was chosen because the focus of the study was on the meaning, process, and social experiences of family planning counselors in the field. The role of family planning counselors in reducing families at risk of stunting can be assessed from several aspects, including knowledge and competence, as well as collaboration and networking.

This study aims to analyze the role of family planning counselors in preventing stunting in at-risk families in Saragi Village, Buton Regency, by reviewing the dimensions of education and counseling, family assistance, cross-sector

coordination, and program monitoring. The research approach used a qualitative method with in-depth interviews with family planning counselors, Posyandu cadres, pregnant women, families of toddlers, and community leaders.

Data analysis in this study consisted of two processes: first, pre-field analysis, where the researcher conducted research on previous research results and secondary data to determine the research focus, and then conducted data analysis in the field. The data analysis used is the Miles and Huberman model, where the collected data is then analyzed through the following four steps:

a. Data Collection

This data collection was carried out using the three data collection techniques mentioned previously: observation, interviews, and documentation.

b. Data Triangulation

This is done by combining various sources or methods to examine data (sources, data, and methods) to reduce bias and produce a deeper and more accurate understanding.

c. Data Reduction

Data reduction is the process of reducing, identifying, and focusing on core elements deemed important and identifying thematic patterns. The goal is to provide a clear picture of the existing data, making it easier for the author to obtain further data.

d. Data Display

Data presentation involves collecting and combining information to draw conclusions from the actions taken. Data presentation can facilitate understanding of what is being experienced and enable more in-depth data analysis based on specific understandings.

e. Drawing Conclusions/Verification

At this stage, conclusions are drawn and the data previously collected is verified.

(Miles, M.B., 2014)

## RESULTS AND DISCUSSION

### 1. The Role of Family Planning Counselors

#### 1.1. Educational and Counseling Dimensions in the Role of Family Planning (FP) Counselors

The educational and counseling dimensions are core aspects of implementing the role of Family Planning (FP) Counselors in preventing families at risk of stunting. Research shows that counselors in Saragi Village conduct counseling regularly, once a month through integrated health posts (Posyandu) and twice a month through home visits (**Nunung Erviany et al., 2024**). This intensity pattern illustrates the continuity between group and individual approaches. One counselor explained: "FP participants usually come once a month to the Posyandu and twice a month through home visits. The material provided focuses on stunting management. I provide examples from everyday life and use straightforward language" (Interview, August 6, 2025) The educational materials focus on the causes, impacts, and preventive measures for stunting, including sanitation, balanced nutrition, and parenting. Another counselor explained: "The material presented is usually related to stunting—its causes and impacts. Sanitation, family planning, and

nutrition are often discussed because these are common causes in the community" (Interview, August 9, 2025).

Communication strategies are tailored to the community's social context. Counselors use simple language to ensure information is easily understood. This was emphasized by one source: "We always use language that is easily understood by the community, especially those with lower to middle education levels" (Interview, August 9, 2025). This approach demonstrates the counselor's sensitivity to the target population's characteristics, making the counseling process more inclusive and effective. In addition to counselors, target families also play a role in community education. One family stated: "We don't conduct formal counseling ourselves, but we share our experiences as examples of good practices and participate in community forums to support stunting prevention education" (Interview, July 10, 2025). This finding demonstrates the informal contribution of families as agents of local change.

Overall, the education and counseling dimensions play a significant role in increasing family knowledge, awareness, and behavioral changes related to stunting prevention. The combination of formal counseling methods, home visits, adaptive communication strategies, and family participation in community education are key strengths in strengthening stunting prevention interventions in Saragi Village.

#### 1.2. Family Assistance and Guidance in Stunting Prevention

The family assistance and guidance dimension is a key aspect of the role of Family Planning (FP) Extension Workers, emphasizing direct guidance to families at risk of stunting through routine visits, counseling, and ongoing monitoring (Laili et al., 2022). Research shows that family planning extension workers in Saragi Village conduct intensive assistance twice a month. Wa Ode Ersiawati explained: "We routinely provide assistance twice a month and provide education on nutrition and hygiene, which is monitored regularly... we explain the dangers of stunting for a child's future" (Interview, August 6, 2025). This confirms the existence of a structured and continuous guidance pattern.

Field assistance is also carried out in collaboration with other extension workers. Agusrina explained: "We go out several times a month... I explain the importance of nutrition and sanitation because these are crucial issues that are often overlooked by the community" (Interview, August 9, 2025). The frequency of visits is adjusted according to the number of at-risk families and the extension worker's work area, ensuring that the guidance process is adaptive and responsive to each family's needs. The role of mentoring not only impacts families in general but also provides direct support to pregnant women. As Munasari stated, "I am often visited by family planning counselors and TPK (Family Empowerment and Child Protection Team) who provide information about the 1000 HPK (Family Life Cycle) in preventing stunting" (Interview, July 10, 2025). This mentoring strengthens pregnant women's understanding of

nutrition, reproductive health, and child care during pregnancy.

In addition to family planning counselors, Posyandu (Integrated Service Post) cadres also make a significant contribution. Suhermawati explained: "We conduct home visits four times a month to monitor children's growth and provide education on balanced nutrition, healthy eating habits, and good parenting" (Interview, July 10, 2025). The intensity of cadre activities strengthens stunting prevention efforts through regular growth monitoring, direct education, and behavioral parenting guidance.

Overall, the findings of this study indicate that family mentoring and coaching by family planning counselors and Posyandu cadres have a significant impact on changing family behaviors regarding nutrition, sanitation, and parenting. A personal approach, regular visits, and ongoing counseling are key factors in the success of stunting prevention interventions in Saragi Village.

### **1.3. Family Assistance and Guidance in Stunting Prevention**

Family assistance and guidance are strategic components of the role of Family Planning (FP) counselors in preventing stunting in at-risk families. Unlike general education, assistance emphasizes a personal approach through home visits, direct counseling, and ongoing monitoring of family development. This approach allows counselors to understand the real conditions of families and ensure that health messages are implemented in daily behavior. (Purba et al., 2023)

Research shows that family planning (FP) counselors in Saragi Village conduct mentoring sessions on a regular and scheduled basis. Counselor Wa Ode Ersiawati explained: We regularly provide mentoring twice a month and provide education on nutrition and hygiene, which is monitored regularly... we explain the dangers of stunting for a child's future." (Interview, August 6, 2025).

The intensity of these visits demonstrates the counselors' commitment to ensuring consistent family mentoring. Another counselor, Agusrina, added that the frequency of mentoring is adjusted according to the number of at-risk families: "We go into the field several times a month, depending on the number of at-risk families. I explain the importance of nutrition and sanitation because these are crucial aspects that are often overlooked by the community." (Interview, August 9, 2025).

Mentoring is also provided to pregnant women as part of stunting prevention efforts starting during pregnancy. One pregnant woman, Munasari, stated: "I am often visited by family planning and community outreach workers who provide information and IEC (Information and Communication Technology) about the 1,000 HPK (Family Lifestyle Development Program) in stunting prevention." (Interview, July 10, 2025). This demonstrates that mentoring is not only informative but also builds emotional and motivational support for pregnant women in maintaining their own and their fetus' health.

In addition to counselors, Posyandu (Integrated Service Post) cadres also play a crucial

role. Cadre Suhermawati explained: "We conduct home visits four times a month to monitor children's growth and provide education on balanced nutrition and good parenting practices." (Interview, July 10, 2025).

The cadres' contribution strengthened the mentoring system through routine growth monitoring (weight/height) and practical education tailored to the family's circumstances. Collaboration between family planning instructors and Posyandu cadres resulted in a comprehensive mentoring program, encompassing nutrition, sanitation, and parenting. (Wulandari et al., 2023)

Overall, these findings indicate that family mentoring and coaching play a significant role in improving family knowledge, attitudes, and behaviors related to proper nutrition and parenting. Repeated visits, personal counseling, and cadre involvement created an effective mentoring ecosystem for preventing stunting in Saragi Village.

#### **1.4. Monitoring program and evaluation**

Monitoring program and evaluation are crucial aspects of implementing the role of Family Planning (KB) Extension Workers to ensure that stunting prevention activities are effective and targeted. (Sari et al., 2023) Through field monitoring, extension workers identify family conditions, health behaviors, and risk factors that could potentially impact child growth and development. This activity is then followed by evaluation to assess the success of the intervention and determine necessary follow-up actions.

Research results indicate that monitoring is conducted through regular home visits. Wa Ode Ersiawati explained that extension workers identify risk indicators such as poor sanitation and excessively close birth spacing. She stated: "If anyone has risk indicators for stunting, we record them for monitoring and mentoring." (Interview, August 8, 2025).

This recording serves as the basis for developing subsequent interventions, such as special mentoring or referrals to nutrition assistance programs. Regarding evaluation, extension workers are required to submit periodic activity reports to the Provincial BKKBN (National Population and Family Planning Board). As Salni Sejarahi explained: "The KB Extension Workers prepare activity reports to be submitted to the Head of the Provincial BKKBN Representative Office." (Interview, August 6, 2025).

The report serves as a program control instrument to assess the effectiveness of outreach activities and ensure accountability for program implementation in the field.

In the follow-up phase, extension workers take an active role when cases of stunting or high-risk conditions are identified. Agusrina explained: "We monitor and supervise...we immediately register pregnant women who are malnourished to be included as recipients of nutritious food." (Interview, August 8, 2025).

This statement demonstrates that the monitoring process does not stop at identification, but continues with concrete, rapid, and targeted interventions.

Overall, program monitoring and evaluation are essential foundations for ensuring that stunting prevention interventions are implemented consistently and sustainably. A data-driven approach, structured reporting, and responsive follow-up strengthen the role of family planning extension workers as quality monitors of the stunting reduction program in Saragi Village.

### **1.5. Family Knowledge of Stunting Risk**

#### **1.5.1. Family Knowledge and Awareness**

The Family Knowledge and Awareness dimension is an important indicator in understanding family readiness to prevent stunting. Good knowledge about health, nutrition, parenting, and family planning forms the basis for sustainable behavior change. In the context of stunting prevention, families who understand its impact on children's physical growth, health, and cognitive development tend to be better able to implement appropriate health practices.(Prakoso et al., 2023) This awareness is fostered not only through formal education but also through counseling, community service programs at integrated health posts (Posyandu), and guidance from family planning counselors and health workers.

Research findings indicate that family knowledge about stunting is good. Ms. Nurul Hikmah, one of the informants, understands the concept of stunting and its impacts. She stated: "Stunting is a condition where a child grows shorter than other children of the same age. The impact is: the child appears short and thin, the child gets sick easily... and the child has difficulty focusing, which makes it difficult to learn." (Interview, July 10, 2025).

This statement indicates that families understand not only the physical aspects but also the health and cognitive consequences that accompany stunting. This indicates a fairly comprehensive level of awareness regarding the dangers of stunting for a child's future. In addition, families obtain information from various credible sources. Mrs. Ranti, a pregnant woman, explained: "I get information about stunting prevention from health guidebooks... and from Posyandu cadres during routine checkups." (Interview, July 10, 2025).

The integration of written information sources and direct education from Posyandu cadres strengthens families' understanding. The health guidebooks provide systematic references on nutrition and parenting, while interactions with cadres allow for more personalized and applicable explanations.

The analysis shows that increased family knowledge and awareness significantly contribute to stunting prevention behaviors, such as choosing nutritious foods, maintaining home sanitation, and paying attention to birth spacing. Therefore, this dimension is an important indicator of the success of the counseling and education program implemented by family planning counselors and health workers. The level of awareness established indicates that families have developed into active actors in maintaining the quality of child growth and development, while also demonstrating the effectiveness of educational interventions at the community level.

#### **1.5.2. Health and Nutrition Behavior**

The Health and Nutrition Behavior dimension emphasizes how families implement health practices and provide nutrition in their daily lives, especially for pregnant women, breastfeeding mothers, and toddlers. This dimension measures the extent to which a family's knowledge of health and nutrition is translated into concrete actions, such as consuming a balanced diet, maintaining personal and environmental hygiene, and following the recommendations of health workers. (Amran et al., 2025) In the context of stunting prevention, health behavior is a key factor, as the risk of stunting remains high if families possess knowledge but do not consistently implement it. Therefore, analysis of this dimension is important to assess family behavior patterns and factors influencing behavior change, including awareness, economic conditions, and the social environment.

The research findings indicate that the family has demonstrated positive nutritional behavior. Informant Mrs. Kinanti explained: "We prioritize nutritious food with a variety of vegetables, fruit, and protein, eating three meals a day, and healthy snacks." (Interview, July 10, 2025).

This statement demonstrates the family's understanding of the importance of diverse nutritional sources, including the intake of macro- and micronutrients needed to support growth and boost children's immunity. A regular diet, complemented by healthy snacks, demonstrates consistency in maintaining daily nutritional intake, which contributes to preventing malnutrition and fostering optimal child growth.

Breastfeeding and complementary feeding practices also reflect the implementation of recommended health behaviors. Mrs. Kinanti stated: "Yes, I often exclusively breastfeed for the first six months. After that, I started introducing complementary foods as recommended..." (Interview, July 10, 2025).

Exclusive breastfeeding for six months aligns with WHO guidelines, which have been shown to boost immunity and support brain development. The stages of complementary feeding, with attention to texture and type of food, demonstrate a good understanding of the baby's readiness and nutritional needs for the transition. This practice demonstrates family awareness of the importance of nutrition during the golden period (0–24 months) as a foundation for long-term stunting prevention.(Jultiyufansyah, 2025)

Overall, family health and nutrition behaviors demonstrated a good and consistent level of knowledge application. These findings confirm that community-level health education and counseling interventions have contributed to increased family health awareness and practices. Positive nutrition behaviors are a strong indicator that families are actively playing a key role in stunting prevention through concrete actions within the household.

#### **1.5.3. Access to Health Services and Family Planning (FP)**

The dimension of Access to Health Services and Family Planning (FP) Programs describes the extent to which families are able to utilize health

facilities, routine checkups, and family planning services to support maternal and child health and prevent stunting. Adequate access encompasses not only the availability of facilities such as integrated health posts (Posyandu) and community health centers (Puskesmas), but also the frequency of visits, family involvement in health services, and the use of family planning programs to regulate birth spacing. (Framesti et al., 2024) This dimension is important because the quality of health services a family receives directly impacts nutritional status, reproductive health, and child growth, particularly during the first 1,000 days of life.

Research findings indicate that pregnant women's access to health services is relatively high. This is reflected in Ms. Surfiani's statement: "Very often, around 6–9 times during pregnancy... to check weight, blood pressure, uterine fundal height, receive iron tablets, monitor fetal development, and consult with any complaints." (Interview, July 10, 2025).

These routine and scheduled visits demonstrate comprehensive pregnancy health monitoring, encompassing aspects of nutrition, maternal health, fetal development, and early management of complaints. The high frequency of visits indicates that families are optimally utilizing health services and demonstrates the effectiveness of preventive services, which are a crucial foundation for stunting prevention. Good access was also evident among families with toddlers. The interviewee, Mr. Muhammad Rabul Ikram, stated: "Yes, very often... usually around 6–10 times per year to monitor nutritional status, weight, height, immunizations, and regular vitamin administration." (Interview, July 10, 2025).

The regular pattern of visits indicates that families utilize integrated health service posts (Posyandu) for child growth monitoring, immunizations, and nutritional supplementation. Repeated interactions with health workers enable early detection of growth problems and ensure that children receive standard health interventions. Active family involvement in health services also indicates a high level of awareness regarding the importance of monitoring child growth as part of stunting prevention efforts.

Overall, the study results confirm that family access to health services and family planning programs is at a fairly good level. Regular visits during pregnancy, child growth monitoring, immunizations, and vitamin administration demonstrate the integration between family awareness and the availability of adequate public services. This contributes significantly to stunting prevention efforts through targeted, sustainable, and needs-based health interventions for families.

#### 1.5.4. Family Welfare Conditions

The results of the study indicate that family welfare conditions significantly influence a household's ability to meet children's nutritional and health needs as part of stunting prevention. Families with sufficient economic resources tend to be able to provide nutritious food and maintain consumption quality, while families with unstable

economic conditions face limitations in choosing healthy and varied foods. (Anwar et al., 2022)

Interview data supports this finding. Muhammad Rabul Ikram confirmed: "Yes, we provide nutritious food every day, although sometimes we have to choose according to our budget." (Interview, July 10, 2025).

This statement indicates that despite financial constraints, families still prioritize nutrition. However, food access is still influenced by income level. The same interviewee added: "If the economy is stable, we can buy better food." Meanwhile, Wa Suku confirmed the economic constraints faced by some families: "When finances are limited, we are forced to look for cheaper food alternatives, even though they are less nutritious."

This finding indicates that family welfare influences not only food variety but also the quality of long-term nutritional fulfillment. In the context of stunting prevention, economic conditions are a structural factor determining the sustainability of balanced nutrition practices. Therefore, health interventions need to be integrated with family economic empowerment, such as nutritious food assistance, nutrition program subsidies, and budget management education, so that families can continue to meet nutritional needs despite financial constraints.

#### 1.6. Result

The research results show that the role of family planning counselors contributes significantly to stunting prevention through education, mentoring, and strengthening family behavior. In the education and counseling dimension, counselors provide nutrition and parenting information through integrated health posts (Posyandu), community forums, and home visits. Families respond positively to this education, as reflected in the statement by a source who stated: "We can share experiences and become examples of good practices in the community." (Interview, July 10, 2025).

Family mentoring and coaching are conducted regularly through home visits, allowing for the adaptation of materials to suit family circumstances. One pregnant woman stated: "I am often visited by counselors and receive IEC (Information and Communication) about the 1,000 Days of Childhood (HPK)." (Interview, July 10, 2025).

This personalized approach aligns with the findings of Bhutta et al. (2013) regarding the effectiveness of mentoring in improving family adherence to appropriate nutritional practices. Families' knowledge and awareness increase thanks to information from counselors and Posyandu cadres. The informant understands that stunting impacts children's health and learning abilities: "Children get sick easily and have difficulty focusing, making it difficult to learn." (Interview, July 10, 2025).

This knowledge supports better health behaviors, including adopting a nutritious diet, exclusive breastfeeding, and complementary feeding according to recommendations.

Access to health services is also relatively good; pregnant women receive 6–9 check-ups during pregnancy, and toddlers are visited 6–10

times per year for nutritional monitoring and immunization. Economic factors also influence the quality of family nutrition. Despite having to adjust their budget, families still strive to provide nutritious food every day: "We provide nutritious food even though we have to choose according to our budget." (Interview, July 10, 2025).

Overall, education, mentoring, and a family's economic situation interact in determining the success of stunting prevention. The role of family planning counselors is key in linking knowledge, behavior, and access to health services so that families are able to implement nutrition practices and parenting patterns that support optimal child growth and development.

## CONCLUSIONS

This study concludes that the role of family planning counselors and Posyandu cadres significantly influences stunting prevention through education, mentoring, and monitoring of at-risk families. Continuous education increases family knowledge and awareness regarding nutrition, parenting, and child health, which is then applied through exclusive breastfeeding, age-appropriate complementary feeding (MP-ASI), nutritious diets, and growth monitoring. Routine mentoring allows for early detection of nutritional and health problems and improves family compliance with maternal and child health services. Furthermore, economic conditions have been shown to influence the availability of nutritious food, making the role of counselors as educators and motivators crucial in helping families manage resources optimally. Therefore, the success of stunting prevention is determined by the synergy between the active roles of counselors and cadres, family behavior and awareness, access to health services, and family welfare, indicating that multidimensional interventions are needed to sustainably reduce stunting prevalence.

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