

# Behavioral Factor Analysis of Blood Supplement Tablet Consumption in Adolescent Girls as an Effort to Prevent Stunting

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**Abstract:** The provision of blood supplement tablets (TTD) for adolescent girls is one of the special interventions being pursued by the government to improve the compliance of adolescent girls in taking blood supplement tablets. The government collaborates with health services and educational institutions in distributing TTD. SMP Negeri 2 Bumi Ratu Nuban is a pilot school in the working area of Puskesmas Inpatient Wates. However, the lack of awareness and support provided makes adolescent girls irregular in consuming TTD. The purpose of this study was to analyze the behavioral factors of blood supplement tablets consumption in adolescent girls in an effort to prevent stunting. This type of analytical observational research with a cross sectional design, the population of all adolescent girls. sampling using total sampling with the number of respondents 117 adolescent girls who have menstruated at SMPN 2 Bumi Ratu Nuban. Data collection using a questionnaire. Data analysis using the Chi-Square test. Based on the results of the chi-square test there is a relationship between knowledge (P-Value= 0.002; OR= 7.5; 95%; CI= 1.93-29), attitude (P-Value= 0.039; OR= 2.42, CI= 1.116-5. 252), health worker support (P-Value = 0.003; OR = 3.68; 95%; CI = 1.62-8.36) and parental support (P-Value= 0.000; OR= 8.2; 95%; CI= 3.44-19.6) with the consumption behavior of blood supplement tablets in adolescent girls. It is expected that educational activities and monitoring of my health report card book are carried out continuously by health workers who can involve teachers and parents directly.

**Keywords:** Adolescent girls; Behavior; Blood added tablets; Stunting

## Introduction

Health and nutrition problems in Indonesia in the period of the First 1000 Days of Life are the focus of attention at this time, this matter is intertwined not only because of the causes but because of the resulting morbidity and mortality rates, this matter can also have consequences for the quality of life of individuals that are permanent until adulthood (Kemenkes RI, 2018). Based on the priorities of the 1000 HPK program according to Achadi et al. (2021), the priority intervention package for preventing stunting in toddlers with an emphasis on the 1000 HPK period is adolescent girls (Rematri) and prospective brides where specific prioritized interventions are increasing knowledge and behavior in taking TTD (Blood Additive Tablets) and implementing nutritional diets.

And implementing a balanced nutritional diet (Achadi et al., 2021). The distribution of TTD for rematriates is currently distributed through schools (Kemenkes RI, 2021). The practice of giving TTD with a composition (60 mg elemental iron and 400 mcg folic acid) is 1 tablet per week for 52 weeks (1 year) in rematriates aged 12-18 years (Kemenkes RI, 2020). Minister of Health Ir. Budi Gunadi Sadikin stated that healthy adolescents are an investment in the nation's future. The role of the current young generation is very important in continuing the relay of development with a young population will be a great country later. The health and nutritional status of adolescents must be prepared early, so that in 2030 when Indonesia gets a demographic bonus, it can produce a productive, creative and competitive next generation. The government program that is currently being

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implemented in relation to stunting prevention is the prevention of anemia in rematriates (Kemenkes RI, 2021).

Rematriates are more likely to suffer from anemia, this is because when rematriates enter puberty they experience rapid growth so that their iron needs also increase, iron is twice as much needed by the rematriate body during menstruation because rematriates will lose blood every month. Rematriates who suffer from anemia when they become pregnant are at risk of having babies with low birth weight (LBW) and stunting (Kemenkes RI, 2018).

The 2018 Global Nutrition Report explains that Indonesia is 1 of 28 countries that are experiencing two nutritional problems, one of which is stunting. The prevalence of stunting in Indonesia in 2018 was 30.8% or around 7 million toddlers (Achadi et al., 2021). The Ministry of Health through the Director General of Public Health issued circular No. HK.03.03/V/0595/2016 regarding the provision of blood supplement tablets to rematriates and WUS (Women of Fertile Age). The government makes preventive efforts by providing TTD for rematriates and WUS, especially those who are pregnant. TTD is provided free of charge (Dirjen Kesmas, 2016). This is done by the government to prevent stunting in babies born to rematriates who suffer from anemia.

Based on the results of the Indonesian Toddler Nutrition Status survey (SSGBI), the prevalence of stunting in Indonesia in 2019 was successfully reduced to 27.67% from 37.85% in 2013, but this figure is still higher than the maximum stunting tolerance for stunting set by WHO, which is 20% (BKKBN, 2021). Based on the results of the Ministry of Health's Indonesian nutritional status study (SSGI), it was found that the prevalence of stunting among Indonesian toddlers reached 24.4% in 2021, meaning that almost 1 in 4 toddlers was stunted. Indonesia's stunting prevalence is included in the moderate group according to the World Health Organizations (WHO) standards, while the prevalence of stunting in Lampung Province in 2021 is 18.5% and Central Lampung Regency is 20.8% (Dinas Kesehatan Provinsi Lampung, 2021). In the 2020 Lampung Province level stunting FGD meeting, the progress of implementing 8 convergence actions in 6 priority districts was assessed, one of which was in Central Lampung District.

The 2019 Indonesian Health Profile shows that the coverage of TTD for rematriates in 2018 was 46.56%, which exceeded the Ministry of Health's strategic plan target of 30% (RI, 2020). The proportion of ever-pregnant women aged 10-54 years who have received TTD by province, in Indonesia alone, is 90.4% and Lampung is 91.2% (Kemenkes RI, 2021). Based on SSGI 2021 data,

there are five provinces with acute categories (stunted <20% and wasted  $\geq$  5%), namely Lampung, Bangka Belitung Islands, Riau Islands, DKI Jakarta and DI Yogyakarta.

Based on the results of an interview with the Head of the Wates Inpatient Puskesmas located in Bumi Ratu Nuban District, Central Lampung Regency, he stated that stunting is still the main focus of the current problem, there are 146 stunted toddlers in the Wates Puskesmas working area. Currently, SPM Puskesmas has carried out a government program, namely distributing TTD for adolescents aged 12-18 years who have menstruated. The activity is carried out in schools such as junior high schools (SMP) and senior high schools (SMA). This effort was made to prevent new cases of stunting in the Wates Health Center working area. A total of 1,600 blood supplement tablets have been distributed in junior and senior high schools in the Wates Puskesmas working area as of August 2022. The socialization and distribution program of blood supplement tablets is usually carried out every 3 months, rematriates are given 1 strip of blood supplement tablets containing 10 pieces, which means that every 1 piece of vitamin Fe is taken once every 1 week. The program of giving blood supplement tablets has been running from year to year.

Based on the data obtained, the researcher is interested in conducting research at SMP Negeri 2 Bumi Ratu Nuban. According to the TTD program holder, SMP Negeri 2 Bumi Ratu Nuban is a junior high school that is a pilot in the Puskesmas working area, which hopes that rematriates in the school can have obedient behavior in consuming TTD so that it can become a benchmark or example for junior high schools/equivalent in the Wates Inpatient Puskesmas working area. However, it is suspected that rematriates in the school still do not consume TTD regularly. Another reason for taking the research location is that there has been no similar research related to the behavior of rematriates in consuming blood supplement tablets as an effort to prevent stunting either carried out at the school or at other schools in the Puskesmas working environment.

Based on the results of previous studies, it is explained that there is a relationship between knowledge and adolescent behavior in consuming blood supplement tablets. The knowledge factor is also in line with changes in adolescent attitudes, in this case it is revealed that attitudes have a good influence on changes in rematriate behavior in consuming TTD (Tirthawati et al., 2020).

Parental support for rematriates in consuming TTD can affect good behavior change in consuming TTD (Savitry et al., 2017). Health worker support in providing

health education has an impact on rematriate behavioral compliance in consuming TTD regularly (Tirthawati et al., 2020). The role of health workers and families is very important in monitoring the behavior of rematriates in consuming TTD.

**Method**

The type of research used is analytic observational. Observational research is conducted to observe research subjects and look for data related to research and does not provide treatment, and is analytical in nature to see the causal relationship between the independent variable and the dependent variable. The research design used is a quantitative method with a cross sectional design.

This research was conducted in January 2023 at SMP Negeri 2 Bumi Ratu Nuban Central Lampung. The population in this study were all rematriates who had experienced menstruation at SMP Negeri 2 Bumi Ratu Nuban, Central Lampung Regency in 2022/2023, totaling 117 respondents. The sample in this study were rematriates at SMP Negeri 2 Bumi Ratu Nuban who had experienced menstruation, totaling 117 respondents. The sampling method uses total sampling technique, namely determining the sample based on the total population. The variables in this study used independent variables or independent variables consisting of knowledge, attitudes, health worker support and parental support. The dependent variable or independent variable is the behavior of rematriates in consuming blood supplement tablets (TTD).

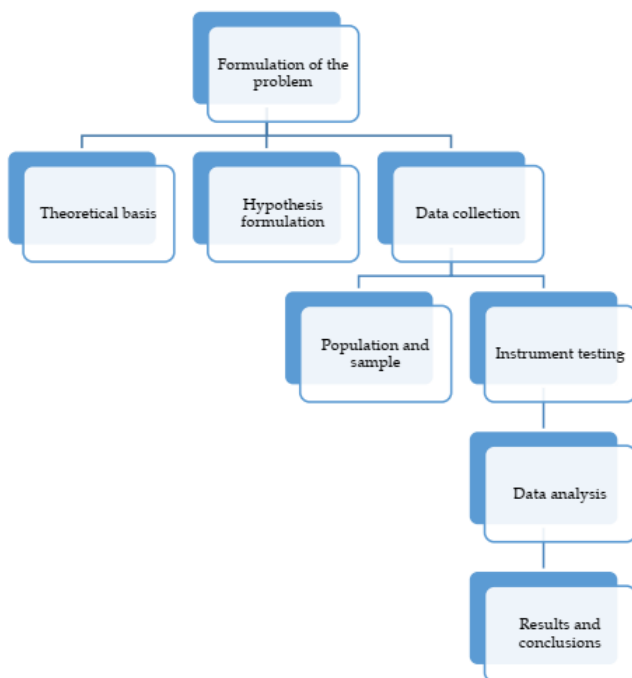


Figure 1. Research scheme

**Result and Discussion**

This study involved 117 rematriates at SMP Negeri 2 Bumi Ratu Nuban who acted as research respondents. The factors that have been studied are the relationship with the level of knowledge, attitudes, parental support and health worker support with TTD consumption behavior in rematriates.

**Table 1.** Frequency Distribution of Behavior, Knowledge, Attitude, Health Worker Support and Parental Support in Adolescent Girls at SMP Negeri 2 Bumi Ratu Nuban in Consuming TTD in 2023

Variable	Category	Frequency	%
Behavior	Good	75	64.1
	Not good	42	35.9
Total		117	100
Knowledge level	Good	104	88.9
	Simply	13	11.1
Total		117	100
Attitude	Positive	69	59
	Negative	48	41
Total		117	100
Health Worker Support	Positive	80	68.4
	Negative	37	31.6
Total		117	100
Parental Support	Positive	64	54.7
	Negative	53	45.3
Total		117	100

Based on table 1, it was found that the majority of adolescent girls at SMP Negeri 2 Bumi Ratu Nuban had good behavior in consuming TTD, namely 75 adolescent girls or around 64.1%, while for adolescent girls who had bad behavior in consuming TTD were 42 respondents or around 35.9%. Knowledge of adolescent girls at SMP Negeri 2 Bumi Ratu Nuban the majority had good knowledge as many as 104 respondents (88.9%), while for adolescent girls with sufficient knowledge as many as 13 respondents (11.1%). The attitude of adolescent girls at SMP Negeri 2 Bumi Ratu Nuban with a positive attitude was 69 respondents (59%), while adolescent girls with a negative attitude were 48 respondents (41%) at SMP Negeri 2 Bumi Ratu Nuban. The majority of health workers at the Wates Inpatient Health Center have positive support of 68.4% with the behavior of adolescent girls in consuming TTD. While 31.6% of health workers have negative support with the behavior of adolescent girls in consuming TTD. Parents with positive support of 54.7% and negative support of 45.3% with the behavior of rematriates in SMP Negeri 2 Bumi Ratu Nuban in consuming TTD.

Based on table 2, the majority of adolescent girls have good knowledge as many as 104 respondents with good behavior in consuming TTD by 69.2% or 72 respondents and bad behavior in consuming TTD by

30.8% or 32 respondents. Respondents with sufficient knowledge were 13 people with 3 adolescent girls (23.1%) behaving well in consuming TTD and 10 adolescent girls (76.9%) respondents had sufficient behavior in consuming TTD. Based on the results of the Chi-square test analysis, the p-value is 0.002 (<0.05), which means that there is a significant relationship between the level of knowledge and the consumption behavior of TTD rematriates. The Odds Ratio value of 7.5 means that respondents who have good knowledge have a chance to behave well in consuming TTD as much as 7.5 times greater than respondents who have sufficient knowledge.

**Table 2** Relationship between Knowledge and TTD Consumption Behavior of Adolescent Girls as an Effort to Prevent Stunting

Knowledge level	Consumption TTD				Total	P-Value	OR (CI)	
	Good		Not good					
	F	%	F	%				
Good	72	69.2	32	30.8	104	100	0.002	7.5
Simply	3	23.1	10	76.9	13	100		(1.9-29)

**Table 3.** Relationship between Attitude and TTD Consumption Behavior of Adolescent Girls as an Effort to Prevent Stunting

Attitude	Consumption TTD				Total	P-Value	OR (CI)	
	Good		Not Good					
	F	%	F	%				
Positive	50	72.9	19	27.5	69	100	0.039	2.42
Negative	25	52.1	23	47.9	48	100		(1.11-5.25)

Based on table 3, female adolescents at SMP Negeri 2 Bumi Ratu Nuban who had a positive attitude were 69 rematriates, with 50 (72.9%) rematriates behaving well in consuming TTD and 19 (27.5%) rematriates behaving poorly in consuming TTD. Rematriates with negative attitudes were 48 respondents with 25 (52.1%) respondents behaving well in consuming TTD and 23 (47.9%) respondents with bad behavior in consuming TTD. Based on the results of the Chi-square test analysis, the p-value is 0.039 (<0.05), which means that there is a significant relationship between attitude and TTD consumption behavior in rematriates. The Odds Ratio value of 2.42 means that respondents who have a positive attitude have a chance to behave well in consuming TTD as much as 2.42 times greater than respondents who have a negative attitude.

Based on table 4 adolescent girls with positive health worker support were 80 respondents, 59 (73.8%) respondents behaved well in consuming TTD and 21 (26.3%) respondents behaved poorly in consuming TTD. Rematri who had negative health worker support were 37 respondents with 16 (43.2%) respondents behaving

well in consuming TTD and 21 (56.8%) respondents with bad behavior in consuming TTD. Based on the results of the Chi-square test analysis, the p-value is 0.003 (<0.05), which means that there is a significant relationship between support and TTD consumption behavior in rematriates. The Odds Ratio value of 3.7 means that respondents who have positive energy support have a chance to behave well in consuming TTD as much as 3.7 times greater than respondents who have negative health worker support.

**Table 4.** Relationship between Health Worker Support and Adolescent Girls' TTD Consumption Behavior as an Effort to Prevent Stunting

Health Worker Support	Consumption TTD				Total	P-Value	OR (CI)	
	Good		Not Good					
	F	%	F	%				
Positive	59	73.8	21	26.3	80	100	0.003	3.7
Negative	16	43.2	21	56.8	37	100		(1.6-8.3)

**Table 5.** Relationship between Parents' Support and Adolescent Girls' TTD Consumption Behavior as an Effort to Prevent Stunting

Parental Support	Consumption TTD				Total	P-Value	OR (CI)	
	Good		Not Good					
	F	%	F	%				
Positive	54	84.4	10	15.6	64	100	0.000	8.2
Negative	21	39.6	32	60.4	53	100		(3.4-19.6)

Based on table 5, 64 adolescent girls had positive parental support with 54 (84.4%) respondents with good behavior in consuming TTD and 10 (15.6%) respondents with bad behavior in consuming TTD. Rematri who had negative parental support were 53 respondents with 21 (39.6%) respondents behaving well in consuming TTD and 32 (60.4%) respondents with bad behavior in consuming TTD. Based on the results of the Chi-square test analysis, the p-value is 0.000 (<0.05), which means that there is a significant relationship between parental support and TTD consumption behavior in rematriates. The Odds Ratio value of 8.2 means that respondents who have positive parental support have a chance to behave well in consuming TTD as much as 8.2 times greater than respondents who have negative parental support.

Based on the results of Chi-Square analysis of 117 rematriates, there were 104 rematriates with good knowledge with 72 (69.2%) rematriates behaving well in consuming TTD and 32 (30.8%) rematriates behaving poorly in consuming TTD. Rematriates with sufficient knowledge were 13 people with 3 (23.1%) rematriates behaving well in consuming TTD and 10 (76.9%) rematriates had bad behavior in consuming TTD. Based on the results of the Chi-square test analysis, the P-Value



is 0.002 ( $<0.05$ ), which means that there is a significant relationship between the level of knowledge and the consumption behavior of TTD rematriates. The Odds Ratio value of 7.5 means that respondents who have good knowledge have a chance to behave well in consuming TTD as much as 7.5 times greater than respondents who have sufficient knowledge.

This research is in line with the precede-proceed theory (1991) according to Lawren Green, a person's behavior can be influenced by predisposing factors, one of which is knowledge. Changes in community behavior can be influenced by knowledge factors, this happens because someone with good knowledge can form good perceptions, so that they can form awareness and positive attitudes that can form positive behavior changes. In accordance with the theory expressed by Notoatmodjo (2014) knowledge is the result of a process obtained through senses such as eyes, nose, ears and others. Notoatmodjo (2014) explained that individuals have the ability to deal with situations in their environment such as connecting experiences with conditions in the field objectively so as to form behavior or beliefs that are believed, according to researchers this is one of the backgrounds why good knowledge is in line with good behavior change as well.

According to Immanuel Kant (1724-1804) and Rene Descartes (1596-1650) in the Cognitive Psychology School, behavior is not only caused by sense knowledge, but knowledge of the mind is important, this happens because the soul is a tool to provide reasoning and understanding which will become knowledge and shape one's behavior that occurs through cognitive processes (thinking and understanding) (Notoatmodjo, 2014).

This research is in line with research conducted by Tirthawati et al. (2020) in his research found that the results of the Chi-Square analysis with a P-Value of 0.000  $<0.05$  which means that there is a significant relationship between knowledge and TTD consumption, in his research it is explained that respondents who have a high level of knowledge related to anemia tend to consume TTD regularly, namely 29 respondents 78.4%. Adolescents with good knowledge related to anemia have sufficient information regarding the risks that will be received by themselves, this is what makes adolescents obedient in consuming TTD.

This study is also in line with research conducted by Murnariswari et al. (2021) in her study found that most respondents with sufficient knowledge and consumed TTD as much as 38% with a P-Value of 0.002  $<0.05$ , which means that there is a significant relationship between the level of knowledge and rematriate compliance in consuming TTD. Research conducted by Muhani et al. (2021) obtained a P-Value of 0.001 ( $<0.05$ ) which means that there is a significant

relationship between the knowledge of pregnant women and the consumption behavior of TTD in the working area of the Pugung Tampak Puskesmas, West Coast Regency in 2019, with an OR value of 6.9, which means that pregnant women with good knowledge have a chance to be obedient in consuming TTD 6.9 times greater than pregnant women with less knowledge.

Good knowledge can shape good behavior as well, this happens because one's understanding can change one's mindset in behavior. Good knowledge related to TTD is related to good behavior as well, this happens because rematriates who have good knowledge can form awareness in creating the will to make good behavior changes in themselves, namely consuming TTD regularly.

At SMPN 2 Bumi Ratu Nuban, the practice of consuming TTD is carried out every Thursday, at which time TTD is distributed from teachers to students and drunk directly under the supervision of the UKS teacher. A total of 116 (98%) rematriates at SMPN 2 Bumi Ratu Nuban understand that TTD must be consumed as much as 1 tablet per week, 98% of rematriates know that it is recommended to consume TTD with water and eat balanced nutritious food. Not only that, 110 rematriates (97.4%) knew that the effort to give TTD was to prevent anemia in adolescent girls.

56.4% of rematriates did not know that the recommendation to drink TTD was an effort to prevent stunting in children who would be born later, meet iron intake and prevent anemia. How important the function of TTD is if consumed regularly, unfortunately this is not widely known by respondents. The low level of understanding of rematriates (28.2%) regarding the need for iron needed by the body, as well as other functions rather than health prevention efforts that can adversely affect their health and the generation to be produced. Therefore, rematriates have limited understanding of the definition of TTD or iron, as well as the positive and negative impacts they will experience.

Good knowledge can shape good behavior in rematriates in consuming TTD, this happens because one of the factors that can influence knowledge is education, where in this case rematriates get education every 3 months conducted by health workers related to TTD.

Based on the results of Chi-square analysis between attitude and rematriate behavior in consuming TTD, there were 69 respondents who had a positive attitude with 50 (72.5%) respondents behaving well in consuming TTD and 19 (27.5%) respondents behaving poorly in consuming TTD. Rematriates who have a negative attitude are 48 respondents with 25 (52.1%) respondents behaving well in consuming TTD and 23 (47.9%) respondents with bad behavior in consuming

TTD. Based on the results of the Chi-square test analysis, the P-Value is 0.039 ( $<0.05$ ), which means that there is a significant relationship between attitude and TTD consumption behavior in rematriates. The Odds Ratio value of 2.42 means that respondents who have a positive attitude have a chance to behave well in consuming TTD as much as 2.42 times greater than respondents who have a negative attitude.

This study is in line with Green's theory, 1990 which states that changes in a person's behavior are influenced by 3 factors, namely supporting factors or predisposing factors (knowledge, attitudes, beliefs, beliefs, values and others), enabling factors (environment, health facilities, facilities and infrastructure and others) and encouraging factors or reinforcing factors (health workers, teachers, community or traditional leaders and others) (Notoatmodjo, 2014).

There is a direct relationship between attitude and behavior (Azwar, 2021). According to Notoatmodjo (2014) attitude is the result of a stimulus or object that will produce a reaction or response in a person. Attitude is a result of thinking, opinion and action. Individual mindsets towards the environment produce good knowledge, this is a cognitive component.

Attitudes can influence changes in behavior that are influenced by subjective norms or a belief given by others with the aim that the individual can have beliefs in accordance with what is given which then forms an intention to behave, changes in behavior obtained based on attitudes obtained directly through personal experience, the changes only apply to certain conditions. However, when the attitude obtained is not the result of a pressure, the behavior that will result is the actual behavior (Azwar, 2021). The results of this study are in line with research conducted by Anisa et al. (2022) in their research revealed that there is a significant relationship between attitude and behavior of fe tablet consumption during menstruation in rematriates with a P-Value of 0.0005  $<0.05$ .

The majority of respondents agreed (61.5%) that rematriates need to consume TTD as much as 1 tablet per week to prevent anemia. The benefits obtained are no less numerous such as preparing themselves for a nutritional status that can support the growth and development of the baby when entering pregnancy is an important thing that must be prepared by rematriates, this means that rematriates need higher iron than young men. The majority of respondents answered strongly agree (49.6%) although there are some side effects that will be produced, but another side effect that is felt in the body is that the body becomes healthier. Therefore, TTD should not only be consumed when rematriates feel dizzy or unwell or only for married women.

A good attitude can shape good behavior as well, a good assessment of the iron needed by the body can shape a person's mindset regarding the positive and negative impacts, so that it can increase a person's good behavior in consuming TTD. Attitudes can occur because they involve several components such as thoughts, feelings, attention and other psychological symptoms. Attitude is a readiness to act (Notoatmodjo, 2014).

Based on the results of the analysis on the variable of health worker support, it was found that the support of 80 positive health workers with good behavior in consuming TTD was greater, namely 59 respondents (73.8%) compared to bad behavior in consuming TTD by 21 (26.3%) respondents. Negative health worker support was 37 respondents with good behavior in consuming TTD, namely 16 (43.2%) respondents and bad behavior in consuming TTD as many as 21 (56.8%) respondents. It is known that the result of the P-value is 0.003 ( $<0.05$ ), which means that there is a significant relationship between health worker support and TTD consumption behavior in rematriates. The Odds Ratio value of 3.68 means that respondents who have positive health worker support have a tendency for positive behavior 3.68 times greater than people who have negative health worker support.

Based on Green's theory in Notoatmodjo, behavior can be influenced by three factors, one of which is a driving factor such as the role of health workers in educating the public in changing their behavior (Notoatmodjo, 2014). Improving the behavior of rematriates in consuming TTD is one of them by motivating, providing education and providing direct assistance, the role of health workers has a positive effect of 0.322 on TTD consumption behavior, where the T-Statistic value is 3.633 ( $>1.96$ ) (Putri, 2020). This study is in line with previous research that there is a relationship between health worker support and TTD consumption practices (P-Value 0.003  $<0.05$ ) with health workers supporting 62.2% (Rahayuningtyas et al., 2021).

The role of health workers greatly influences the tendency of mothers to behave when consuming TTD, the results showed a P-Value of 0.001 with an OR = 7.16 which means that there is a significant relationship between the role of health workers and TTD consumption behavior in mothers in the Pugung Tampak Health Center working area, West Pesisir Regency in 2019, mothers with good health worker support had a chance to be obedient in consuming TTD 7.16 times greater than mothers who had poor health worker support (Muhani et al., 2021).

The role of health workers can have an impact on changing healthy behavior in rematriates by approaching, educating, motivating and assisting or

monitoring in consuming TTD. The role of health workers in educating rematriates is going well, this is supported by the good knowledge of adolescents in consuming TTD, namely 1 TTD every week, not only that, most rematriates have good behavior in consuming TTD. This happened because the distribution of TTD was carried out directly at school under the supervision of the UKS teacher so that all respondents claimed to have consumed TTD.

Health counseling is conducted once every 3 months, in this process there are educational activities and distribution of TTD from health workers to UKS teachers. The lack of a health counseling process makes rematriates not understand the function of iron needed by the body and also the positive effects obtained by themselves, so there are still rematriates who consume TTD when health workers come only. The lack of assistance and monitoring by health workers in monitoring rematriates when consuming TTD is thought to be one of the factors that still causes rematriates to have bad behavior in consuming TTD.

Based on the results of the Chi-square analysis on the variable of parental support with rematriate behavior in consuming TTD, there are analysis results that parental support in the positive category is 64 people with 54 respondents (84.4%) good TTD consumption behavior and 10 respondents (15.6%) TTD consumption behavior in the bad category. Respondents with negative parental support category were 53 respondents with 21 respondents (39.6%) with good TTD consumption behavior and 32 respondents (60.4%) with bad TTD consumption behavior. Based on the results of the analysis, the P-value is 0.000 ( $<0.05$ ), which means that there is a significant relationship between parental support and TTD consumption behavior in rematriates. The Odds Ratio value of 8.22 means that respondents who have positive parental support have a chance to behave well in consuming TTD as much as 8.22 times greater than respondents who have negative parental support.

This research is in line with research conducted by Estiyani (2020) and Rahayuningtyas et al. (2021). Research conducted by Estiyani (2020) found that high family support resulted in no anemia in 22 respondents with a P-Value of 0.001  $<0.005$ , which means that there is a relationship between parental support and TTD consumption behavior with the incidence of anemia in rematriates. Likewise, research conducted by Rahayuningtyas et al. (2021) also shows a relationship between family support and TTD consumption practices in rematriates with a P-Value of 0.000  $<0.05$ , family support from both parents, namely father and mother, such as emotional support, namely assistance when

consuming TTD is needed so that rematriates can be obedient in consuming TTD.

Lack of parental knowledge related to anemia causes low supervision by parents to their children in consuming TTD (Apriningsih, et al., 2019). This happens because rematriates spend almost 7 to 8 hours per day at school, the practice of consuming TTD is also carried out directly at school not at home so that monitoring in consuming TTD is carried out under the supervision of the teacher. Parental support in the positive category is not in line with the good behavior carried out by rematriates in consuming TTD. This is because the process of distributing and consuming TTD occurs at school, the distribution of TTD is carried out directly by the teacher every Thursday as much as 1 tablet per week and that is when the rematriate receives and is immediately asked to take TTD directly under the supervision of the authorized teacher.

Based on the theory of Empiricism according to Aristotle adopted by John Locke (1632-1704) the role of educators or teachers is quite influential in shaping individual personalities, this happens because education is an effort that can shape the character of its students, this is driven by the experiences gained during the education process (Wawan et al., 2018). Meanwhile, according to Jan Jack Rousseau (1712-1778) in the theory of Naturalism, the environment can influence a person's behavior. According to William Steam (1871-1939) education must be given to every individual to shape a person's personality or behavior for the better. The atmosphere in behavior can also affect individual mindsets such as the atmosphere of school or other environments (Notoatmodjo, 2014).

Positive parental support for rematriates can shape good behavior, this happens because parents who are actively involved and always monitor rematriates in consuming TTD make them feel they have good support. TTD which is distributed 1 tablet per week does not involve parents directly, in this case when TTD is distributed at once 12 tablets per 3 months, parents can directly monitor when their children take TTD. Based on the results of the study, most of the TTD was obtained from schools/UKS, therefore teachers have a good role in supporting rematriates when consuming TTD, this happens because TTD is consumed directly at school under the supervision of teachers, with the hope that good behavior in consuming TTD can be formed and can be improved.

Parents' monitoring in supervising rematriates when consuming TTD also has an impact on their children, so parents who have awareness regarding the importance of consuming TTD also have an impact on monitoring their children, especially rematriates. Most

parents do not take the initiative to provide TTD in their homes.

## Conclusion

Based on the results of the study entitled "Analysis of Behavioral Factors of Blood Addition Tablet Consumption in Adolescent Girls as an Effort to Prevent Stunting" the following conclusions can be drawn: There are 104 (88.9%) adolescent girls with good knowledge and 13 (11.1%) adolescent girls with sufficient knowledge. There are 69 (59%) adolescent girls with positive attitudes and 48 (41%) adolescent girls with negative attitudes. There were 80 (68.4%) adolescent girls with positive health worker support and 37 (31.6%) adolescent girls with negative health worker support. There were 64 (54.7%) adolescent girls with positive parental support and 53 (45.3%) adolescent girls with negative parental support. There is a significant relationship between knowledge and consumption behavior of blood supplement tablets for adolescent girls as an effort to prevent stunting. There is a significant relationship between attitude and the consumption behavior of blood supplement tablets of adolescent girls as an effort to prevent stunting. There is a significant relationship between the support of health workers and the consumption behavior of blood supplement tablets for adolescent girls as an effort to prevent stunting. There is no significant relationship between parental support and the consumption behavior of blood supplement tablets of adolescent girls as an effort to prevent stunting.

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## Author Contributions

The role of Ida Maya Meika Sari in this study was to compile the background and find problems that occur, design research methods, analyze, process and present data, discuss research results and findings.

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## Conflicts of Interests

Because this research is independent, there is no conflict of interest to anyone.

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