

ABSTRACT

Background: Childhood tuberculosis and stunting are public health issues in Indonesia which have become the priorities to be tackled. This asks for an integration of tuberculosis (TB) care with child health and nutrition programs. The TB screening for stunted children pilot project has been implemented. However, the question arose whether this screening program will be proven as acceptable and feasible to manage both childhood TB and stunting as an early-stage health interventions in the community, implementer, and the stakeholder level.

Objective: This study aimed to assess acceptability and feasibility of TB screening for stunted children under 5 years of age.

Method: This was a mixed-methods observational study to assess and explore the acceptability and feasibility of TB screening for stunted children under five years of age. Theoretical framework of acceptability (TFA) and FRAME-IT framework were used for the quantitative survey and in-depth interview guides.

Results: Among the parents, acceptability of the TB screening for stunted children was generally high with participants reporting high perceived effectiveness, intervention coherence, positive self-efficacy and affective attitude, acceptable degree of burden and opportunity cost, as well as reporting the intervention as ethical. The stakeholders and implementers perceived a conditional feasibility with support of multi-stakeholder collaboration and improvement of service delivery.

Conclusions: The tuberculosis screening was reported to be moderately acceptable. However, the implementers' acceptability is still hindered by the presence of overwhelming burden and lack of training. Even though the components for supporting feasibility and acceptability work well together, there needs to be some adjustments to improve and maintain the service delivery.

Keywords: tuberculosis, stunting, acceptability, feasibility, implementation research

ABSTRAK

Latar Belakang: Tuberkulosis dan stunting pada anak merupakan masalah kesehatan masyarakat di Indonesia yang menjadi prioritas penanganan. Untuk itu, diperlukan integrasi layanan tuberkulosis (TBC) dengan program kesehatan dan gizi anak. Proyek percontohan skrining TB untuk balita stunting telah dilaksanakan. Namun, terdapat pertanyaan apakah program skrining ini dapat diterima dan layak untuk menangani TB dan stunting pada balita sebagai intervensi kesehatan tahap awal di tingkat masyarakat, pelaksana dan pemangku kepentingan.

Tujuan: Penelitian ini bertujuan untuk menilai *acceptability* dan *feasibility* skrining TB untuk balita stunting.

Metode: Penelitian ini merupakan penelitian observasional dengan metode campuran untuk menilai dan mengeksplorasi *acceptability* dan *feasibility* skrining TB pada balita stunting. Kerangka teori *acceptability* (TFA) dan kerangka teori FRAME-IT digunakan untuk survei kuantitatif dan panduan wawancara mendalam.

Hasil: Di antara para orang tua, penerimaan skrining TB untuk balita stunting secara umum tinggi, dimana para peserta melaporkan efektivitas yang dirasakan tinggi, koherensi intervensi, *self-efficacy* dan sikap afektif yang positif, *burden* dan *opportunity cost* yang dapat diterima, serta melaporkan bahwa intervensi tersebut etis. Pemangku kepentingan dan pelaksana menganggap intervensi ini layak dilakukan dengan dukungan kolaborasi dengan lintas pemangku kepentingan dan peningkatan penyediaan layanan.

Kesimpulan: Skrining tuberkulosis dilaporkan dapat diterima secara moderat. Namun, *acceptability* pelaksana masih terhambat oleh adanya beban yang berlebihan dan kurangnya pelatihan. Meskipun komponen-komponen pendukung *feasibility* dan *acceptability* berjalan dengan baik, namun perlu ada beberapa penyesuaian untuk meningkatkan dan mempertahankan pemberian layanan.

Kata kunci: tuberkulosis, stunting, *acceptability*, *feasibility*, penelitian implementasi