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## Stunting Eradication Policy in Palembang City: Analysis of Government Involvement in Improving Child Welfare

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**Abstract:** This study examines the factors influencing the success of stunting reduction policies in Palembang City, focusing on internal and external elements that shape policy outcomes. The research utilizes a descriptive case study approach, analyzing data through interviews, observations, and document reviews. Key internal factors include government leadership, inter-agency coordination, human resources, and the utilization of data and technology. External factors encompass social and cultural aspects, economic conditions, support from private sectors, and national policies. The findings highlight the significance of strong leadership and effective collaboration among stakeholders, emphasizing the role of community involvement and technological advancements in addressing stunting. The study concludes with recommendations to enhance policy implementation and sustain long-term success in reducing stunting prevalence.

**Keywords:** Stunting, Policy Success, Government Leadership, Community Involvement, Technological Advancement

### INTRODUCTION

According to data from the World Health Organization (WHO), stunting is still a significant global health problem. Stunting, or failure to thrive, is a global health problem that primarily affects developing countries such as Southeast Asia, which accounts for more than a quarter of the world's child stunting cases (Azriani et al., 2024). Indonesia faces serious challenges related to stunting (Sufri et al., 2023). Based on a report from the Ministry of Health, the prevalence rate of stunting in Indonesia fell by 2.8% from 24.4% in 2021 to 21.6% in 2022 (Laksono et al., 2024). The government has set a target to reduce the stunting rate to 14% by 2024 (Melisa et al., 2022).

Stunting is a growth problem caused by long-term malnutrition (Ali, 2021) which occurs due to inadequate food intake. This condition can begin during the fetal period in the womb and is only clearly visible when the child is two years old (Akbar et al., 2023; Apriliana et al., 2022; Saleh et al., 2021). In 2015, the stunting rate in toddlers in Indonesia reached 36.4% (Wulandary & Sudiarti, 2021). More than a third or around 8.8 million toddlers, experience nutritional problems that cause their height to be below the standard for their age (Puteri et al.,

2021, 2021; Rachmawati et al., 2022). This figure exceeds the threshold set by WHO, which is 20% (Mediani et al., 2022). The prevalence of stunting in Indonesian toddlers is the second highest in Southeast Asia, after Laos which reached 43.8% (Ardianto et al., 2022; Marantika, 2021; Munthe, 2021).

Based on the 2017 Nutritional Status Monitoring (PSG) data, 26.6% of toddlers in Indonesia experienced stunting (Rini et al., 2021). According to Aghadiati et al.; Hutabarat, (2023; 2022), this figure includes 9.8% of toddlers classified as very short and 19.8% as short. In 2018, the Indonesian Ministry of Health, through the Health Research and Development Agency (Litbangkes), again conducted Basic Health Research (Riskesdas) to measure the prevalence of stunting (Suarniti et al., 2024; R. D. Wulandari et al., 2022). The results of the study showed that the prevalence of stunting decreased from 37.2% in Riskesdas 2013 to 30.8% (Mantasia & Sumarmi, 2022). Assessment of toddler nutritional status is generally carried out using anthropometric methods (Anjos et al., 2021; Cheikh Ismail et al., 2022; Kamruzzaman et al., 2021). Overall, anthropometry includes various measurements of body dimensions and composition at various ages and nutritional levels (Kobylińska et al., 2022; Padilla et al., 2021).

According to the 2017 Nutritional Status Monitoring (PSG) data, the prevalence of stunting in South Sumatra Province was recorded at 22.8%, while in Palembang City it reached 14.5% (Sihite & Chaidir, 2022). When viewed by age group, the prevalence of stunting is higher in children aged 24–59 months (22.8%) compared to children aged 0–23 months (14.3%) (Wulandary & Sudiarti, 2021). Data from the Central Statistics Agency (BPS) shows that in the last three years, the prevalence of stunting in the 11 Ilir Health Center area has been quite high, namely 12.0% with 135 cases in 2015, increasing to 16.4% with 162 cases in 2016, and dropping again to 10.9% in 2017. This makes efforts to address stunting a top priority (Sihite et al., 2021).

According to the Food Security Agency of South Sumatra Province in 2016, the nutritional status of toddlers is influenced by food security conditions (Sanggelorang et al., 2024). Of the 140,043 babies born in South Sumatra in 2010, 220 babies (0.15%) were born with low birth weight, and 161 babies (0.11%) experienced malnutrition, indicating food insecurity at priority levels I, II, and III that require immediate treatment (Sihite et al., 2021). The South Sumatra Provincial Government has launched various cross-sectoral programs to address stunting (Agustina & Yusran, 2024). The decline in stunting rates is one of the results of these efforts, where programs such as the Healthy Kitchen to Overcome Stunting (DASHAT) are implemented to help achieve the government's target of reducing the prevalence of stunting (Faridah et al., 2024).

DASHAT is a community empowerment program that aims to meet the balanced nutritional needs of families at risk of stunting in South Sumatra Province (M. S. Maulana & Elsy, 2024). The DASHAT program emerged as a response to one of the factors causing stunting, namely the economic conditions of the community (Nurkamalah et al., 2024; Tawai & Sucipto, 2022) in South Sumatra Province. The socio-economic level of the family plays a role in determining their ability to meet the nutritional needs of toddlers (Edo & Yasin, 2024; Nurwahyuni et al., 2023; Nurwati & Listari, 2021). In addition, this condition is also influenced by the selection of additional food types for toddlers, the time of administration, and the implementation of a healthy lifestyle in the family (Sinta Widyaningrum, 2023; Yazia & Suryani, 2024), these factors greatly influence the level of stunting in toddlers (Khalifahani, 2021; Neherta, 2023; Nur Fiana, 2021).

Several factors that contribute to the high rate of stunting in Indonesia include: a) Inadequate Nutritional Intake: Lack of nutrition in pregnant women and children, and the provision of inappropriate complementary foods (Hidayatillah et al., 2023; Martony, 2023; Nur Fiana, 2021; Supriani et al., 2022); b) Poor Sanitation and Clean Water Access: Unhygienic environments increase the risk of infection which can inhibit nutrient absorption (Mariana &

Lestari, 2022; Ningsih et al., 2023, 2023; Olo et al., 2021; Pangaribuan et al., 2022); c) Social and Economic Factors: Poverty and low maternal education affect parenting patterns and access to health services (Darmayanti & Puspitasari, 2021; Haria et al., 2023; Herlianty et al., 2023). In addition, Stunting has a wide impact, including on the health side: Increasing susceptibility to disease and impaired cognitive development (Arifuddin et al., 2023; Fauziah et al., 2024; Pebriandi et al., 2023). From an economic perspective: Reducing individual productivity in the future, which has an impact on national economic growth (Lede et al., 2024; Rahman et al., 2023; Triansyah et al., 2024).

The Indonesian government has implemented various strategies to reduce stunting rates, including: a) Specific Nutrition Interventions: Providing nutritional supplements for pregnant women and toddlers, and promoting exclusive breastfeeding (Lestari et al., 2023; Risnawati & Munafiah, 2022); b) Sanitation and clean water access: building sanitation facilities and providing clean water to prevent infection (Fahreza & Hakim, 2024); c) Education and Counseling: Increasing public understanding of the importance of balanced nutritional intake and implementing good parenting patterns (Hasan & Rahman, 2024; Yuliasari et al., 2024, 2024).

Collaboration between the government, private sector, and communities is essential to achieving the target of reducing stunting and ensuring that future generations grow up healthy and productive (Ahmad et al., 2024; Jarona et al., 2025; Yustanta & Mulyati, 2024). This study aims to identify strategies implemented by the Local Government in the Anti-Stunting Program to meet the need for balanced nutrition in Palembang City. This study will analyze various policies, programs, and initiatives that have been implemented by the local government to improve the nutritional status of the community, especially in overcoming the problem of stunting. Through the identification of these strategies, this study is expected to provide an in-depth understanding of the effectiveness and success of existing programs, as well as how these programs are implemented in the field. Based on this background, this study aims to answer questions about how the Palembang City government's policy is in overcoming stunting, the factors that influence the success or failure of the Palembang City government's policy in overcoming stunting, and how the local government is involved in improving child welfare through the stunting overcoming program.

Based on this background, this study aims to answer questions regarding the Palembang City government's policy in overcoming stunting, factors that influence the success or failure of the Palembang City government's policy in overcoming stunting, and how the local government is involved in improving child welfare through stunting prevention programs.

## **METHOD**

This study uses a qualitative explorative approach (Creswell & Poth, 2016) to the Palembang city government's policy in overcoming stunting. At the same time, it explores the involvement of local governments in improving child welfare through stunting prevention programs. This researcher adopts a social dynamics policy approach to the concept of health policy (Betan et al., 2023; Budiyaniti et al., 2020; Ropitasari et al., 2024). This study focuses on the policies and involvement of local governments in improving child welfare through stunting prevention programs.

The location of this research will be carried out in the city of Palembang, which is one of the oldest cities in Indonesia with a long history as the center of the Sriwijaya Kingdom which flourished in the 7th to 13th centuries. Known for its culinary specialties such as pempek, tekwan, and pindang, has the iconic Ampera Bridge that crosses the Musi River, and is the center of Malay culture with various historical sites, rich traditions such as the Sriwijaya Festival, and acts as a center of economy and trade in South Sumatra with a rapidly growing industrial, trade, and service sector. The subjects in this study were several agencies such as

the Health Office, Regional Revenue Agency, and Social Service, as well as health sector and community actors involved in the stunting handling program in the city of Palembang.

Data collection methods that will be used in this study include interviews, observations, and documentation studies. In-depth interviews will be conducted with government officials, health workers, and the community who are the objects of policy in handling stunting problems in the city of Palembang. Data collection techniques in this study are from Field Observations, Literature Studies on the topics studied, and Documentation through the collection of documentary data obtained from books, journal articles, government websites, government social media, and government letters. Referring to what was stated by Miles, Huberman, and Saldaña (2018), regarding interactive analysis, through research data collection, data identification, research data reduction related to research topics, and then concluding. when managing research data, such as research observation results, required social media data, government websites, and government documents. The next data collection technique is through direct field observation related to the implementation of this stunting program itself. As well as conducting documentation studies of several policy documents, regional regulations, and reports related to policies that have been implemented related to stunting management.

After the data needed for this study is collected, the next step is to process the data through the process of analysis, description, and drawing conclusions (Tracy, 2024). In qualitative research, data analysis is carried out simultaneously with other stages, such as data collection and writing research results. The data obtained will provide an overview of the topic being studied. The analysis process begins by reviewing all data collected from various sources, such as official documents, news, images, and others, and involves direct observation and interviews with related informants. This data analysis also uses a thematic approach which is one of the qualitative data analysis methods used to identify, analyze, and report patterns (themes) in data. This method is used to understand the experiences, meanings, or perspectives of participants.

## **RESULTS AND DISCUSSION**

### **Stunting and Child Welfare**

Stunting is a condition in which the height or length of a toddler is lower than the standard for their age, which is caused by long-term malnutrition, especially during the First 1000 Days of Life (HPK) (Prendergast & Humphrey, 2014; Saleh et al., 2021; Scheffler & Hermanussen, 2022). This malnutrition can occur from pregnancy to early life, but symptoms usually only appear after the age of 2 years (Aurima et al., 2021; Batubara et al., 2023; Widyastuti et al., 2022).

Research shows that stunting is caused by various factors, not just one (Widyawati et al., 2021). These factors include low birth weight, frequency of diarrhea, maternal knowledge and education, family income, and sanitation conditions (Das et al., 2021; Sartika et al., 2021). Understanding health workers and the community regarding the causes of stunting is very important because it can help prevent and reduce the prevalence of stunting in the community (Adelin et al., 2023; Tyarini et al., 2023). According to (Mediani et al., 2022), stunting is caused by various multidimensional factors, namely: a) Lack of nutritional intake in the long term, from conception to 2 years of age; b) Children often experience infectious diseases such as diarrhea, measles, tuberculosis, and others; c) Limited access to clean water and adequate sanitation facilities; d) Low food availability at the household level; and e) Improper parenting patterns.

Stunting has a serious impact on children's physical and cognitive development, which can affect their overall quality of life (Danapriatna et al., 2023; Rambe et al., 2023; Soliman et al., 2021). In the context of physical impacts, it can be seen in 5 (five) parts, first, stunted growth: Children with stunting usually have a shorter height compared to the growth standards



that are appropriate for their age (Amanda et al., 2023; S. B. Ginting et al., 2022; Nurbaiti, 2024). Second, Muscle Weakness: In addition to stunted growth, stunted children also often have low muscle strength. This can limit their ability to participate in physical activities, which are important for overall health development (Haris et al., 2024; Millward, 2021; Pranoto et al., 2024; Samaloisa, 2024).

Third, disease susceptibility: Stunting can weaken a child's immune system, making them more susceptible to infections, such as diarrhea and pneumonia. The body's inability to fight these infections worsens their health condition, creating a continuous cycle of disease (Handayani et al., 2024; Morales et al., 2023; Mutasa et al., 2022). Fourth, impaired sexual development: when they reach puberty, stunted children often experience delays in their sexual development. This can affect their adolescence and continue into adulthood (Prawirohartono, 2021; Rasyid et al., 2022; Soliman et al., 2022, 2024; Sriyanah, 2023; Supradewi et al., 2023). Fifth, the risk of chronic diseases in adulthood: Children who experience stunting are more likely to suffer from chronic diseases later in life such as obesity, type 2 diabetes, and hypertension in adulthood (Kurniati et al., 2022). This is due to metabolic changes that occur due to chronic malnutrition in early life.

On the other hand, cognitive stunting can also have a significant negative impact on children's growth and development into adulthood (Laily & Indarjo, 2023; Nazidah et al., 2022). This impact itself includes four things such as: first, delayed brain development: and lack of adequate nutritional intake during the first 1,000 days of life (from pregnancy to age 2 years) greatly affects children's brain development. As a result, stunted children have difficulty achieving their intellectual potential (Aghniya, 2022; Dewi et al., 2023; Handryastuti et al., 2022; Haryani et al., 2021; Laily & Indarjo, 2023; Martony, 2023; Oumer et al., 2022; Rambe et al., 2023; E. C. Wulandari et al., 2021). Second, decreased learning ability: Stunted children often experience difficulties in learning, including decreased concentration and memory. This affects their academic performance in school, which can have long-term impacts on their educational and career opportunities (Beckmann et al., 2021; Dermawan et al., 2022; Husnah et al., 2022; Mustakim et al., 2022; Rumlah, 2022).

Third, psychosocial problems: Delays in brain development also cause problems in social and emotional interactions. Stunted children may feel less confident and face challenges in interacting with peers, which can affect their mental health (Manggul et al., 2023; Medise et al., 2024; Nurhayati et al., 2024; Prafitri et al., 2023; Rahmawati & Agustin, 2021; Rasyid et al., 2022; Saleh et al., 2021). Fourth, Low Productivity in Adulthood: The impact of stunting does not stop in childhood. The cognitive limitations experienced by stunted children can lead to low work productivity when they are adults, reducing their contribution to the family and community economy (Delima et al., 2023; Montenegro et al., 2022; Muzayyaroh, 2021).

Stunting not only affects children's height, but also has implications for their health, education, and productivity in the future. Therefore, handling stunting must be started as early as possible by ensuring adequate nutritional intake during pregnancy, exclusive breastfeeding, and nutritious complementary foods. In addition, healthy environmental management is also needed to prevent infection and ensure optimal growth and development for children.

### **Palembang City Government Policy in Overcoming Stunting**

Based on Presidential Regulation No. 72 of 2021 concerning the Acceleration of Stunting, the Palembang City Government has formed a Stunting Handling Acceleration Team at the city level, following the Regulation of the National Population and Family Planning Agency Number 12 of 2021 which regulates the National Action Plan for the Acceleration of Reducing Indonesia's Stunting Rates 2021-2024. This regulation aims to accelerate the reduction in stunting rates. The collaboration process between the DPPKB and the non-

government sector is carried out within a collaborative governance framework. This collaboration is influenced by the existing stunting phenomenon, with the national goal of reducing stunting rates to below 14% by 2024, as well as the target of the Palembang City Government to make the city free of stunting in the same year.

The DPPKB functions as the main sector in this collaboration, while the private sector or non-government supports the implementation of collaboration to accelerate the reduction in stunting rates. To achieve the national target of below 14%, continuous and consistent collaboration is needed. This collaboration not only involves the Palembang City Government through the Regional Apparatus Organization (OPD) but also involves the non-government sector. In this case, DPPKB acts as the directing sector, while non-government parties also contribute, such as providing free food by restaurants, disseminating information through media such as Radio Sonora, and support from the Police and TNI who act as foster fathers of stunting. An important factor in this collaboration is starting with a face-to-face conversation that builds trust. Once trust is created, a commitment in the collaboration process will be formed, which in turn influences understanding in formulating clear problems, values, and missions. Once the relevant parties have the same understanding, they will design a strategy to carry out the collaboration.

In this study, the collaboration model used refers to the concept of Ansell & Gash (2008), which consists of five main variables, namely:

**Face-to-Face Dialogue:** Direct interaction between stakeholders is the first step in collaborative governance (Bingham, 2011; Gollagher & Hartz-Karp, 2013; Innes & Booher, 2003). Through this dialogue, the parties can identify opportunities, problems, shortcomings, and expected benefits from the collaboration. This process begins with a meeting of stakeholders involved in handling stunting to discuss intensively the actions to be taken. The government, as the main sector, acts as the main driver of this dialogue, while the private sector supports its implementation.

**Building Trust:** The process of building trust is inseparable from face-to-face interaction (Agbodzakey, 2024; Mulyadi & Maulana, 2021). Trust between stakeholders is built through effective communication to prevent conflict. The role of facilitative leadership is needed to create an environment that supports this trust. Based on the statement of the Head of the Planning and Reporting Sub-Division, face-to-face discussions and meetings play an important role in maintaining a relationship of mutual trust. Support from previous collaboration experiences also helps strengthen trust between the parties involved. Openness is a major factor in strengthening this relationship.

**Commitment to the Process:** The success of the collaboration is highly dependent on the commitment of all parties involved (Afandi et al., 2023; Elken, 2024; Faisal, 2023). This commitment arises because of the awareness that cooperation will be more effective than individual efforts. The Palembang City Government has stipulated the Decree of the Mayor of Palembang Number 48/KTPS/DPPKB/2022 to ensure accountability and maintain the commitment of program implementers in reducing stunting rates. Commitment is also strengthened through active involvement in the collaboration process, building a sense of interdependence among the parties involved.

**Shared Understanding:** Effective collaboration requires a shared understanding of the goals, values, and issues underlying the collaboration (Christensen, 2024; Nabatchi & Emerson, 2021). All sectors involved must have a common view in finding solutions to the problem of stunting. This shared understanding includes the exchange of information, data, and analysis of the challenges faced, thus enabling a more effective and solution-oriented collaboration process. Awareness of mutual support between sectors is a major factor in the success of this program.

**Intermediate Outcomes:** Initial results of collaboration can be seen from the success of

strategic planning and initial program achievements (Kaponda, 2024; Panjaitan et al., 2023; Permani, 2021; Prysmakova-Rivera & Pysmenna, 2021). The Head of the Palembang Population and Family Planning Control Office, Altur, is optimistic that the national SDGs target in 2024 can be achieved. This optimism is based on the decline in stunting prevalence which reached 16.1 percent, despite obstacles during the COVID-19 pandemic. The Palembang City Government has formed a family assistance team involving 2,940 integrated health post cadres, health workers, and midwives in 107 sub-districts. In addition, support from the TNI, Polri, and BUMD as ambassadors for foster fathers of stunted children in each sub-district has contributed to the positive achievements that have been achieved. This program continues to show good progress in efforts to reduce stunting rates in Palembang City.

The stunting management program in Palembang City also serves as a place for local youth to develop themselves. The author found that the success of this program was supported by effective collaboration between the local government, the community, and support from the private sector. This result is in line with Fanzo, Bellows, et al., (2021) findings, which show that this kind of collaboration is critical in increasing public awareness of the importance of health and nutrition. In addition, this program also provides opportunities for young people to understand the problems and potential of the community related to the issue of stunting, build networks, and advocate for themselves. Thus, the youth of Palembang City play a central role in the success of the stunting management program. With this approach, the government has succeeded in encouraging the community to be more aware and active voluntarily, creating a spirit of cooperation that follows the principles of health-based community empowerment, namely volunteers and independence.

### **Challenges and Obstacles in Policy Implementation**

Like other programs, this stunting management program also has several challenges. One of the obstacles faced is the less-than-optimal use of digital media for education and socialization, which is caused by differences in understanding, limited resources, and ineffective coordination. This follows the findings of Basnawiyati et al.; Syafrawati et al., (2024; 2023) this program has the characteristics of a local government initiative, which is increasingly attractive with the allocation of budget, support from the private sector, and incentives from the government for program implementers who successfully carry out their duties well. This incentive encourages the community to participate actively by creating various innovations and working together to utilize local resources so that each sub-district competes to develop the best stunting management program (Engelbrecht, 2022; Frumence et al., 2024; Imbaruddin et al., 2022; Riau et al., 2025).

To accelerate the reduction in stunting rates, effective cross-sector collaboration is needed between various related parties, such as the government, private sector, civil society organizations, and the community (Aivalli et al., 2024; Aminah et al., 2024; Arieffiani & Ekowanti, 2024; Astuti et al., 2025; Fernandes et al., 2022; Zidikheri & Gasto, 2023). However, in its implementation, several challenges can hinder the implementation of this collaboration. Each party, including the government, private sector, civil society organizations, and the community, brings different backgrounds, interests, and views on the problem of stunting. These differences in understanding and priorities can complicate efforts to coordinate and unify the steps needed to effectively reduce stunting rates. Misalignment of understanding between stakeholders can hinder collaboration and confuse the community. This was also confirmed by the Head of the Palembang City Health Office, who said that:

*“One of the main challenges we face is the differences in background and priorities among stakeholders. Each sector, whether government, private sector, or civil society organizations, has a different focus and objectives. For example, the private sector tends to be profit-oriented, while civil society organizations emphasize community empowerment. This sometimes creates*

*misunderstandings and hinders our efforts to unify the necessary steps. To overcome this, we try to hold regular meetings to ensure that all parties have the same understanding of the program objectives and how each sector can contribute synergistically.*

Poor coordination can hinder the creation of synergy and integration between programs run by various parties. The same thing can also happen between local governments, the private sector, and civil society organizations. Lack of communication and inconsistencies between programs can lead to duplication, overlap, or even gaps in handling stunting. Differences in the use of language, terms, and how information is conveyed between the parties involved can lead to misunderstandings and hinder the process of joint decision-making. In addition, the lack of transparency and openness of information among stakeholders can be an obstacle to collaborative efforts. This inefficient communication can even result in many organizations implementing similar programs without collaboration, wasting resources (Hadi, 2023; Lino et al., 2024; Sulistyaningsih et al., 2023).

In terms of finance, the local government of Palembang City may face challenges in providing sufficient funds to support stunting prevention and handling programs. These limited funds can affect the breadth and quality of interventions that can be implemented, such as the provision of additional food, cadre training, or the provision of health facilities (Natasha & Santoso, 2024). In addition, the shortage of professional staff, such as nutritionists, medical personnel, and extension workers, can also be an obstacle. Limited facilities, infrastructure, and inadequate infrastructure, especially in rural and suburban areas, can hinder community access to stunting prevention and treatment services (Bridgman & von Fintel, 2022; R. Ginting et al., 2023; Indra & Khoirunurrofik, 2022; Nasim et al., 2022; Sompia, 2021).

### **Effectiveness of Government Involvement in Improving Child Welfare**

The effectiveness of the stunting management program policy in Palembang City can be seen from various key aspects that reflect the success and challenges in its implementation. This policy has succeeded in building strong collaboration between various parties, including local collaborative governance. This collaboration allows synergy between stakeholders in implementing the program, where each party has a strategic role. The government acts as the main driver, while the private sector provides resource support, and the community is actively involved in implementing the program at the local level. According to Goi et al.; Herlianti (2024; 2022) face-to-face dialogue between stakeholders is an important initial step in building collaborative cooperation that allows them to recognize opportunities, problems, and benefits to be achieved through mutual agreement.

In addition, this policy has also succeeded in encouraging the community to participate actively by providing incentives to implementers who successfully run the program. This incentive is a significant motivational driver, encouraging people to create various innovations and utilize local resources optimally. In this context, healthy competition between sub-districts to develop the best stunting management program is one of the factors that strengthen the effectiveness of the policy. This is following the principles of health-based community empowerment, namely voluntarism and independence, which have succeeded in fostering collective awareness among the community to participate actively (Adib, 2024; Fikrie et al., 2024; Juliani & Susila Wibawa, 2024).

In terms of results, this policy has shown positive initial achievements. Based on the data, the stunting rate in Palembang City has decreased to 16.1 percent, despite major obstacles faced during the COVID-19 pandemic. This shows that this policy has a real impact on efforts to reduce the prevalence of stunting. The Head of the Palembang City DPPKB stated that:

*“The formation of a family assistance team involving 2,940 integrated health post cadres, health workers, and midwives spread across 107 sub-districts, as well as the involvement of agency leaders such as the TNI, Polri, and BUMD as ambassadors for foster fathers of stunted*



*children in each sub-district, is a strategic step that supports the success of this program”*

Overall, the stunting management program policy is effective in building cross-sector collaboration, increasing community participation, and achieving significant results in reducing stunting rates in Palembang City. However, to ensure sustainability and long-term success, strategic steps are needed to overcome existing obstacles, especially in the use of digital technology and increasing coordination between stakeholders. Thus, this policy has the potential to become a more effective model in addressing stunting problems at the national level.

The stunting management policy in Palembang City, launched by the local government, has had a significant impact on efforts to reduce stunting rates. The positive impacts of this policy include a decrease in stunting rates recorded by 16.1 percent, even though the program had to face major challenges due to the COVID-19 pandemic. This success reflects the effectiveness of the policy in reaching the right targets and having a real impact on improving the nutritional status of children in Palembang. The decreasing stunting rate shows that the implemented policy has succeeded in reducing the prevalence of stunting, which was previously a significant public health problem. This collaboration strengthens community capacity in dealing with stunting problems and increases community participation in implementing the designed program. As stated by Sengchaleun et al., (2023) direct and intensive dialogue between various stakeholders is an important initial step in building effective collaboration. Increasing public awareness is also one of the positive impacts of this policy. Through various campaigns and educational programs, people in Palembang are increasingly aware of the importance of a healthy diet and balanced nutrition to prevent stunting. This program has also succeeded in introducing the concept of better parenting and a more nutritious diet to families at high risk of stunting. In addition, the incentives given to program implementers who successfully carry out their duties well are a driving force for community participation to be more active and innovative in running this program. This appreciation was also conveyed by the Posyandu Cadre at the Nanda Plaju Posyandu, Palembang City, who said: *“The incentives given motivate us to be more active and innovative in running this program. For example, the incentives we receive are used to develop more interesting activities at the integrated health post, such as cooking together with a healthy menu which is then distributed to families in the surrounding area. This also encourages us to look for new ideas that can increase community participation, such as holding a healthy cooking competition or a parenting workshop. We feel that these incentives are not only an award but also an encouragement to continue to contribute better”*

The provision of these incentives also encourages the spirit to create various creative ideas that can support efforts to reduce stunting. As stated by Mhagama, Syahrinullah, (2023; 2024), these incentives play an important role in increasing community motivation and participation in implementing health programs.

### **Factors Influencing Policy Success**

The success of the stunting management policy in Palembang City cannot be viewed separately from the internal and external factors that influence it. This policy involves many stakeholders, from the government, and the community, to the private sector, each of which plays an important role in achieving the goal of reducing stunting rates. Internal factors are related to elements that exist in the government structure and the program itself, such as: first, government leadership and commitment: strong leadership and commitment of local governments in implementing stunting management policies are the main internal factors underlying the success of the program (Balqis Nazaruddin et al., 2023; Macella et al., 2022; Prasetyo et al., 2023; Ramadhan & Susanto, 2023; Syahrinullah, 2024). Visionary leadership,

especially from regional heads and related agencies, is very important to ensure that this policy is a priority in the regional development agenda. The Head of the Palembang City DPPKB, for example, has shown a high commitment to reducing stunting rates, which is reflected in various real efforts that have been made. This commitment can be seen from the formation of clear policies, such as the decision of the Mayor of Palembang to focus efforts to reduce stunting rates through various coordinated programs involving many sectors.

The second internal factor, namely coordination, and collaboration between agencies: the success of the stunting management policy is greatly influenced by the quality of coordination between agencies involved in its implementation (Fernandes et al., 2022; Imron et al., 2022; Permatasari et al., 2022; Putri, 2021). The stunting management program involves various government agencies, ranging from the health, education, to social sectors, which must work together well to achieve common goals. Good collaboration between local governments, the private sector, and the community is critical to creating effective synergy in implementing this policy. Goi et al.;Herlianti (2024; 2022) emphasize the importance of face-to-face dialogue between stakeholders as an initial step in building solid cooperation. Without good coordination, this policy can be hampered by overlapping tasks and responsibilities between various parties.

The third internal factor is human resources (HR) and institutional capacity: the quality and capacity of human resources involved in stunting management policies also play an important role in determining the success of the policy (Hadi, 2023). Competent health workers, such as integrated health post cadres, midwives, and doctors, as well as trained government staff, will be more effective in conveying information and carrying out interventions needed to prevent and overcome stunting. In addition, the capacity of the institutions that manage the policy also greatly influences the implementation of the policy. Without a well-structured organization and strong managerial capacity, the implementation of this policy will encounter various obstacles.

The fourth internal factor is the use of data and technology: the use of accurate data is very important to ensure that stunting management policies are right on target (Arief et al., 2023; Izza & Rizmayanti, 2024; Kodish et al., 2022; Lobho et al., 2024; Prasetyo et al., 2023; Riatma et al., 2023; Tarigan et al., 2025). By using valid and up-to-date data, local governments can identify families at risk of stunting and provide more focused interventions. In addition, using digital technology to disseminate information and education about stunting is also key to increasing public awareness. However, the use of technology in stunting management policies in Palembang still needs to be improved, given the limitations in terms of access and understanding of technology among the community. On the other hand, external factors involve elements outside the government that can influence policy implementation, first, social and cultural factors in society: social and cultural factors in society play an important role in determining the success of stunting management policies (Marni et al., 2021; Wardani & Indriasari, 2024).

Unhealthy eating patterns and community habits that consider nutritional issues not too important can be obstacles in efforts to reduce stunting rates. Therefore, local culture- based education needs to be implemented to change people's mindsets about the importance of balanced nutritional intake, especially for pregnant women and children. This is under what was expressed by Aramico et al.; Meher et al.; Oktarina et al.; Sumardino et al.; Utami et al.; Yulia et al., (2024; 2023; 2022; 2024; 2025; 2023) who emphasized the need for an approach based on local wisdom in dealing with nutrition and public health problems.

The second external factor is the economy and access to resources: economic factors are external elements that influence the success of stunting management policies (Avula et al., 2022; Chairunnisa et al., 2024; Hidayat & Erlyn, 2021; Rahmasari & Wicaksono, 2022; Saputra et al., 2022). Families with low economic conditions often have difficulty meeting adequate

nutritional needs for their children. Therefore, stunting management policies must pay attention to the economic aspects of the community, by providing social assistance and easier access to nutritious food. In addition, the availability of resources to support program implementation must also be taken into account so that policies can be implemented effectively.

The third external factor is support from third parties (Private Sector and International Institutions): support from the private sector and international institutions is an external factor that plays a role in the success of this policy (Fanzo, Shawar, et al., 2021; Herlina & Aryanto, 2023; Setiarsih et al., 2023; Sumanti, 2024; Toana & Rowa, 2024). The private sector can contribute by providing funds or assistance in the form of goods, such as nutritious food or health facilities. International institutions can also provide technical assistance and funding for larger health programs. This collaboration increases the capacity of resources that can be utilized to accelerate the achievement of stunting reduction targets in Palembang City.

The fourth external factor is national policies and supportive regulations: Stunting management policies (Absori et al., 2022; Hartotok et al., 2021; Herawati & Sunjaya, 2022; I. N. H. Maulana et al., 2022; Prasetyo et al., 2023; Riyadh et al., 2023; Sugianto, 2021) in Palembang City are greatly influenced by supportive national policies, such as regulations on reducing stunting rates that apply nationally, budget allocation for health programs, and policies governing the distribution of social assistance and health education. Local governments must work in line with these national policies to ensure that all programs implemented in the regions comply with national standards and regulations. The success of stunting management policies in Palembang City is highly dependent on the factors described above. With the synergy between internal and external factors, the stunting management policy in Palembang is expected to achieve significant results in reducing stunting rates, creating a healthier and more productive generation in the future.

## CONCLUSION

The stunting management policy in Palembang City is an effort involving various parties to reduce the prevalence of stunting in children. The success of this policy is greatly influenced by interacting internal and external factors. From the internal side, strong leadership and commitment of the local government are the main factors that drive the smooth implementation of this policy. In addition, good coordination between government agencies and other stakeholders, as well as the quality of the human resources involved, are also the main determinants in implementing the policy.

However, the challenges faced do not only come from internal factors but also external factors. Social and cultural factors of the community that still do not understand the importance of good nutrition, as well as limited economic access for some families, are obstacles to achieving policy objectives. In addition, support from the private sector and international institutions, as well as supporting national policies, also play an important role in the success of this policy.

The success of the stunting management policy in Palembang City requires synergy between the government, the community, and the private sector. Good coordination, the use of technology for counseling, and economic empowerment of the community are important keys to overcoming existing challenges. With a holistic and integrated approach, it is hoped that this stunting management program can achieve its goals optimally, namely reducing stunting rates and improving the quality of life of the community in Palembang City.

Based on these findings, the recommendations for the Palembang City Government in strengthening stunting management policies are the use of digital technology, where the government must maximize the use of digital technology for education about stunting through social media and applications to increase public education and awareness. Increasing incentives and support can be done by providing incentives for parties who are active in handling stunting,

as well as holding training to increase the capacity of implementing personnel. Data collection and analysis, namely by utilizing more accurate data to design targeted policies and monitor program developments. Allocating a larger budget by increasing the budget for maternal and child nutrition and health programs so that services are better and more affordable. As well as utilizing village funds and maximizing village funds to support local needs-based nutrition programs at the village level.

In addition, there are suggestions to improve community coordination and participation, including strengthening coordination forums between agencies, namely strengthening coordination between related sectors through regular meetings to overcome obstacles and ensure that the program runs smoothly. Also, involving the community and youth and increasing the role of youth in outreach and advocacy related to stunting, as well as empowering the community in program supervision.

## REFERENCES

- Absori, A., Hartotok, H., Dimyati, K., Nugroho, H. S. W., Budiono, A., & Rizka, R. (2022). Public Health-Based Policy on Stunting Prevention in Pati Regency, Central Java, Indonesia. *Open Access Macedonian Journal of Medical Sciences*, 10(E), 259–263.
- Adelin, P., Triyana, R., Zeffira, L., & Suryanis, I. (2023). Edukasi Faktor Risiko Stunting pada Anak Usia 24–60 Bulan di Kelurahan Aia Pacah Kota Padang. *Jurnal Pengabdian Masyarakat Kesehatan (JURABDIKES)*, 1(2), 32–35.
- Adib, M. A. A. (2024). The Relationship between Village Government and Community in Village Development in Mungguk Bantok, Indonesia. *NeoRespublica: Jurnal Ilmu Pemerintahan*, 5(2), 911–928.
- Afandi, M. N., Tri Anomsari, E., Novira, A., & Sudartini, S. (2023). Collaborative governance in a mandated setting: shifting collaboration in stunting interventions at local level. *Development Studies Research*, 10(1), 2212868.
- Agbodzakey, J. (2024). Building Trust in Collaborative Governance. In *Collaborative Governance Primer: An Antidote to Solving Complex Public Problems* (pp. 71–79). Springer.
- Aghadiati, F., Ardianto, O., & Wati, S. R. (2023). Hubungan Pengetahuan Ibu Terhadap Kejadian Stunting di Wilayah Kerja Puskesmas Suhaid. *Journal of Healthcare Technology and Medicine*, 9(1), 130–137.
- Aghniya, R. (2022). Dampak Stunting Terhadap Perkembangan Kognitif dan Motorik Anak Stunting: Systematic Literature Review. *Scientia Journal*, 11(2), 178–189.
- Agustina, T., & Yusran, R. (2024). Peran Pemerintah dan Stakeholders dalam Mengatasi Dampak Pernikahan Dini di Nagari Muaro Sakai Inderapura, Kecamatan Pancung Soal, Kabupaten Pesisir Selatan. *Jurnal Pemerintahan Dan Politik*, 9(3), 235–244.
- Ahmad, M., Hadju, V., & Latiep, I. F. (2024). Inovasi makanan biskuit kacang hijau dan daun katuk sebagai PMT dalam pencegahan stunting. *Caradde: Jurnal Pengabdian Kepada Masyarakat*, 7(1), 1–12.
- Aivalli, P., Gilmore, B., Srinivas, P. N., & De Brún, A. (2024). Navigating intersectoral collaboration in nutrition programming: implementors' perspectives from Assam, India. *Archives of Public Health*, 82(1), 82.
- Akbar, R. R., Kartika, W., & Khairunnisa, M. (2023). The Effect of Stunting on Child Growth and Development. *Scientific Journal*, 2(4), 153–160.
- Ali, A. (2021). Current status of malnutrition and stunting in Pakistani children: what needs to be done? *Journal of the American College of Nutrition*, 40(2), 180–192.
- Amanda, Y., Aji, F. M., & Marta, M. S. (2023). Sosialisasi Pencegahan Stunting di Desa Pangarengan Kecamatan Legon Kulon Kabupaten Subang. *PROCEEDINGS UIN SUNAN GUNUNG DJATI BANDUNG*, 3(2), 158–170.



- Aminah, S., Mahmudiono, T., & Nadhiroh, S. R. (2024). Policy, intervention, and management in addressing stunting in children: A systematic review. *African Journal of Reproductive Health*, 28(10), 348–357.
- Anjos, L. A. dos, Ferreira, H. da S., Alves-Santos, N. H., Freitas, M. B. de, Boccolini, C. S., Lacerda, E. M. de A., Castro, I. R. R. de, Mariz, V. G., Tavares, B. M., & Gigante, D. P. (2021). Methodological aspects of the anthropometric assessment in the Brazilian National Survey on Child Nutrition (ENANI-2019): a population-based household survey. *Cadernos de Saúde Pública*, 37, e00293320.
- Asell, C., & Gash, A. (2008). Collaborative governance in theory and practice. *Journal of Public Administration Research and Theory*, 18(4), 543–571.
- Apriliana, T., Keliat, B. A., Mustikasari, & Primasari, Y. (2022). A contributing factor of maternal pregnancy depression in the occurrence of stunting on toddlers. *Journal of Public Health Research*, 11(2), jphr-2021.
- Aramico, B., Huriyati, E., & Dewi, F. S. T. (2024). Cultural Perception And Myths Of Maternal And Infant Health Related To Stunting In Aceh Tengah Regency, Indonesia And The Opportunity For Intervention. *Malaysian Journal of Public Health Medicine*, 24(2), 284–292.
- Ardianto, E. T., Elisanti, A. D., & Husin, H. (2022). Arduino and android-based anthropometric detection tools for Indonesian children. *2nd International Conference on Social Science, Humanity and Public Health (ICOSHIP 2021)*, 254–259.
- Arief, H., Ekoriano, M., Rahadian, A. S., & Widodo, T. (2023). Good Practices for Reducing Stunting in Sumedang Regency. *Science and Environmental Journal for Postgraduate*, 5(2), 138–144.
- Ariefiani, D., & Ekowanti, M. R. L. (2024). Evaluating Local Government Policy Innovations: A Case Study of Surabaya's Efforts in Combating Stunting and Enhancing Public Health Services Quality. *Jurnal Bina Praja*, 16(1), 1–20.
- Arifuddin, A., Prihatni, Y., Setiawan, A., Wahyuni, R. D., Nur, A. F., Dyastuti, N. E., & Arifuddin, H. (2023). Epidemiological Model of Stunting Determinants in Indonesia. *Healthy Tadulako Journal (Jurnal Kesehatan Tadulako)*, 9(2), 224–234.
- Astuti, S. J. W., Suindyah, S., & Atmojo, S. (2025). Modeling environmental interactions and collaborative interventions for childhood stunting: A case from Indonesia. *Dialogues in Health*, 100206.
- Aurima, J., Susaldi, S., Agustina, N., Masturoh, A., Rahmawati, R., & Madhe, M. T. M. (2021). Faktor-faktor yang berhubungan dengan kejadian stunting pada balita di Indonesia. *Open Access Jakarta Journal of Health Sciences*, 1(2), 43–48.
- Avula, R., Nguyen, P. H., Tran, L. M., Kaur, S., Bhatia, N., Sarwal, R., de Wagt, A., Chaudhery, D. N., & Menon, P. (2022). Reducing childhood stunting in India: insights from four subnational success cases. *Food Security*, 14(4), 1085–1097.
- Azriani, D., Qinthara, N. S., Yulita, I. N., Agustian, D., Zuhairini, Y., & Dhamayanti, M. (2024). Risk factors associated with stunting incidence in under five children in Southeast Asia: a scoping review. *Journal of Health, Population and Nutrition*, 43(1), 1–13.
- Balqis Nazaruddin, S. K. M., Suci Rahmadani, S. K. M., Sulianderi, N. M. V., SP, M. A., Abadi, M. Y., SKM, M. K., Arif Anwar, S. K. M., St Rosmanely, S. K. M., Trisasmita, L., & Hamka, N. A. (2023). *Pengembangan Pengukuran Konvergensi Program Percepatan Penurunan Stunting*. Deepublish.
- Basnawiyati, A., Sadhana, K., & Wiyani, W. (2024). Implementation of Stunting Prevention Movement Program. *International Journal of Research in Social Science and Humanities (IJRSS) ISSN: 2582-6220, DOI: 10.47505/IJRSS*, 5(11), 5–14.
- Batubara, N., Hadi, A. J., & Ahmad, H. (2023). Analisis Faktor Risiko Stunting pada Balita di

- Kecamatan Padangsidimpuan Batunadua Kota Padangsidimpuan. *Media Publikasi Promosi Kesehatan Indonesia (MPPKI)*, 6(7), 1407–1414.
- Beckmann, J., Lang, C., du Randt, R., Gresse, A., Long, K. Z., Ludyga, S., Müller, I., Nqweniso, S., Pühse, U., & Utzinger, J. (2021). Prevalence of stunting and relationship between stunting and associated risk factors with academic achievement and cognitive function: A cross-sectional study with South African primary school children. *International Journal of Environmental Research and Public Health*, 18(8), 4218.
- Betan, A., Sofiantin, N., Sanaky, M. J., Primadewi, B. K., Arda, D., Kamaruddin, M. I., & AM, A. M. A. (2023). Kebijakan Kesehatan Nasional. In *Yayasan Penerbit Muhammad Zaini*.
- Bingham, L. B. (2011). Collaborative governance. *The SAGE Handbook of Governance*, 386–401.
- Bridgman, G., & von Fintel, D. (2022). Stunting, double orphanhood and unequal access to public services in democratic South Africa. *Economics & Human Biology*, 44, 101076.
- Budiyan, R. T., Sariatmi, A., & Jati, S. P. (2020). *Kebijakan Kesehatan: Implementasi Kebijakan Kesehatan*. Undip Press
- Chairunnisa, A., Setianingsih, E. L., & Lituhayu, D. (2024). Implementasi kebijakan penanggulangan stunting di Kecamatan Brebes. *Journal of Public Policy and Management Review*, 13(4), 194–209.
- Cheikh Ismail, L., Al Dhaheri, A. S., Ibrahim, S., Ali, H. I., Chokor, F. A. Z., O'Neill, L. M., Mohamad, M. N., Kassis, A., Ayesh, W., & Kharroubi, S. (2022). Nutritional status and adequacy of feeding Practices in Infants and Toddlers 0-23.9 months living in the United Arab Emirates (UAE): findings from the feeding Infants and Toddlers Study (FITS) 2020. *BMC Public Health*, 22(1), 319.
- Christensen, I. (2024). Understanding tradeoffs in the institutional design and leadership of collaborative governance. *Public Performance & Management Review*, 47(2), 263–290.
- Creswell, J. W., & Poth, C. N. (2016). *Qualitative inquiry and research design: Choosing among five approaches*. Sage publications.
- Danapriatna, N., Ramadhan, M. F., Putra, P., & Zhafiraah, N. R. (2023). Stunting and Quality of Life: The nexus between Malnutrition, Community Empowerment and Economic Development. *Entrepreneurship and Community Development*, 1(2), 76–81.
- Darmayanti, R., & Puspitasari, B. (2021). *Upaya Pencegahan Stunting Saat Kehamilan*. Penerbit NEM.
- Das, S., Fahim, S. M., Alam, M. A., Mahfuz, M., Bessong, P., Mduma, E., Kosek, M., Shrestha, S. K., & Ahmed, T. (2021). Not water, sanitation and hygiene practice, but timing of stunting is associated with recovery from stunting at 24 months: results from a multi-country birth cohort study. *Public Health Nutrition*, 24(6), 1428–1437.
- Delima, D., Neviyarni, N., Marjohan, M., Ifdil, I., & Afdal, A. (2023). Psychological impact on stunting adolescents: Literature review study. *REAL in Nursing Journal*, 6(1), 1–10.
- Dermawan, A., Mahanim, M., & Siregar, N. (2022). Upaya percepatan penurunan stunting di kabupaten asahan. *Jurnal Bangun Abdimas*, 1(2), 98–104
- Dewi, K., Anggriani, L., Ritonga, M. P., Azmi, C., Samosir, S. R., & Hutauruk, F. N. (2023). Stunting dan pencegahannya. *Jurnal Pemberdayaan Masyarakat*, 1(1), 18–26.
- Edo, A., & Yasin, M. (2024). Dampak Kesenjangan Akses Pendidikan dan Faktor Ekonomi Keluarga terhadap Mobilitas Sosial. *Jurnal Ilmu Pendidikan & Sosial (SINOVA)*, 2(3), 317–326.

- Elken, M. (2024). Collaborative design of governance instruments in higher education. *Studies in Higher Education*, 49(6), 1095–1106.
- Engelbrecht, L. M. (2022). *Communication strategies as a tool to address the double burden of malnutrition: An analysis of select interventions in the Western Cape province, South Africa*. University of Stellenbosch.
- Fahreza, M., & Hakim, A. (2024). Peningkatan Kualitas Sanitasi Masyarakat melalui Pembangunan Fasilitas Sanitasi di Kecamatan Tomo. *E-Coops-Day*, 5(2), 397–408.
- Faisal, A. F. (2023). Collaborative Governance in the Implementation of Vocational Schools in Makassar City. *KnE Social Sciences*, 85–94.
- Fanzo, J., Bellows, A. L., Spiker, M. L., Thorne-Lyman, A. L., & Bloem, M. W. (2021). The importance of food systems and the environment for nutrition. *The American Journal of Clinical Nutrition*, 113(1), 7–16.
- Fanzo, J., Shawar, Y. R., Shyam, T., Das, S., & Shiffman, J. (2021). Challenges to establish effective public-private partnerships to address malnutrition in all its forms. *International Journal of Health Policy and Management*, 10(12), 934.
- Faridah, E., Yamin, A., & Dewi, G. (2024). Collaborative Governance Dalam Pelaksanaan Program Penanganan Stunting (Studi Peran Tim Pendamping Keluarga (Tpk) Di Kecamatan Unter Iwes). *Prosiding Seminar Nasional Manajemen Inovasi*, 8(002, July), 102–113.
- Fauziah, J., Trisnawati, K. D., Rini, K. P. S., & Putri, S. U. (2024). Stunting: Penyebab, Gejala, dan Pencegahan. *Jurnal Parenting Dan Anak*, 1(2), 11.
- Fernandes, D., Niga, J. D., & Klau, R. S. (2022). Collaborative Governance in The Handling of Stunting Program in East Flores District. *Devotion: Journal of Research and Community Service*, 3(14), 2611–2624.
- Fikrie, A., Adula, B., Beka, J., Hailu, D., Kitabo, C. A., & Spigt, M. (2024). Analysis of Determinants of Stunting and Identifications of Stunting Risk Profiles Among Under 2-Year- Old Children in Ethiopia. A Latent Class Analysis. *Health Services Research and Managerial Epidemiology*, 11, 23333928241271920.
- Frumence, G., Jin, Y., Kasangala, A., Bakar, S., Mahiti, G. R., & Ochieng, B. (2024). A Systems Approach in the Prevention of Undernutrition among Children under Five in Tanzania: Perspectives from Key Stakeholders. *Nutrients*, 16(11), 1551.
- Ginting, R., Girsang, E., Sinaga, M., & Manalu, P. (2023). Barriers to Stunting Intervention at a Community Health Center: A Qualitative Study. *Jurnal Penelitian Pendidikan IPA*, 9(10), 8185–8191.
- Ginting, S. B., Simamora, A. C. R., & Siregar, N. S. N. (2022). *Penyuluhan kesehatan tingkatkan pengetahuan ibu dalam mencegah stunting*. Penerbit Nem.
- Goi, M., Salmah, A. U., Jafar, N., Ilham, A. A., Stang, S., Safar, M., & Mallongi, A. (2024). Cross-Sector Collaboration in Addressing Stunting in Indonesia. *Pharmacognosy Journal*, 16(6).
- Gollagher, M., & Hartz-Karp, J. (2013). The role of deliberative collaborative governance in achieving sustainable cities. *Sustainability*, 5(6), 2343–2366.
- Hadi, N. I. (2023). Challenges and Opportunities of Collaborative Governance in Addressing Stunting: Lessons from Papua. *KnE Social Sciences*, 857–866.
- Handayani, S., Agustina, N. W., Agustiningrum, R., & Elsera, C. (2024). *Panduan untuk Ibu: Mencegah Stunting, Membangun Generasi Sehat*. MEGA PRESS NUSANTARA.
- Handryastuti, S., Puspongoro, H. D., Nurdadi, S., Chandra, A., Pramita, F. A., Soebadi, A., Widjaja, I. R., & Rafli, A. (2022). Comparison of cognitive function in children with stunting and children with undernutrition with Normal stature. *Journal of Nutrition and Metabolism*, 2022(1), 9775727.

- Haria, N. G., Humairah, J. F., Putri, D. A., Oktaviani, V., & Niko, N. (2023). Disfungsi Peran Keluarga: Studi Stunting pada Balita di Tanjungpinang Timur, Kota Tanjungpinang, Kepulauan Riau. *SOSMANIORA: Jurnal Ilmu Sosial Dan Humaniora*, 2(2), 204–214.
- Haris, F., Fauziah, V., Rahman, D., Ockta, Y., Zarya, F., Pranoto, N. W., Geantă, V. A., Orhan, B. E., & Karacam, A. (2024). Observation of stunting status with the motor skills of toddler children. *Retos: Nuevas Tendencias En Educación Física, Deporte y Recreación*, 59, 103–111.
- Hartotok, H., Absori, A., Dimyati, K., Santoso, H., & Budiono, A. (2021). Stunting prevention policy as a form of child health rights legal protection. *Open Access Macedonian Journal of Medical Sciences*, 9(E), 1218–1223
- Haryani, S., Astuti, A. P., & Sari, K. (2021). Pencegahan stunting melalui pemberdayaan masyarakat dengan komunikasi informasi dan edukasi di wilayah Desa Candirejo Kecamatan Ungaran Barat Kabupaten Semarang. *Jurnal Pengabdian Kesehatan*, 4(1), 30–39.
- Hasan, D. S., & Rahman, N. I. A. (2024). Meningkatkan Kesadaran Masyarakat melalui Edukasi Pencegahan Stunting di Kota Tidore Kepulauan. *BARAKTI: Journal of Community Service*, 3(1), 92–99
- Herawati, D. M. D., & Sunjaya, D. K. (2022). Implementation outcomes of national convergence action policy to accelerate stunting prevention and reduction at the local level in Indonesia: a qualitative study. *International Journal of Environmental Research and Public Health*, 19(20), 13591.
- Herlianti, L. (2022). Collaboration of Actors in the Network in Stunting Prevention Programs in Bulukumba District. *Enrichment: Journal of Management*, 12(2), 2021–2026.
- Herlianty, H., Setyawati, A., Lontaan, A., Limbong, T., Tyarini, I. A., & Putri, S. Z. (2023). Determinants Influence the Incidence of Stunting in Toddlers Aged 6-59 Months. *Jurnal Edukasi Ilmiah Kesehatan*, 1(2), 73–79.
- Herlina, H., & Aryanto, E. (2023). Peran Kapital Sosial Dalam Percepatan Penurunan Stunting Di Kabupaten Agam. *Economics and Digital Business Review*, 4(2), 237–243.
- Hidayat, B. A., & Erlyn, P. (2021). Stunting and Poverty Management Strategies in the Palembang City, Indonesia. *Randwick International of Social Science Journal*, 2(2), 86–99
- Hidayatillah, Y., AR, M. M., Astuti, Y. P., & Kumala, R. S. D. (2023). Pemberdayaan Masyarakat dalam Pencegahan Stunting Desa Aenganyar Kecamatan Giligenting Kabupaten Sumenep. *Jurnal Gembira: Pengabdian Kepada Masyarakat*, 1(05), 1195–1201.
- Husnah, H., Sakdiah, S., Anam, A. K., Husna, A., & Mardhatillah, G. (2022). Peran Makanan Lokal dalam Penurunan Stunting. *Jurnal Kedokteran Nanggroe Medika*, 5(3), 47–53
- Hutabarat, E. N. (2022). Permasalahan stunting dan pencegahannya. *Journal of Health and Medical Science*, 158–163.
- Imbaruddin, A., Chairunisa, F., & Asmarianti, A. (2022). Why Some Innovation Sustainable and Some Not? *Proceedings of the Third International Conference Administration Science, ICAS 2021, September 15 2021, Bandung, Indonesia*.
- Imron, A., Dini, C. Y., Pratama, S. A., Aziz, U. K., Mudiayah, S., Herowati, D., & Hartanti, F. I. (2022). Sinergi Lintas Sektor Dalam Percepatan Penurunan Stunting Di Kabupaten Nganjuk, Jawa Timur. *National Nutrition Journal/Media Gizi Indonesia*, 17.
- Indra, J., & Khoirunurrofik, K. (2022). Understanding the role of village fund and administrative capacity in stunting reduction: Empirical evidence from Indonesia. *PloS One*, 17(1), e0262743.
- Innes, J. E., & Booher, D. E. (2003). Collaborative policymaking: governance through dialogue. *Deliberative Policy Analysis: Understanding Governance in the Network*



- Society*, 33–59
- Izza, N. C., & Rizmayanti, A. I. (2024). The Analisis Rekam Medis dengan Metode Data Mining untuk Memprediksi Faktor Risiko Stunting dalam Kesehatan Masyarakat. *Jurnal Manajemen Informasi Dan Administrasi Kesehatan*, 7(1), 1–9.
- Jarona, M. M., Purba, E. R. V., Purba, L. I. N., & KM, S. (2025). *Mengurai Hubungan Malaria dan Stunting: Tantangan dan Solusi untuk Generasi Sehat*. Rizmedia Pustaka Indonesia.
- Juliani, H., & Susila Wibawa, K. C. (2024). Promoting Equity: Examining Participatory Justice in Free Lunch Program Planning to Combat Stunting in Indonesia. *Pakistan Journal of Criminology*, 16(2).
- Kamruzzaman, M., Rahman, S. A., Akter, S., Shushmita, H., Ali, M. Y., Billah, M. A., Kamal, M. S., Elahi, M. T., & Paul, D. K. (2021). The anthropometric assessment of body composition and nutritional status in children aged 2–15 years: A cross-sectional study from three districts in Bangladesh.
- Kaponda, T. (2024). Enhancing Rural Governance in Zimbabwe: Exploring the Significance of Inter-Governmental Coordination in Facilitating Collaboration and Communication. In *Exploring Effective Municipal Planning and Implementation* (pp. 145–174). IGI Global.
- Khalifahani, R. (2021). *Hubungan Tingkat Pengetahuan Ibu Tentang Pemberian Asi Dan Mp-Asi Terhadap Resiko Kejadian Stunting Di Kelurahan Pondok Kelapa Jakarta Timur*. Universitas Binawan.
- Kobylińska, M., Antosik, K., Decyk, A., Kurowska, K., & Skiba, D. (2022). Body composition and anthropometric indicators in children and adolescents 6–15 years old. *International Journal of Environmental Research and Public Health*, 19(18), 11591
- Kodish, S. R., Farhikhtah, A., Mlambo, T., Hambayi, M. N., Jones, V., & Aburto, N. J. (2022). Leveraging the scaling up nutrition movement to operationalize stunting prevention activities: implementation lessons from Rural Malawi. *Food and Nutrition Bulletin*, 43(1), 104–120
- Kurniati, H., Djuwita, R., & Istiqfani, M. (2022). Tinjauan Literatur: Stunting Saat Balita sebagai Salah Satu Faktor Risiko Penyakit Tidak Menular di Masa Depan. *Jurnal Epidemiologi Kesehatan Indonesia*, 6(2), 2.
- Laily, L. A., & Indarjo, S. (2023). Literature Review: Dampak Stunting terhadap Pertumbuhan dan Perkembangan Anak. *HIGEIA (Journal of Public Health Research and Development)*, 7(3), 354–364.
- Laksono, A. D., Izza, N., Trisnani, T., Paramita, A., Sholikhah, H. H., Andarwati, P., Rosyadi, K., & Wulandari, R. D. (2024). Determination of appropriate policy targets to reduce the prevalence of stunting in children under five years of age in urban-poor communities in Indonesia: a secondary data analysis of the 2022 Indonesian national nutritional status survey. *BMJ Open*, 14(9), e089531.
- Lede, Y. U., Solo, M., & Jati, B. A. L. (2024). Pencegahan Stunting Melalui Edukasi dan Pemberian Makanan Tambahan Bagi Balita Di Desa Kalembo Kaha Kabupaten Sumba Barat Daya. *Varied Knowledge Journal*, 2(2), 38–44.
- Lestari, E., Shaluhiah, Z., & Adi, M. S. (2023). Intervensi pencegahan stunting pada masa prakonsepsi: Literature review. *Media Publikasi Promosi Kesehatan Indonesia (MPPKI)*, 6(2), 214–221.
- Lino, M. M., Pandie, D. B. W., Fernandez, D., Toda, H., & Seran, Y. (2024). Penta Helix Collaboration in Accelerating the Reduction of Stunting Rates in East Nusa Tenggara, Indonesia. *Universal Journal of Public Health*, 12(5), 918–927.
- Lobho, K. E. T., Tanu, L. S. N., Ika, H., Luni, D., & Sula, Y. I. (2024). Peran Digitalisasi dalam Penanggulangan Stunting: Solusi Inovatif untuk Generasi Sehat. *Indonesian Research*

- Journal on Education*, 4(2), 1152–1161.
- Macella, A. D. R., Mardhiah, N., & Handayani, S. W. (2022). A Study of Leadership Innovation in Stunting Prevention and Handling in Simeulue, Aceh Province, Indonesia.
- Manggul, M. S., Trisnawati, R. E., Bebok, C. F. M., Anes, E., & Nasan, M. Y. (2023). Pendampingan Orang Tua dalam Stimulasi Psikososial terhadap Perkembangan Motorik Kasar dan Motorik Halus pada Balita Stunting di Desa Lentang Kec. Lelak Kabupaten Manggarai. *Jurnal Kreativitas Pengabdian Kepada Masyarakat (PKM)*, 6(5), 1860–1869.
- Mantasia, M., & Sumarmi, S. (2022). Hubungan Riwayat Anemia Kehamilan Dengan Kejadian Stunting Pada Batita Di Wilayah Kerja Puskesmas Galesong Kabupaten Takalar: The Relationship Between History of Anemia in Pregnancy and the Incidence of Stunting in Toddlers in The Working Area of the Gale. *Jurnal Ilmiah Keperawatan (Scientific Journal of Nursing)*, 8(1), 205–213.
- Marantika, M. (2021). The Feeding Pattern Related to Stunting in Toddlers Age 24–59 Months. *International Conference on Health and Medical Sciences (AHMS 2020)*, 242–245.
- Mariana, P. P., & Lestari, K. S. (2022). Analisis Faktor Personal Higiene dan Akses pada Sanitasi terhadap Kasus Stunting pada Balita di Asia: Literature Review. *Promotif: Jurnal Kesehatan Masyarakat*, 12(2), 116–130.
- Marni, M., Abdullah, A. Z., Thaha, R. M., Hidayanty, H., Sirajuddin, S., Razak, A., Stang, S., & Liliweri, A. (2021). Cultural communication strategies of behavioral changes in accelerating of stunting prevention: a systematic review. *Open Access Macedonian Journal of Medical Sciences*, 9(F), 447–452.
- Martony, O. (2023). Stunting di Indonesia: Tantangan dan solusi di era modern. *Journal of Telenursing (JOTING)*, 5(2), 1734–1745.
- Maulana, I. N. H., Sholihah, Q., & Wike, W. (2022). Implementasi Kebijakan Intervensi Gizi Spesifik sebagai Upaya Penanganan Stunting di Kabupaten Malang. *Jurnal Ilmiah Administrasi Publik*, 8(2), 136–144.
- Maulana, M. S., & Elsy, R. (2024). *Strategi Pemberdayaan Masyarakat Dapur Sehat Atasi Stunting (DASHAT) Dalam Pemenuhan Gizi Seimbang Di BKKBN Kota Palembang Provinsi Sumatera Selatan*. IPDN.
- Mediani, H. S., Hendrawati, S., Pahria, T., Mediawati, A. S., & Suryani, M. (2022). Factors affecting the knowledge and motivation of health cadres in stunting prevention among children in Indonesia. *Journal of Multidisciplinary Healthcare*, 1069–1082.
- Medise, B. E., Julia, M., Devaera, Y., Sitaresmi, M. N., Asmarinah, Widjaja, N. A., Kalalo, R. T., Soesanti, F., Friska, D., & Sirait, W. R. (2024). Understanding the pubertal, psychosocial, and cognitive developmental trajectories of stunted and non-stunted adolescents: protocol of a multi-site Indonesian cohort study. *Frontiers in Pediatrics*, 12, 1296128.
- Meher, C., Zaluchu, F., & Eyoer, P. C. (2023). Local approaches and ineffectivity in reducing stunting in children: A case study of policy in Indonesia. *F1000Research*, 12, 217.
- Melisa, M., Kasmawati, K., Sitompul, S., Monalisa, M., Rohani, R., & Novianti, M. N. (2022). The government policy for stunting countermeasure strategy in Indonesia be preparing for golden generation 2045. *Scholars International Journal of Law, Crime and Justice*, 5(12), 554–563.
- Mhagama, P. (2023). Incentives for Promoting Nutrition Sensitive Behaviours Using Social and Behaviour Change Communication Approaches: A Case of the Afikepo Nutrition Programme in Malawi: Incentives for Nutrition Sensitive Behaviours in the Afikepo Nutrition Programme in Ma. *African Journal of Rural Development*, 8(2), 158–170.
- Miles, M. B., Huberman, A. M., & Saldana, J. (2018). *Qualitative Data Analysis a Methods*

- Sourcebook* (Third Edit). Sage Publications. <https://www.pdfdrive.com/qualitative-data-analysis-a-methods-sourcebook-e183985418.html>
- Millward, D. J. (2021). Interactions between growth of muscle and stature: mechanisms involved and their nutritional sensitivity to dietary protein: the protein-stat revisited. *Nutrients*, 13(3), 729.
- Montenegro, C. R., Gomez, G., Hincapie, O., Dvoretzkiy, S., DeWitt, T., Gracia, D., & Misas, J. D. (2022). The pediatric global burden of stunting: Focus on Latin America. *Lifestyle Medicine*, 3(3), e67.
- Morales, F., Montserrat-de la Paz, S., Leon, M. J., & Rivero-Pino, F. (2023). Effects of malnutrition on the immune system and infection and the role of nutritional strategies regarding improvements in children's health status: A literature review. *Nutrients*, 16(1), 1.
- Mulyadi, D., & Maulana, R. R. (2021). Government Collaboration Model for Disaster Management Policy in West Bandung Regency. *2nd International Conference on Administration Science 2020 (ICAS 2020)*, 100–103.
- Munthe, J. (2021). The Effect of Leaflet Media Counseling To Increase Stunting Knowledge On Pregnant Women. *Science Midwifery*, 9(2), 595–599.
- Mustakim, M. R. D., Irawan, R., Irmawati, M., & Setyoboedi, B. (2022). Impact of Stunting on Development of Children between 1-3 Years of Age. *Ethiopian Journal of Health Sciences*, 32(3).
- Mutasa, K., Tome, J., Rukobo, S., Govha, M., Mushayanembwa, P., Matimba, F. S., Chiorera, C. K., Majo, F. D., Tavengwa, N. V, & Mutasa, B. (2022). Stunting status and exposure to infection and inflammation in early life shape antibacterial immune cell function among Zimbabwean children. *Frontiers in Immunology*, 13, 899296.
- Muzayyarah, M. (2021). Tingkat Pengetahuan Ibu Balita Tentang Stunting. *Oksitosin: Jurnal Ilmiah Kebidanan*, 8(2), 81–92.
- Nabatchi, T., & Emerson, K. (2021). Implementation in collaboration governance. In *Handbook of collaborative public management* (pp. 402–420). Edward Elgar Publishing.
- Nasim, N., El-Zein, A., & Thomas, J. (2022). A review of rural and peri-urban sanitation infrastructure in South-East Asia and the Western Pacific: Highlighting regional inequalities and limited data. *International Journal of Hygiene and Environmental Health*, 244, 113992.
- Natasha, A. P., & Santoso, R. S. (2024). Proses Collaborative Governance Dalam Penanganan Stunting Di Kelurahan Bandarharjo Kota Semarang. *Journal of Public Policy and Management Review*, 1(1), 403–425.
- Nazidah, M. D. P., Fauziah, R., Hafidah, R., Jumi atmoko, J., & Nurjanah, N. E. (2022). Pengaruh stunting pada kognitif anak usia dini. *Yinyang: Jurnal Studi Islam Gender Dan Anak*, 59–72
- Neherta, N. M. (2023). *Faktor-Faktor Penyebab Stunting Pada Anak*. Penerbit Adab.
- Ningsih, S., Puspitasari, D. I., Isnaeni, F. N., & Setyaningrum, Z. (2023). Hubungan Praktik Pemberian Makan Dan Hygiene Sanitasi Lingkungan Dengan Kejadian Stunting Pada Balita Usia 24-59 Bulan. *Pontianak Nutrition Journal (PNJ)*, 6(2).
- Nur Fiana, I. (2021). *Status Gizi Balita Di Posyandu Dusun Balongmojo Desa Balongmojo Kecamatan Puri Kabupaten Mojokerto*.
- Nurbaiti, D. (2024). *Faktor-Faktor Yang Berhubungan Dengan Kejadian Stunting Pada Balita Usia 24-59 Bulan Di Wilayah Kerja Puskesmas Minggir*. Poltekkes Kemenkes Yogyakarta.
- Nurhayati, R., Rukmawati, S., Utami, R. B., Nurmalita, D., & Rahma, P. A. (2024). Parenting Style and Stimulation of Psychosocial Development on the Psychosocial

- Development of Pre-School Children with Stunting. *Jurnal Kesehatan*, 15(3), 442–447.
- Nurkamalah, A., Mulyatin, T. C., & Ibrahim, T. (2024). Partisipasi Masyarakat Dalam Program Dapur Sehat Atasi Stunting (Dashat) Di Desa Cibeureum Kecamatan Banjar Kota Banjar Tahun 2023. *JIPE: Jurnal Ilmiah Ilmu Pemerintahan*, 8(2), 129–141.
- Nurwahyuni, N., Nurlinda, A., Asrina, A., & Yusriani, Y. (2023). Socioeconomic level of Mrs. Baduta stunting. *Jurnal Ilmiah Kesehatan Sandi Husada*, 12(2), 331–338.
- Nurwati, R. N., & Listari, Z. P. (2021). Pengaruh status sosial ekonomi keluarga terhadap pemenuhan kebutuhan pendidikan anak. *Share Social Work Journal*, 11(1), 74–80.
- Oktrina, S., Saiban, K., & Wahyudi, C. (2022). Innovation for Handling Stunting Based on Community Empowerment in Gampong Ara, Kembang Tanjong Sub-District, Pidie District, Aceh Province of Indonesia: Study of Policy Implementation Based on Pidie Regent Regulation Number 77 of 2017 about Reduction in Stunting. *International Journal of Research in Social Science and Humanities (IJRSS)* ISSN: 2582-6220, DOI: 10.47505/IJRSS, 3(2), 12–24.
- Olo, A., Mediani, H. S., & Rakhmawati, W. (2021). Hubungan Faktor Air dan Sanitasi dengan Kejadian Stunting pada Balita di Indonesia. *Jurnal Obsesi: Jurnal Pendidikan Anak Usia Dini*, 5(2), 1113–1126.
- Oumer, A., Fikre, Z., Girum, T., Bedewi, J., Nuriye, K., & Assefa, K. (2022). Stunting and underweight, but not wasting are associated with delay in child development in southwest Ethiopia. *Pediatric Health, Medicine and Therapeutics*, 1–12.
- Padilla, C. J., Ferreyro, F. A., & Arnold, W. D. (2021). Anthropometry as a readily accessible health assessment of older adults. *Experimental Gerontology*, 153, 111464.
- Pangaribuan, S. R. U., Napitupulu, D. M. T., & Kalsum, U. (2022). Hubungan Sanitasi Lingkungan, Faktor Ibu dan Faktor Anak Dengan Kejadian Stunting Pada Anak Usia 24–59 Bulan di Puskesmas Tempino Kabupaten Muaro Jambi. *Jurnal Pembangunan Berkelanjutan*, 5(2), 79–97.
- Panjaitan, D. A., Lubis, S. N., Sabrina, T., & Badaruddin, B. (2023). Testing the Best Development Planning Collaboration Model in Moderating the Acceleration of Regional Economic Development. *International Conference on Sciences Development and Technology*, 3(1), 129–14.
- Pebriandi, P., Fatriansyah, A., Rizka, D., Indahsari, L. N., Yulanda, N. O., & Nurianti, N. (2023). Sosialisasi Pencegahan Stunting pada Masyarakat Desa Simandolak Kecamatan Benai Kabupaten Kuantan Singingi. *ARRUS Jurnal Pengabdian Kepada Masyarakat*, 2(2), 53–57.
- Permani, R. (2021). Collaborative governance in poverty reduction in Bandung City. *Jurnal Ilmiah Ilmu Administrasi Publik*, 11(1), 24–39.
- Permatasari, A., Sofyan, N., & Walinegoro, B. G. (2022). Stunting Prevention through Collaborative Governance in The Berbah Sub-District, Sleman. *International Conference on Sustainable Innovation on Humanities, Education, and Social Sciences (ICOSI-HESS 2022)*, 618–628.
- Prafitri, L. D., Zuhana, N., Budiarto, E., & Widyastuti, W. (2023). *Edukasi Layanan Konvergensi Stunting pada Ibu Hamil*. Penerbit NEM.
- Pranoto, N. W., Fauziah, V., Muchlis, A. F., Komaini, A., Rayendra, R., Susanto, N., Fitriady, G., Setyawan, H., Pavlovic, R., & Sibomana, A. (2024). Exploration of children's motor skills with stunting vs. Non-stunting. *Retos: Nuevas Tendencias En Educación Física, Deporte y Recreación*, 54, 224–234.
- Prasetyo, A., Noviana, N., Rosdiana, W., Anwar, M. A., Harwijayanti, B. P., & Fahlevi, M. (2023). Stunting convergence management framework through system integration



- based on regional service governance. *Sustainability*, 15(3), 1821.
- Prawiohartono, E. P. (2021). *Stunting: dari teori dan bukti ke implementasi di lapangan*. UGM PRESS.
- Prendergast, A. J., & Humphrey, J. H. (2014). The stunting syndrome in developing countries. *Paediatrics and International Child Health*, 34(4), 250–265.
- Prismakova-Rivera, S., & Pysmenna, O. (2021). Collaborative governance: processes, benefits and outcomes. In *Handbook of Theories of Public Administration and Management* (pp. 80–96). Edward Elgar Publishing.
- Puteri, N. F. H., Maria, I. L., & Hidayanty, H. (2021). Analysis of Determinants of Stunting Incidence in 2-Year-Old Toddlers in Mamuju Regency. *Journal of Asian Multicultural Research for Medical and Health Science Study*, 2(3), 73–80.
- Putri, S. Y. (2021). Implementasi Program Tujuan Pembangunan Berkelanjutan (Sustainable Development Goals) Pada Kasus Stunting Di Indonesia. *Jurnal PIR: Power in International Relations*, 5(2), 163–174.
- Rachmawati, U. A., Suherlan, E., Windriyani, P., Pratiwi, P. S., Prasetyo, R., Ghammi, K., Alawiyah, M., & Fajriyanti, S. (2022). SiCenting+: An Information System for Monitoring the Stunted Growth and Nutritional Status of Children in Pandeglang Regency. *2022 Second International Conference on Advanced Technologies in Intelligent Control, Environment, Computing & Communication Engineering (ICATIECE)*, 1–6.
- Rahman, H. N., Nugrahani, C. I., Ferdina, C. S., Christiana, E., Sari, A. P., Iszakiyah, N., Amin, E. S., & Rahman, T. (2023). *Cegah Stunting sebagai Upaya Wujudkan Generasi Emas*. Penerbit NEM.
- Rahmasari, S. A., & Wicaksono, I. (2022). Implementasi Kebijakan Penanganan Stunting Di Kabupaten Jember Dalam Upaya Percepatan Pencapaian Target Sustainable Development Goals. *Jurnal Universitas Muhammadiyah Jember*.
- Rahmawati, D., & Agustin, L. (2021). *Psycho-social stimulation and food diversity of children detected stunting*.
- Ramadhan, C., & Susanto, W. E. (2023). *Kepemimpinan Demokratis Dalam Program Kampung Keluarga Berencana*. Uwais Inspirasi Indonesia.
- Rambe, N. L., Hutabarat, E. N., & Hafifah, R. (2023). The Effect of Stunting on Children's Cognitive Development: Systematic Review. *Contagion: Scientific Periodical Journal of Public Health and Coastal Health*, 5(2), 360–372.
- Rasyid, P. S., Zakaria, R., & Munaf, A. Z. T. (2022). *Remaja Dan Stunting*. Penerbit Nem.
- Riatma, D. L., Roshinta, T. A., Safi'ie, M. A., A'la, F. Y., & Firdaus, N. (2023). Enhancing Data Quality Management: A Case Study of Screening and Handling Stunting Toddlers in Big Data Applications. *2023 6th International Conference of Computer and Informatics Engineering (IC2IE)*, 303–308.
- Riau, D. P., Priyanto, A., Suryati, D., & Purbosari, N. R. (2025). Public service innovation as a manifestation of dynamic government implementation in the Banyuwangi regency government. *Multidisciplinary Science Journal*, 7(6), 2025272.
- Rini, S. D. W., HR, H. T., & Hanapi, A. (2021). The relationship of exclusive assessment with stunting events in children aged 2-5 years in uptd ngadi health center, Kediri district. *The 3rd Joint International Conference*, 3(1), 329–336.
- Risnawati, I., & Munafiah, D. (2022). Upaya Pencegahan Stunting Melalui Pemberian Makanan Seimbang dan Stunting Massage. *Jurnal ABDIMAS Indonesia*, 4(1), 40–46.
- Riyadh, N. A., Batara, A. S., & Nurlinda, A. (2023). Efektivitas Kebijakan dalam Pelaksanaan Program Penanggulangan Stunting di Kabupaten Enrekang. *Journal of Muslim Community Health*, 4(1), 1–17.

- Ropitasari, S. K., Nur, R., Patonah, S., KM, S., Laksono, R. D., SpPD, M., FINASIM, S. H., MH, M., Matara, I. I. K. A., & Sadat, L. A. (2024). *Kebijakan Kesehatan*. CV Rey Media Grafika.
- Rumlah, S. (2022). Masalah sosial dan solusi dalam menghadapi fenomena stunting pada anak. *Krinok: Jurnal Pendidikan Sejarah Dan Sejarah*, 1(3), 83–91.
- Saleh, A., Syahrul, S., Hadju, V., Andriani, I., & Restika, I. (2021). Role of maternal in preventing stunting: a systematic review. *Gaceta Sanitaria*, 35, S576–S582.
- Samaloisa, M. S. (2024). Keterlambatan perkembangan motorik anak akibat kurangnya asupan gizi. *Jurnal Lingkar Pembelajaran Inovatif*, 5(11).
- Sanggalorang, Y., Sebayang, F., Malonda, N. S. H., & Rumayar, A. A. (2024). INSIGHTS INTO CHILDHOOD MALNUTRITION: AN ANALYSIS ON FOOD VULNERABILITY AND STUNTING USING 2021 INDONESIAN NUTRITIONAL STATUS SURVEY DATA. *National Nutrition Journal/Media Gizi Indonesia*, 19(3).
- Saputra, A. S., Suryoto, S., & Sutikno, C. (2022). Implementasi Kebijakan Penanggulangan Stunting di Kabupaten Purbalingga. *Publikauma: Jurnal Administrasi Publik Universitas Medan Area*, 10(2), 162–170.
- Sartika, A. N., Khoirunnisa, M., Meiyetrian, E., Ermayani, E., Pramesthi, I. L., & Nur Ananda, A. J. (2021). Prenatal and postnatal determinants of stunting at age 0–11 months: A cross-sectional study in Indonesia. *Plos One*, 16(7), e0254662.
- Scheffler, C., & Hermanussen, M. (2022). Stunting is the natural condition of human height. *American Journal of Human Biology*, 34(5), e23693.
- Sengchaleun, V., Kounnavong, S., & Reinharz, D. (2023). Emergence of National Nutrition Policy in the Lao People's Democratic Republic: an analysis of collaborations between governmental and external actors. *Tropical Medicine and Health*, 51(1), 43.
- Setiarsih, D., Raharjeng, S. H., Kardina, R. N., Viantri, P., Fildzah, F., Putri, P. H., Syafiuddin, A., Amalia, R., & Widowati, K. (2023). The important role of multi-sector partnership in stunting management in east java: a literature review. *Bali Medical Journal*, 12(1), 660–664.
- Sihite, N. W., & Chaidir, M. S. (2022). Keterkaitan kemiskinan, kecukupan energi dan protein dengan kejadian stunting balita di Puskesmas 11 Ilir Palembang. *Darussalam Nutrition Journal*, 6(1), 37–47.
- Sihite, N. W., Nazarena, Y., Ariska, F., & Terati, T. (2021). Analisis Ketahanan Pangan dan Karakteristik Rumah Tangga dengan Kejadian Stunting. *Jurnal Kesehatan Manarang*, 7(Khusus).
- Sinta Widyaningrum, N. (2023). *Hubungan Pola Makan Seimbang Dan Tingkat Stress Terhadap Produksi Asi Ibu Menyusui Di Desa Bogorejo Wilayah Kerja Puskesmas Tebon Kabupaten Magetan*. Stikes Bhakti Husada Mulia Madiun.
- Soliman, A., Alaraj, N., Hamed, N., Alyafei, F., Ahmed, S., Shaat, M., Itani, M., Elalaily, R., & Soliman, N. (2022). Nutritional interventions during adolescence and their possible effects. *Acta Bio Medica: Atenei Parmensis*, 93(1).
- Soliman, A., Alyafei, F., Elawwa, A., Soliman, N., Elsiddig, S., Alaraj, N., Hamed, N., Ahmed, S., Elawa, Z., & Alkuwari, M. (2024). Impact of BMI on childhood growth, pubertal timing, and bone maturation: A comprehensive review and clinical implications. *World Journal of Advanced Research and Reviews*, 23(3), 2093–2106.
- Soliman, A., De Sanctis, V., Alaraj, N., Ahmed, S., Alyafei, F., Hamed, N., & Soliman, N. (2021). Early and long-term consequences of nutritional stunting: from childhood to adulthood. *Acta Bio Medica: Atenei Parmensis*, 92(1).
- Sompa, A. T. (2021). *Community Empowerment Strategy in Handling Efforts of Stunting in*

- Malutu Village, Hulu Sungai Selatan.*
- Sriyanah, N. (2023). *Upaya Pencegahan STUNTING dalam Tinjauan Pediatri*. PT Inovasi Pratama Internasional.
- Suarniti, N. W., Astiti, N. K. E., Purnamayanti, N. M. D., Dewi, I. G. A. A. N., & Wirata, I. N. (2024). Implementation of Youth Integrated Healthcare Center in the Prevention of Stunting Incidents in the Kekeran Village of Badung Regency, Indonesia. *Ebelik ve Sağlık Bilimleri Dergisi*, 7(3), 434–444.
- Sufri, S., Nurhasanah, Jannah, M., Dewi, T. P., Sirasa, F., & Bakri, S. (2023). Child stunting reduction in Aceh Province: challenges and a way ahead. *Maternal and Child Health Journal*, 27(5), 888–901.
- Sugianto, M. A. (2021). Analisis Kebijakan Pencegahan dan Penanggulangan Stunting di Indonesia: dengan Pendekatan what is the Problem Represented to be? *Jurnal Ekonomi, Manajemen, Bisnis, Dan Sosial (EMBISS)*, 1(3), 197–209.
- Sulistyaningsih, S., Aprillia, R., Annisa, L., & Febrianti, C. P. (2023). The Effectiveness of Interprofessional Collaboration Practice to Reduce The Risk of Stunting: An Integrative Review. *Jurnal Aisyah: Jurnal Ilmu Kesehatan*, 8(2).
- Sumanti, R. (2024). Collaborative Governance: Strategi Pencegahan dan Penurunan Prevalensi Stunting. *Jurnal Kebijakan Pembangunan*, 19(1), 13–26.
- Sumardino, S., Lestari, S., & Widodo, W. (2024). Development of Local Wisdom in Preventing Stunting in Village Communities. *JKG (JURNAL KEPERAWATAN GLOBAL)*, 40–47.
- Supradewi, I., Batlajery, J., & Siswanto, E. J. (2023). *Deteksi dini faktor risiko stunting*. Penerbit NEM.
- Suriani, A., Rosyidah, N. N., Herlina, H., Yulianto, Y., Widiyawati, R., Sholeh, R., & Ardianto, F. R. (2022). Pemeriksaan kesehatan serta sosialisasi peningkatan kesehatan ibu dan anak untuk mencegah stunting. *Jurnal Pengabdian Pada Masyarakat Indonesia*, 1(6), 43–53.
- Syafrawati, S., Lipoeto, N. I., Masrul, M., Novianti, N., Gusnedi, G., Susilowati, A., Nurdin, A., Purnakarya, I., Andrafikar, A., & Umar, H. B. (2023). Factors driving and inhibiting stunting reduction acceleration programs at district level: A qualitative study in West Sumatra. *Plos One*, 18(3), e0283739.
- Syahrinullah, S. (2024). Strengthening Strategy Village Performance Management In Effort Reducing Stunting Through Multistakeholder Involvement In The Village. *Jurnal Ekonomi*, 13(04), 380–388.
- Tarigan, S. R. D. B., Stiawati, T., & Maulana, D. (2025). Kebijakan Percepatan Penurunan Stunting dan Solusi Masalah Gizi di Kota Serang “Endog Kepiting.” *Jurnal Pemerintahan Dan Politik*, 10(1), 42–63.
- Tawai, A., & Sucipto, H. A. (2022). Peningkatan Kualitas Pelayanan Keluarga Berencana Pada Dinas Pengendalian Penduduk dan Keluarga Berencana Kabupaten Buton Utara. *NeoRespublica: Jurnal Ilmu Pemerintahan*, 4(1), 212–221.
- Toana, A. A., & Rowa, H. (2024). Model Partisipasi Penta Helix dalam Penanganan Stunting di Kota Depok: Hambatan, Strategi, dan Tantangan Penguatan Kesejahteraan Sosial. *Indonesian Journal of Humanities and Social Sciences*, 5(4), 2145–2158.
- Tracy, S. J. (2024). *Qualitative research methods: Collecting evidence, crafting analysis, communicating impact*. John Wiley & Sons.
- Triansyah, F. A., Rahayu, S., Aisyah, I., & Dahlan, D. (2024). Mengungkap Human Capital di Indonesia, Singapura dan Timor Leste Menurut World Bank Group. *J-CEKI: Jurnal Cendekia Ilmiah*, 3(6), 7230–7241.
- Tyarini, I. A., Setiawati, A., Achmad, V. S., & Astuti, A. (2023). Improving healthy behavior

- in preventing stunting through digital media. *Abdimas Polsaka: Jurnal Pengabdian Masyarakat*, 2(2), 97–103.
- Utami, F. P., Ruliyandari, R., Agustin, H., & Matahari, R. (2025). Stunting Prevention Based on Local Wisdom in Bantul Regency, Yogyakarta, Indonesia. *Prevención del desmedro basado en la sabiduría ancestral de la regencia de Bantul, Yogyakarta, Indonesia. Social Medicine*, 18(1).
- Wardani, G., & Indriasari, S. (2024). Implementasi Kebijakan Dalam Pelaksanaan Program Penanggulangan Stunting Di Kabupaten Klaten. *Fenomena*, 4(01).
- Widyastuti, Y., Rahayu, U. F. N., Mulyana, T., & Khoiri, A. M. (2022). Sosialisasi Stunting dan Upaya Pencegahannya Di Desa Padarincang, Kecamatan Padarincang, Kabupaten Serang. *Komunitas: Jurnal Pengabdian Kepada Masyarakat*, 2(1).
- Widyawati, S. A., Wahyuni, S., & Afandi, A. (2021). Factors related to stunting events in children. *Annals of the Romanian Society for Cell Biology*, 25(6), 3324–3332.
- Wulandari, E. C., Wijayanti, H. S., Widyastuti, N., Panunggal, B., Ayustaningwarno, F., & Syaury, A. (2021). Hubungan stunting dengan keterlambatan perkembangan pada anak usia 6-24 bulan. *Journal of Nutrition College*, 10(4), 304–312.
- Wulandari, R. D., Laksono, A. D., Kusrini, I., & Tahangnacca, M. (2022). The targets for stunting prevention policies in Papua, Indonesia: What mothers' characteristics matter? *Nutrients*, 14(3), 549.
- Wulandary, W., & Sudiarti, T. (2021). Nutrition intake and stunting of under-five children in Bogor West Java, Indonesia. *J Food Sci Nutr*, 7(104), 2.
- Yazia, V., & Suryani, U. (2024). Pola Pemberian Makanan Pendamping ASI Berhubungan Yulia, C., Rosdiana, D. S., Nikmawati, E. E., & Muktiarni, M. (2023). Developing a nutrition education model based on local wisdom for adolescents to prevent Stunting in the early stage: a preliminary study. *AcTion: Aceh Nutrition Journal*, 8(4), 666–674.
- Yuliasari, S., Machbub, S. S. L., & Mutolib, A. (2024). Pencegahan Stunting Pada Balita Melalui Edukasi Pemberian Makanan Tambahan Sebagai Upaya Peningkatan Kesadaran Masyarakat di Desa Sukamulya. *Jurnal Pengabdian Dan Pemberdayaan Masyarakat Inovatif*, 3(2), 54–59.
- Yustanta, B. F., & Mulyati, S. B. (2024). The Innovation Program Eradicates Malnutrition in High-Risk Pregnant Women and Toddlers. *Proceedings of the National Health Scientific Publication Seminar*, 3(3), 1073–1081.
- Zidikheri, M., & Gasto, F. (2023). Challenges and Stakeholders' Views on Achievements of Multi-Sectoral Governance in Improving Child Nutrition in Buhigwe District, Tanzania. *The East African Health Research Journal*, 7(2), 211.