

Stunting: Issues And Prevention Efforts by Stakeholders

Faizah Luthfia¹, T Titania², Moh. Taufik Hidayat^{3*}, R. Mahendra Haryo Bharoto⁴

Faculty Social Science and Political Science, Public Administration, Universitas Swadaya Gunung Jati, Cirebon, Indonesia

Author Email : faizahluthfia1221@gmail.com¹, titania11sept@gmail.com², moh.taufik.hidayat@ugj.ac.id^{3*}, haryo.bharoto@ugj.ac.id⁴

Abstract. This study aims to analyze the implementation of policies and the role of stakeholders in addressing stunting reduction in Cicurug Village. The issuance of Majalengka Regent's Decision No. KS.02.00.00/KEP.294-DP3AKB/2022 regarding the Stunting Reduction Acceleration Team marks the initial step for stakeholders to collaborate in reducing stunting rates. The issue of stunting must be re-examined, as the stunting rate in Majalengka District increased from 1.26% to 2.17% in 2024. This study employs Van Meter and Van Horn's theory, which identifies six indicators of successful policy implementation: policy standards and objectives, resources, communication, characteristics of implementing agencies, socio-economic and political environment, and attitudes of implementers. The research methods used are qualitative and descriptive. Data collection techniques include interviews, observations, and documentation. The research findings on the implementation of stunting policies by stakeholders revealed several major issues in the implementation of the stunting reduction program, including insufficient coordination among local government agencies, a shortage of specialized personnel at the community health center level, and low public awareness of the importance of participating in posyandu activities. The research results are expected to provide an overview that the implementation of stunting policies by stakeholders in Majalengka District has not yet been fully optimized.

Keywords : Inter-agency Coordination, Stunting, Stakeholders, Policy Implementation, Van Meter and Van Horn.

1 Introduction

Stunting, commonly referred to as dwarfism or short stature, is a condition in which children under the age of five experience growth retardation caused by prolonged malnutrition and recurrent infections. This condition primarily occurs during the first 1,000 days of life (HPK), which spans from pregnancy until the child is 23 months old (TNP2K, 2018). Stunting is a significant health issue in society that must be addressed seriously because it not only affects the health of infants but also has long-term impacts on low labor productivity and can impose economic pressures on the country (Ghattas, 2014) as noted by (Najdah et al., 2022). The phenomenon of stunting in Indonesia has become a key focus for the government. The setting of a national target to reduce stunting prevalence to 14%, as outlined in the RPJMN 2020-2024 document, reflects a strong commitment and involves collaboration among various stakeholders. Stakeholders, or those with an interest in an issue, are individuals or groups who have the ability to influence or be influenced by the activities and objectives carried out by an organization. (Freeman in Miles, 2012) by (Nur Alifisyiam et al., 2024). Stakeholder involvement in the implementation of an activity is crucial, as emphasized by Sandy (2020). He stressed that stakeholder participation in policy implementation is essential to address various challenges that may arise, ensuring that the set objectives are achieved (Nur Alifisyiam et al., 2024)

The issue of stunting in Indonesia remains unresolved due to fluctuations in stunting prevalence rates across certain regions or areas. One such area is Majalengka District, specifically in Majalengka Subdistrict, where the stunting rate has not yet reached the target set by the government and the community. In 2022-2023, the stunting rate in Majalengka Regency decreased from 3.84% to 3.12%, but in 2024, it increased again to 4.12%. This demonstrates that the implementation of stunting prevention measures in Majalengka Regency has not been carried out optimally.

The issuance of Majalengka Regency Regulation No. 25 of 2019 on Stunting Reduction marks the initial step by the local government in developing strategies to reduce stunting rates in Majalengka Regency. Addressing stunting requires several pillars, including: (1) clear commitment and vision from local leaders, (2) campaigns aimed at enhancing public understanding, (3) positive behavioral changes, (4) political commitment and high

accountability, (5) convergence, coordination, and consolidation between national, regional, and community programs, (6) strengthening policies related to nutritious food security, and (7) continuous monitoring and evaluation. This strategy is implemented at all levels of government in Majalengka District, involving various relevant government agencies and non-governmental organizations, including the private sector, civil society, and communities. During its implementation, stakeholders collaborate to accelerate stunting reduction, including the Majalengka District Health Office, Majalengka Community Health Center, Cicurug Village Health Post, and the community. The Majalengka District Health Office (Dinkes) plays a crucial and authoritative role in the health sector, significantly contributing to efforts to accelerate stunting prevention at the sub-district level, particularly in the context of various specific nutrition interventions. In implementing these specific nutrition interventions, the Health Office must ensure that the budget allocated for programs or activities related to priority interventions is adequately fulfilled. Additionally, supporting interventions can be implemented after priority interventions have been effectively carried out.

Community health centers are seen as significant stakeholders because they have a direct interest in the implementation of the stunting reduction program established by the Majalengka District Health Office. Although they do not have decision-making authority, statements and opinions from community health centers still receive attention from the Majalengka District government. The positive impact felt by puskesmas in efforts to reduce stunting prevalence rates in Majalengka Subdistrict is an improvement in their performance, supported by the provision of facilities and budgets from the government.

Posyandu is a form of Community-Based Health Efforts (UKBM) managed by villages/subdistricts and implemented by the community for collective interests. The main objective of posyandu is to support initiatives in health development, empower the community, and facilitate community access to basic health services, with the hope of accelerating the reduction of maternal and infant mortality rates.

The community is considered the main stakeholder because they have a direct interest as the target of the program. The input provided by the community is an important consideration in the government's decision-making process. In addition, the community also feels the positive impact directly, namely an increase in knowledge about the treatment and prevention of stunting and optimal health development, especially for toddlers who experience stunting.

Although various studies have discussed the importance of cross-sector collaboration in addressing stunting, there are still limitations in studies that specifically review the implementation of stunting policies at the sub-district level, particularly in Majalengka Sub-district. Previous studies have tended to emphasize educational and community empowerment aspects, but few have delved deeply into the challenges faced by stakeholders such as the Health Department, Community Health Centers, Posyandu, and the community in the operational implementation of policies. Additionally, the resurgence of stunting prevalence rates in Majalengka District in 2024 indicates gaps in the effectiveness of programs currently being implemented. Therefore, this study aims to address this gap by analyzing the barriers to policy implementation and the roles of each stakeholder in stunting prevention efforts within a contextual framework.

Collaboration among stakeholders is expected to achieve stunting zero in Majalengka District, particularly in Cicurug Village. This study highlights the urgency of stunting as a complex public health issue that has not yet been fully addressed, particularly in Cicurug Village. The study emphasizes the importance of the role and collaboration of various stakeholders, including local government, the Health Department, Community Health Centers, Posyandu, and the community, in efforts to prevent and reduce stunting rates. Despite the implementation of various policies, the resurgence of stunting prevalence in 2024 indicates that policy implementation has not been optimal. Therefore, this study aims to analyze policy implementation and the role of stakeholders in addressing stunting in the area. This issue is important to study given that stunting cases in Majalengka District have not shown a decline. (Qotrun Nada Sahroji et al., 2022).

2 Literature Review

Stunting, according to (TNP2K, 2018), commonly referred to as dwarfism or short stature, is a condition in which children under the age of five experience growth retardation caused by prolonged malnutrition and recurrent infections. This condition primarily occurs during the first 1,000 days of life (HPK), which spans from pregnancy until the child is 23 months old.

Problematics refers to a series of problems, challenges, or difficulties that arise in a particular context, whether it be an individual, a group, or society as a whole. Problematics can occur in various fields such as education, economics, the environment, society, or technology. These issues are often complex and require a systematic approach to understand them. In this context, problematics refers to the challenges faced in preventing stunting cases in Majalengka District, West Java

Prevention Efforts: The issuance of Majalengka Regency Regulation No. 25 of 2019 on Stunting Reduction is the first step taken by the local government in developing a strategy to reduce stunting rates in Majalengka Regency. Efforts to reduce stunting prevalence can be carried out through several key pillars, namely: (1) a strong

commitment and vision from local leaders, (2) the implementation of campaigns focused on enhancing public understanding, (3) constructive behavioral changes, (4) solid political commitment and transparent accountability, (5) convergence, coordination, and consolidation between national, regional, and community programs, (6) strengthening policies related to nutritious food security, and (7) the implementation of continuous monitoring and evaluation. This strategy is implemented at all levels of government in Majalengka Regency, involving various relevant government agencies and non-governmental organizations, including the private sector, civil society, and communities

Stakeholders, according to (Freeman in Miles, 2012) by (Nur Alifisyiam et al., 2024) Stakeholders are individuals or groups who have the ability to influence or be influenced by the activities and objectives of an organization. The involvement of stakeholders in the implementation of an activity is very important, as stated by Sandy (2020). He emphasizes that stakeholder participation in policy implementation is a key factor in overcoming various challenges that may arise, so that the established objectives can be achieved. Wang & Aenis (2019) and Sari (2021) argue that interaction and collaboration among stakeholders can strengthen the decision-making process to achieve policy objectives and overcome various challenges faced. According to Aprillia Theresia (2015:196) by (Pancawati et al., 2020), participation is the involvement of an individual or a group of community members in an activity.

This study refers to several previous studies, including research conducted by Najdah, Adam, Nurliah, and Nurbaya in 2022 entitled “Sosialisasi Lintas Sektor dalam Upaya Pencegahan *Stunting* di Kabupaten Mamuju” (“Cross-Sector Socialization in Efforts to Prevent Stunting in Mamuju Regency”) which discusses the importance of a collaborative cross-sectoral approach and community empowerment in efforts to prevent stunting, with a focus on education, practical skills development, and the utilization of local food resources. By using an approach that aligns various resources to achieve common goals and applying nutrition intervention theory based on the need for cross-sector coordination, involving local governments, community organizations, and the private sector to ensure that stunting prevention programs run effectively. This includes understanding the importance of community and family empowerment towards self-reliance.

Research conducted by Alifisyiam, Herawati, and Purnaweni entitled “Peran Stakeholders Dalam Penurunan Angka Prevalensi Stunting Di Kota Semarang” (The Role of Stakeholders in Reducing the Prevalence of Stunting in Semarang City) revealed that the decline in the prevalence of stunting in Semarang City, which reached 10.4% in 2022, was achieved thanks to the active participation of various stakeholders. The stakeholders involved are divided into three categories: Primary stakeholders: the community, health posts, and community health centers; Secondary stakeholders: the private sector (such as the Tanoto Foundation and Angkasa Pura); Key stakeholders: the Regional Development Planning Agency, the Health Office, the Food Security Office, and the Population Control and Family Planning Office of Semarang City. This success was achieved through a creative approach, which included the CEMPAKA program (Preventing Stunting Together with Entrepreneurs in Semarang City), childcare services at Rumah Pelita, and Rumah Sigap. However, the article also highlights challenges, such as the lack of community autonomy in meeting family nutritional needs. Using a descriptive qualitative approach and Bryson's (2003) theory: To analyze the role of stakeholders based on the interest and influence matrix, which categorizes them into key players, context setters, subjects, and the crowd, providing the foundation that public management requires collaboration among various parties to address public issues such as stunting.

Research by Sahroji, Hidayat, and Nababan in 2022 entitled “Implementasi Kebijakan Dinas Kesehatan Dalam Penanganan *Stunting* Di Kabupaten Karawang” (Implementation of Health Office Policies in Addressing Stunting in Karawang Regency) that implementation of the Health Department's policies in addressing stunting in Karawang Regency is still not optimal. Some programs have not been fully implemented and have not had a direct impact on the community. Additionally, factors such as the lack of quality human resources, low community participation, and insufficient awareness of environmental health, reproductive health, and nutrition pose major challenges in reducing stunting rates in this area. Using a qualitative approach with descriptive methods and Tachjan's (2006) Policy Implementation Theory, which emphasizes the importance of the following elements:

- a. Implementing elements: The involvement of actors, organizations, procedures, and techniques necessary to implement the policy.
- b. Existing programs: Focus on specific and sensitive nutritional interventions.
- c. Target group: Includes the public, health workers, and the government.

Research by Pancawati, Hidayat, Bharoto in 2020 entitled “Partisipasi Masyarakat Dalam Pelaksanaan Program Keluarga Berencana (Kb) Di Desa Kecomberan Kecamatan Talun Kabupaten Cirebon” (Community Participation in the Implementation of the Family Planning Program (KB) in Kecomberan Village, Talun District, Cirebon Regency) which shows that although the family planning program has been implemented, the level of community participation in Kecomberan Village is still not optimal. This is due to the community's lack of knowledge about the importance of the program, certain beliefs that hinder participation, and the view that having many children will bring good fortune. This study emphasizes the need to enhance community participation through more effective socialization and education by the government and relevant institutions. Using a

descriptive qualitative method and Bintoro Tjokroamidjojo's theories, which encompass three key elements in improving community participation:

- a. Leadership Issues: Leadership quality greatly influences the success of a program.
- b. Communication: The importance of good communication so that the public understands existing policies and plans.
- c. Education: Adequate education can increase public awareness and participation in development programs.

Research by Bharoto and Nursahidin in 2021 entitled "*Implementasi Kebijakan Program Penanganan Pengemis Gelandangan Orang Terlantar Dan Psikotik Jalanan Di Kota Cirebon*" (Implementation of Policies for Programs to Address Homelessness, Street Begging, and Street Psychosis in the City of Cirebon) which shows that even though family planning programs have been implemented, the level of community involvement has not yet reached its optimal level. The causes are a lack of understanding among the community about the importance of the program, certain beliefs that hinder participation, and the view that having many children will bring good fortune. This study emphasizes the need to increase community participation through more effective socialization and education by the government and related institutions. Using a descriptive qualitative approach and Bintoro Tjokroamidjojo's theory, which includes three important elements in increasing community participation:

- a. Leadership Issues: Leadership quality greatly influences the success of a program.
- b. Communication: The importance of good communication so that the public understands existing policies and plans.
- c. Education: Adequate education can increase public awareness and participation in development programs.

The difference between the researcher's study and previous studies lies in the efforts to prevent stunting and increase community participation in health and development programs. Meanwhile, the researcher's study focuses more on prevention efforts and the problems faced by stakeholders in preventing stunting in Majalengka District. The theory used by the researcher is the theory of Donald van Meter and Carl Van Horn in 1975 (Abdul Wahab, 1997), which explains that policy implementation consists of a series of actions carried out by individuals, officials, or groups in the public and private sectors with the aim of achieving the objectives set out in the policy that has been made.

3 Methods

Based on the issues raised in this study, the approach applied is a qualitative method. This method aims to describe solutions to the problems being studied and to describe the objects and subjects of the study in order to gain a deeper understanding of the topic. Data collected in qualitative research comes from informants and the behavior of subjects observed, with the aim of understanding the phenomena that occur. According to Hanurawan (2016), the qualitative method is a systematic series of steps in conveying subjective meaning to informants regarding an event that is the focus of scientific research (Eva Ropiah et al., 2024). This research was conducted at the Majalengka District Health Office, the Majalengka Community Health Center, the Posyandu, the Cicurug Village Cadres, and the Cicurug Village community.

This study also focused on the problem using the theoretical concept proposed by Donald Van Meter and Carl Van Horn (1975) to analyze stunting prevention efforts and issues by stakeholders in Majalengka District. Within the framework of policy implementation, referring to the theory proposed by Donald Van Meter and Carl Van Horn (1975), this model emphasizes that the policy implementation process occurs in stages, beginning with public policy, followed by implementation, and concluding with the outcomes generated by the policy. There are various factors that influence the public policy process, including: a) Implementation activities and communication between organizations, b) Characteristics and implementing agents, c) Economic, social, and political conditions, and d) Tendencies of the implementers (Yulianto K, 2015).

To ensure data validity, researchers used source and method triangulation techniques. Data was obtained from in-depth interviews, participatory observation, and documentation, then compared to ensure consistency of information. After all data and information were collected, data analysis was performed using descriptive analysis methods, which included the following steps: (1) Data reduction, where researchers organize and focus on important elements, (2) Data presentation, in the context of qualitative research, data presentation is done narratively, and (3) Drawing conclusions, after processing the data, conclusions about the research results or their implications are formulated.

4 Results and Discussion

4.1 Results

This study focuses on stakeholders in efforts to prevent stunting. As data sources, the researchers obtained information through interviews, observations, and documentation with staff from the Majalengka District Health Office, the Majalengka Community Health Center, the Majalengka Subdistrict Health Center, the Cicurug Village PKK Secretary, and the Cicurug Village community.

Based on the research conducted, the following results were obtained:

The handling of stunting has become a program carried out by the Majalengka District government on an ongoing basis. In the Majalengka District Head Regulation No. 25 of 2019 on the Reduction of Stunting, it is stated that stunting is a condition that can occur in anyone if not addressed early on.

The Department of Women's Empowerment, Child Protection, Population Control, and Family Planning (P3AKBP) conducts the AKSI program, which is an analysis of the situation or an approach aimed at identifying families at risk of stunting, as well as assessing the prevalence and number of stunting cases in a district. This approach also includes evaluating the coverage of existing interventions, the availability of programs, and the management practices of services currently being implemented. The former Deputy Regent of Majalengka, as Chair of the Stunting Reduction Acceleration Team, reinforces the local government's commitment to reducing the prevalence of stunting through effective coordination, ensuring that the results achieved are measurable and accountable.

The Majalengka Regency Government has begun steps to form a Data Update Team with the aim of updating information on toddlers in villages suspected of suffering from stunting. Asri Febriantini, as Chair of the Family Health and Nutrition Team from the Majalengka Regency Health Office, has prepared 21 members who will be tasked with updating data on toddlers in these villages. As of October 11, 2024, the progress of reporting from the Data Update Team has reached 96.29 percent. The Majalengka Regency Government has sent representatives from the District Head, Village Head, and Health Center to support the Data Update Team.

Various efforts to address the issue of stunting continue to be carried out by the Majalengka District Government, involving various components, including government agencies, law enforcement officials, and higher education institutions.

The issue of stunting in Majalengka District has not yet reached a stable stage. According to data from the Majalengka District Health Office, the stunting rate in Majalengka District was 2.11% in 2022, decreased to 1.26% in 2023, but increased again to 2.17% in 2024. There are several stakeholders involved in stunting prevention efforts, one of which is the Health Department, which holds significant authority over stunting prevention programs. In its implementation, the Health Department assigns responsibility to the Community Health Centers (Puskesmas) and Posyandu in Majalengka District to carry out the stunting prevention program.

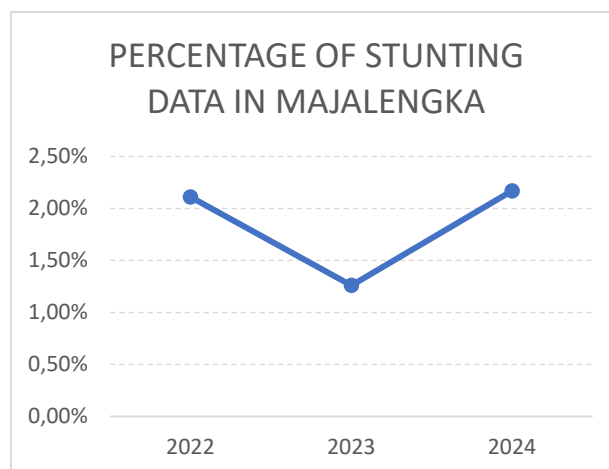


Figure 1. Percentage Curve of Stunting Data in Majalengka

Regulation of the Regent of Majalengka No. 25 of 2019 states that the Regent delegates authority and responsibility for reducing stunting to the Health Office, assisted by the Stunting Reduction Team.

The Majalengka Health Department is one of the Regional Government Agencies included in the Stunting Reduction Team under Majalengka Regent Decision No. 444 of 2020 regarding the formation of a team for stunting reduction in Majalengka District. According to data from the Majalengka Health Department, the stunting rate in Majalengka Sub-district has increased in 2024. In implementing policies on stunting reduction, the Majalengka Health Department only follows programs from the local government. This was stated by Mrs. Runi, a staff member in the Public Health Division of the Majalengka Health Department: "Efforts to reduce stunting are not only carried out by the Health Department but also by several local government agencies that are part of the Stunting Reduction Team. The Health Department certainly monitors the number of stunting cases annually and conducts monitoring at each Posyandu. Data collection on stunting is conducted from August to February. The Health Department does not have a flagship program in efforts to reduce stunting, as we only implement programs from the local government." (Interview on Friday, December 13, 2024). Mrs. Yeti, the Nutrition Program

Manager at the Majalengka Health Department, also stated, "In implementing stunting reduction policies, there must be cross-sectoral coordination, as the current issue is the lack of coordination among local government agencies in implementing programs from the local government. Therefore, cross-sectoral coordination must be further enhanced to ensure the success of stunting reduction policies in Majalengka District." (Interview on Friday, January 3, 2025)

Community health canterers are community service units that are directly responsible for efforts to reduce stunting. In practice, community health centres receive guidance from the Majalengka Health Office to implement stunting reduction programs. However, the Majalengka Community Health Center only has one nutritionist, which is certainly an obstacle to the implementation of the program and makes the community health center feel that it lacks health workers to provide assistance in the field. Nevertheless, stunting management is proceeding very well and in line with central government guidelines. This was stated by Mrs. Yuliana, the Nutritionist at the Majalengka Puskesmas. (Interview on Friday, January 3, 2025)

In implementing the stunting reduction program, the Majalengka Health Department and the Majalengka Health Center need to coordinate with the Posyandu. The Posyandu plays a crucial role in stunting reduction, as it records detailed information about children experiencing stunting and reports this to the Health Center. This was stated by Mrs. Asmaini, a Posyandu volunteer in Cicurug Village: "We cannot directly say that a child is stunted, but if a child experiences growth delays, we will record the child to ensure they receive proper nutrition. This report will be submitted to the Health Center. During each Posyandu session, the village midwife is present to check children or infants with growth delays. Additionally, there are prenatal classes to prevent stunting. However, in the implementation of the Posyandu, there are challenges in the community, such as low awareness to attend the Posyandu and the lack of operational funds for the Posyandu cadres." (Interview on Friday, January 3, 2025)

The community is classified as a key stakeholder because they have a direct interest as the target of the program. The input provided by the community is an important consideration in the government's decision-making process. In addition, the community also feels the positive impact directly, namely increased awareness of the treatment and prevention of stunting and optimal health development, especially for toddlers who experience stunting.

4.2 Discussion

Based on interviews with informants from the Health Office, Majalengka Community Health Center, and Posyandu, the researchers examined the implementation of stunting policies in Majalengka using the Van Meter and Van Horn model. Implementation of the Van Meter and Van Horn Model Policy in Efforts to Prevent Stunting:

4.2.1 Policy Standards and Objectives

The policy standards for reducing and preventing stunting are regulated in Regent Regulation No. 25 of 2019. To achieve healthy, intelligent, and productive human resources, coordinated, comprehensive, and integrated efforts are required from the local government, particularly in the context of prevention and acceleration of stunting reduction. According to information from the Health Department, all staff members, from the head to the staff, already understand the policy. Understanding of the stunting policy was achieved through joint socialization with other Regional Government Agencies.

The Community Health Center (Puskesmas) only has one nutrition expert handling seven villages, which is considered insufficient, leading to inefficiency in field operations. Regarding funding, there is funding from the Health Operational Assistance (BOK) for stunting, with the provision of supplementary food (PMT) implemented in accordance with guidelines for infants with inadequate nutrition. For infants experiencing inadequate nutrition, monitoring is conducted over 56 days, with daily distributions. For pregnant women, monitoring is conducted for 120 days, and there are no obstacles whatsoever, and it has been implemented. The facilities supporting stunting monitoring are fully available, and the health center has distributed Posyandu Kids to all 48 Posyandu in the working area of the Majalengka Health Center evenly.

Community Health Center (Posyandu) is an important stakeholder in the implementation of efforts to reduce and prevent stunting. This is because posyandu activities have a significant effect on monitoring child growth and development. All posyandu cadres already understand the policies on reducing and preventing stunting through joint socialization with PKK cadres in Cicurug Village and midwives in Cicurug Village. However, efforts targeting the community need to be further enhanced, as there is a lack of community education on stunting prevention, leading to indifference toward Posyandu activities and a disregard for children's growth and development.

Policy standards and targets must be directed at the community because they are the primary group directly affected by stunting issues. Without active community involvement, all stakeholders' efforts will struggle to achieve the desired goals. Establishing clear standards helps ensure that all parties, including the community,

understand their respective roles and responsibilities in preventing stunting. Measurable targets also facilitate the process of evaluating and continuously improving policies.

4.2.2 Resources

In accordance with Regent Decree No. 444/Kep.111 A-DINKES/2020 on the Establishment of the Stunting Reduction Team, the supervisor of the Stunting Reduction Team is the Deputy Regent of Majalengka and the Health Office as a member. The resources available for stunting reduction and prevention at the Health Department are adequate, as there is a Public Health Division that includes the Nutrition Program Management Team, one of whose tasks is to assist in stunting reduction through nutrition programs, including the provision of iron-rich tablet supplements, vitamin A capsule supplements, the distribution of taburia, zinc supplementation, and the provision of supplementary food are important steps to support the recovery process for children suffering from acute malnutrition, integrated management of sick infants, prevention of parasitic infections, provision of supplementary food for pregnant women, and others. In terms of facilities and infrastructure at the Health Department, they are complete, and the equipment used is sufficient.

The community health center faces challenges in terms of health worker numbers, as it only has one nutritionist. The community health center has submitted a request for additional health workers, but to date there has been no progress on this matter. This difficulty was expressed by the nutritionist, who faces challenges when conducting field activities because he cannot visit all of the integrated health service posts (posyandu) as he is the only one available. However, for field collaboration with the health posts, the nutritionist is assisted by the village midwife.

Meanwhile, the resources at the health posts are insufficient, as each health post still lacks adequate staff. According to the health post volunteers and the Secretary of the PKK (Family Welfare Movement) of Cicurug Village, there should be at least 5-6 people in each health post, but in practice, there are only 3-4 people. This is because Posyandu members are volunteers and do not receive any operational costs. This is what causes the lack of resources at the Posyandu.

The shortage of healthcare personnel at the Puskesmas and Posyandu has led to many community members complaining because they feel dissatisfied with the services provided.

4.2.3 Communication

The main indicator in the implementation of policies is communication. Communication is very important in reducing and preventing stunting in order to create a healthy and prosperous society. The communication between the Majalengka Health Department and the Majalengka Community Health Center is very good. The Health Department communicates with the Community Health Center, usually through notification letters such as announcements or appeals that there will be monthly growth monitoring, and coordinates if there are cases of stunting so that they can be addressed immediately after the Community Health Center validates the data on stunted children. Communication is not only between the Health Department and the Health Center but also between the Health Department and the Regional Government Agencies involved in the Stunting Prevention and Reduction Team. However, communication among Regional Government Agencies is insufficient and needs to be improved in terms of coordination among these agencies.

The Integrated Service Post stated that communication regarding our program only follows the program directed by the government and the Majalengka Health Office, which includes monthly growth monitoring, home visits, vitamin A administration, iodized salt monitoring, and prenatal classes. There are no obstacles in this communication because the Majalengka Health Office always provides clear and detailed directions.

According to Posyandu cadres and PKK cadres, communication with the Puskesmas is very good. The information provided by the Puskesmas is complete and understood by the Posyandu and PKK cadres, including the schedule for Posyandu activities, Posyandu activity reports, and reports on the distribution of supplementary food. Posyandu also communicates directly with PKK cadres from Cicurug Village during activities.

The community receives clear information about the stunting reduction and prevention program from the Health Center (Puskesmas) and Integrated Service Post (Posyandu). Communication with the Posyandu is also very good.

4.2.4 Characteristics of the Executive Agency

The implementation of stunting policies is outlined in Regent Decree No. 444/Kep.111A-DINKES/2020 on the Establishment of the Stunting Reduction Team. The decree lists several regional government agencies that are members of the Stunting Reduction Team, including the Health Office, Bappeda, DP3AKB, PUPR, Social Services Office, Ministry of Religious Affairs, and others. The Health Department assists in stunting prevention through prenatal check-up classes during posyandu activities, providing supplementary feeding for children aged

0-23 months, and distributing iron tablets to adolescents to prevent anemia. The prevention measures implemented by the Health Department are already being carried out effectively.

The Community Health Center provides guidance for the integrated health service post by conducting monthly integrated health service posts and then achieving all targets in the integrated health service post area in Majalengka with the hope of achieving 100% success or at least 87.5%. The cadres are encouraged to be fully active so that their work is maximized. by conducting posyandu activities in accordance with the guidelines, as posyandu is now integrated into Primary Health Care Services (ILP), meaning that posyandu now serves the entire life cycle, from infants, toddlers, children, adolescents, the elderly, pregnant women, and postpartum mothers—all of whom are served at the posyandu.

Posyandu and PKK cadres assist in preventing stunting by regularly conducting posyandu activities that can be attended by pregnant women, children aged 0-23 months, and toddlers. These activities must be conducted at least once a week to monitor children experiencing stunting.

However, not all segments of society actively participate in posyandu activities. This is evident from the still low attendance rates of residents, especially mothers of toddlers, in every basic health service agenda held.

4.2.5 Social, Economic, and Political Environment

Social, economic, and political conditions influence the implementation of stunting policies. However, during the study, these indicators were not optimal, such as the social conditions in Majalengka, where there was a lack of awareness to participate in government programs aimed at reducing and preventing stunting. This situation led to the community being reluctant to participate in posyandu activities. There is a need for collaborative outreach between the Regional Government Agency's Stunting Prevention and Reduction Team and the community. Additionally, the economic conditions in Majalengka are still classified as lower-middle class, as many residents experiencing stunting have low economic status, which affects the nutritional intake of the food they consume. In its implementation, the Health Department assists low-income communities in accessing social assistance from the government through the Social Affairs Department.

The success of policy implementation, as stated by Priyanto and Noviana (2018), is influenced by various factors, including social, political, and economic conditions. These factors include the availability of economic resources, support from interest groups, the characteristics of the individuals involved, and the characteristics of prevailing public opinion. A supportive social environment is crucial for the success of policy implementation, as the existence of a policy within a community requires support from the social context. The political interests underlying a policy can significantly influence its implementation, either as a catalyst or an obstacle to the success of policy implementation.

4.2.6 Attitude of Implementers

The attitude of implementers in the implementation of stunting policies is good, as evidenced by the fact that stakeholders are implementing these policies well. The Health Office provides stunting reduction and prevention programs in accordance with the directives of the local government, and these programs have been running well to date, with monitoring still being carried out at every Posyandu. Community health centers implement the program by assigning village midwives to monitor child development at each Posyandu and report to the Health Office. Similarly, Posyandu centers assist in program implementation by encouraging community members to attend Posyandu sessions to observe children's development.

The performance of the implementers is considered satisfactory if they carry out their responsibilities in accordance with the established procedures. This indicates that they have a clear understanding of the program in question and the specific tasks assigned to them (Ani and Sulistio, 2017). Overall, the attitude of the implementers is good in implementing the stunting policy. However, there needs to be an evaluation of each stakeholder to improve the quality and quantity of good performance.

4.2.7 Key Issues in the Implementation of Stunting Policies Among Stakeholders

The Health Office is facing a problem, namely a lack of coordination between regional organizations in implementing policies on stunting reduction.

The Majalengka Community Health Center is facing a problem, namely a lack of human resources, as there is only one nutritionist.

Posyandu and PKK cadres face the same issues, namely a lack of public awareness about participating in government programs and the absence of operational funds for Posyandu cadres.

The lack of understanding and public participation also poses a significant challenge. Many people are unaware of the importance of stunting prevention, which results in low attendance at Posyandu activities and nutrition education sessions.

4.2.8 Solutions to Problems in Implementing Stunting Policies among Stakeholders

There must be monitoring by the local government of regional organizations in carrying out their duties and conducting regular monthly coordination to improve inter-sectoral cooperation so that there are no mistakes in handling the reduction of stunting rates in Cicurug Village.

At the community health center level, additional health workers are needed because one nutritionist alone is not effective in carrying out activities in the field. It is hoped that the government can fulfill the requests from the health center to ensure that the stunting reduction activities are carried out effectively.

For Posyandu and PKK cadres, there must be regular socialization about stunting and other diseases to the community during every Posyandu activity to increase public awareness in preventing stunting or other diseases.

Increased community participation must be focused through continuous education. Information about the importance of preventing stunting, the benefits of integrated health service posts, and healthy eating patterns needs to be packaged in an interesting and easy-to-understand manner so that the community feels involved and motivated to participate actively.

5 Conclusion

The handling of stunting is a program carried out by the Majalengka Regency government on an ongoing basis. In the Majalengka Regency Regent Regulation 25 of 2019 concerning the Reduction of Stunting, stunting is defined as a disease that can occur in anyone if not anticipated early on.

This study presents the implementation of stunting reduction policies in Majalengka Regency, focusing on the roles of key stakeholders such as the Majalengka Regency Health Office, Majalengka District Health Center, Cicurug Village Health Post, and the community. Policies regarding stunting are regulated in Majalengka Regency Regulation No. 25 of 2019 and Majalengka Regency Decision No. 444 of 2020, which emphasize the formation of a Stunting Reduction Team involving various Regional Government Agencies (OPD).

The Majalengka Regency Government has consistently implemented a stunting reduction program with support from various sectors. The Majalengka Regency Health Office, the Majalengka District Health Center, the Cicurug Village Health Post, and the Cicurug Village community have played an important role in implementing this policy, despite operational challenges.

Coordination among government agencies is still suboptimal, hindering the integrated implementation of policies. The Health Department has adequate resources for program implementation, but the Community Health Center lacks nutrition experts, while the Posyandu lacks volunteer cadres and lacks operational funds. The Posyandu plays a role in monitoring children's growth and development and reporting stunting cases, but the lack of community awareness to attend Posyandu activities remains the main challenge.

Efforts to reduce stunting have shown success in recent years, but data from 2024 shows a resurgence in stunting cases (2.17%). This indicates the need for more effective strategies and better cross-sector collaboration. However, funding and facilities are already adequate for the implementation of activities to reduce stunting rates.

References

- [1] Asmaini. (2025, 03 Januari). Personal Interview.
- [2] Eva Ropiah, Renata, A., Wulandari, S., & Mahendra Haryo Bharoto, R. (2024). Kolaborasi Model Pentahelix Dalam Membentuk Kemandirian. *Injuruty: Interdisciplinary Journal and Humanity*, 1–12.
- [3] Najdah, N., Adam, A., Nurliah, N., & Nurbaya, N. (2022). Sosialisasi Lintas Sektor dalam Upaya Pencegahan Stunting di Kabupaten Mamuju. *Poltekita: Jurnal Pengabdian Masyarakat*, 3(3), 543–549. <https://doi.org/10.33860/pjpm.v3i3.1018>
- [4] Nur Alifisyiam, F., Rina Herawati, A., & Purnaweni, H. (2024). Peran Stakeholders Dalam Penurunan Angka Prevalensi Stunting Di Kota Semarang. *Journal of Public Policy and Management Review*, 13, 1–20. <https://doi.org/10.14710/jppmr.v13i2.43597>
- [5] Pancawati, O., Taufik Hidayat, M., & Bharoto, R. H. (2020). Partisipasi Masyarakat Dalam Pelaksanaan Program Keluarga Berencana (Kb) Di Desa Kecomberan Kecamatan Talun Kabupaten Cirebon. *Jurnal Publika Unswagati Cirebon Jurnal Publika*, 8, 16–27. <https://ejournalugi.com/index.php/Publika/article/download/4167/2056>
- [6] Runi. (2024, 06 Desember). Personal Interview.
- [7] TNP2K. (2018). Panduan Konvergensi Program Kegiatan Percepatan Pencegahan Stunting. <https://stunting.go.id/wp-content/uploads/2020/10/Buku-Panduan-Pemetaan-Stunting-Mei-2019.pdf>
- [8] Yeti. (2025, 03 Januari). Personal Interview.
- [9] Yuliana. (2024, 06 Desember). Personal Interview.
- [10] Yuliana. (2025, 03 Januari). Personal Interview.

- [11] Yulianto K. (2015). Formulasi dan Implementasi Kebijakan Publik. <https://archive.org/details/yuliantokadjibukuformulasidanimplementasikebijakanpublik/page/n61/mode/2up>