



The role of integrating women empowerment, child protection, and family planning programs in combating stunting: A case study of Deli Serdang District

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Abstract

This research explores the role of integrating women empowerment, child protection, and family planning programs in addressing stunting, using Deli Serdang Regency as a case study. Given the high prevalence of stunting in the region, the study aims to identify the contributions and impacts of integrating these programs in addressing the issue of stunting. The research methods employed include secondary data analysis, interviews with relevant stakeholders, and field observations. The findings indicate that the integration of women empowerment, child protection, and family planning programs can provide significant benefits in reducing stunting rates in Deli Serdang Regency. However, challenges such as lack of inter-agency coordination, resource limitations, and high levels of community misunderstanding regarding the importance of balanced nutrition remain obstacles that need to be addressed. To enhance program effectiveness, it is recommended to improve inter-agency coordination, enhance accessibility and quality of healthcare services, and increase public education and awareness about balanced nutrition. Thus, this research contributes significantly to understanding the role of program integration in addressing stunting and provides policy guidance to improve child health in Deli Serdang Regency.

Keywords: Stunting, program integration, women empowerment, child protection, family planning

Introduction

Indonesia continues to grapple with nutritional issues that significantly impact the quality of human resources (Bima, 2019) ^[5]. One of the prominent nutritional deficiencies prevalent in Indonesia includes stunting and wasting among toddlers, as well as anemia and Chronic Energy Deficiency (CED) among pregnant women. Nutritional deficiencies in pregnant women can ultimately lead to Low Birth Weight (LBW) and malnutrition in toddlers. These nutritional issues can stem from both direct and indirect causes (Beal *et al.*, 2018) ^[4].

According to Presidential Regulation No. 72 of 2021, stunting refers to a child's growth and developmental disorder resulting from chronic malnutrition and repeated infections, characterized by the child's height or length falling below the standards set by the minister responsible for health affairs (Komalasari *et al.*, 2020 ^[10]; Rahayu *et al.*, 2015) ^[16]. Stunting is measured using height-for-age parameters, defined as a height-for-age $<-2SD$ below the WHO's normal growth curve. The WHO growth curve serves as a universal reference for all children worldwide. Given adequate nutritional intake and environment, every child globally should exhibit similar linear growth. Linear growth serves as a robust indicator of toddlers' overall development (Kurniawan *et al.*, 2022 ^[11]; Trihono *et al.*, 2015) ^[25]. Stunting poses a serious issue for the nation due to its detrimental effects.

The aim of accelerating the reduction of stunting is to foster a healthy, intelligent, and productive human resource, as well as to achieve sustainable development goals through attaining the national target prevalence of stunting, measured in children under 5 years of age, which is set at 14% by the year 2024 ("Peraturan Badan Kependudukan Dan Keluarga Berencana Nasional Nomor 12 Tahun 2021 Tentang Rencana Aksi Nasional Percepatan Penurunan Angka Stunting Indonesia Tahun 2021-2024," 2021).

In general, the prevalence of stunting in Indonesia on a national scale indicates relatively favorable outcomes. This underscores the effectiveness of the Indonesian government's policy implementation in accelerating the reduction of stunting, supported by the Stunting Acceleration Team of the Vice President's Secretariat of the Republic of Indonesia, the Ministry of Health, and the Central Bureau of Statistics (BPS), which conducts the Indonesian Nutritional Status Study (SSGI) (Amanda *et al.*, 2024) ^[1]. In 2022, data from 34 provinces and 486 districts/cities, with a total of 334,848 toddlers, showed a national stunting rate decrease of 2.8% per year, from 24.4% in 2021 to 21.6% in 2022 (Nurjazuli *et al.*, 2023 ^[14]; Suciyanti *et al.*, 2021) ^[20].

The Deli Serdang Regency Government plays an integral role in striving towards the goals of sustainable development or Sustainable Development Goals (SDGs) in Indonesia (Febrian & Yusran, 2021 ^[8]; Sudigyo *et al.*, 2023) ^[21]. Reducing the prevalence of stunting is a priority effort to realize the development vision of Deli Serdang for the period 2019-2024, which envisions a progressive and prosperous Deli Serdang with a community that is religious and harmonious in diversity. One of the targets set by the SDGs for 2030 is to end all forms of malnutrition by reducing the prevalence of stunting (Isabella Barus *et al.*, 2021 ^[9]; Samrah *et al.*, 2021) ^[17].

Based on the data from the Indonesian Child Nutrition Status Survey (SSGBI) in 2018, the prevalence of stunting in Deli Serdang Regency was 25.7%, which decreased to 12.5% by 2021. Deli Serdang Regency is one of the selected districts as a Stunting Focus Location (Lokus) since 2020 until now. However, according to the SSGI in 2022, the prevalence of stunting in Deli Serdang Regency increased by 1.4% to 13.9%.

The ongoing issue is how the Deli Serdang Regency Office for Women's Empowerment and Child Protection, as well as Population Control and Family Planning, play a role in

accelerating the reduction of stunting. This is due to the continued presence of children experiencing stunting and pregnant women at risk of giving birth to stunted babies. Furthermore, it is crucial to identify the challenges faced by the Deli Serdang Regency Office for Women's Empowerment and Child Protection, as well as Population Control and Family Planning, in accelerating the reduction of stunting in the region.

In the fiscal year 2020, the Deli Serdang Regency Office for Women's Empowerment and Child Protection, as well as Population Control and Family Planning, identified 8 out of 22 districts with stunting prevalence rates above the district average. These districts are Galang District (4.03%), STM Hilir District (3.05%), Pagar Merbau District (2.89%), Pantai Labu District (2.83%), Beringin District (2.74%), Lubuk Pakam District (2.57%), Batang Kuis District (2.22%), and Bangun Purba District (2.11%).

Stunting is among the prominent issues in Deli Serdang Regency. It has garnered significant attention and is a focal point of the government's agenda. Consequently, the Deli Serdang Regency Government formulated Regional Regulation No. 5.A of 2020 concerning the Acceleration of Prevention and Control of Integrated Stunting. This regulation emphasizes the collective effort of all relevant agencies to address stunting issues through integrated strategic programs. It advocates for comprehensive improvements across all aspects through two interventions. Firstly, specific nutritional interventions addressing food intake, infections, maternal nutrition status, infectious diseases, and environmental health are highlighted as priorities in the health sector. Secondly, sensitive interventions include improving access to clean water and sanitation facilities, enhancing the quality of nutrition and health services, raising awareness, commitment, and nutritional care practices for mothers and children, as well as improving access to nutritious food (Saputra *et al.*, 2022^[18]; Sembiring *et al.*, 2021)^[19].

According to the 2022 census data, there are 4,688 families in Sekip Village, with 2,136 families at risk of stunting and 826 toddlers. Among them, 13 toddlers are severely short and 38 toddlers are moderately short, resulting in 6 cases of stunted children in Sekip Village in 2022.

To provide novelty value related to this research, the researcher presents several previous studies with similar themes to this study:

The research by Syafrawati (2023)^[24] entitled "Driving and Inhibiting Factors of Stunting Acceleration Program at District Level: A Qualitative Study in West Sumatra" discusses the driving and inhibiting factors of the stunting acceleration program at the district level, through a qualitative study in West Sumatra. Supportive factors include adequate human resources at the government or village level, sufficient funding, comprehensive regulations, strong coordination among government agencies, innovative activities related to stunting, and programs such as clean toilets, nutritional supplementation, among others. However, inhibiting factors include a lack of human resources, cadres only dealing with administrative tasks, limited funding, inadequate equipment, poor coordination between community health centers and village governments, and slow response from government agencies to stunting programs (Syafrawati, 2023)^[24].

The research by Andi Sukrianto (2023)^[23] titled "Juridical Analysis of the Village's Role in the Prevention and

Reduction of Integrated Stunting (Case Study of Topore Village, Papalang District, Mamuju Regency)" explains that the juridical analysis of the village's role in the prevention and reduction of integrated stunting, through a case study in Topore Village, Papalang District, Mamuju Regency. This research highlights supportive factors for stunting management in Topore Village, based on the Mamuju Regency Regulation No. 30 of 2021 concerning the Village's Role in the Prevention and Reduction of Integrated Stunting. This regulation stipulates the village government's responsibility in the convergence of stunting prevention, including planning, budgeting, monitoring, and evaluating programs. However, inhibiting factors include limited public understanding of stunting, inadequate supporting facilities and infrastructure, and cultural norms that need to be improved through integrated and sustainable cross-program cooperation and community empowerment in the village (Sukrianto, 2023)^[23].

The research by M. Afif Nasution (2023)^[13] titled "Performance of the Population Control, Family Planning, Women's Empowerment, and Child Protection Office in Reducing Stunting Rates in Asahan Regency, North Sumatra Province" aims to evaluate the performance of the Population Control, Family Planning, Women's Empowerment, and Child Protection Office (DP2KBP3A) in reducing stunting rates in Asahan Regency, North Sumatra Province. This research notes that the DP2KBP3A in Asahan Regency has made progress in productivity, service quality, and accountability, reflected in the decrease in stunting rates from 657 toddlers in 2021 to 296 toddlers in 2022. However, challenges faced include the lack of public trust in stunting, uneven provision of supplementary food, and low levels of stunting-related services. DP2KBP3A seeks to address these challenges through efforts such as proving stunting symptoms to the community, cooperation with companies to provide supplementary food, and the provision of specialized stunting-related services (Nasution, 2023)^[13].

This study aims to scientifically uncover and analyze the following aspects. Firstly, it seeks to examine and analyze the role of the Women's Empowerment and Child Protection Office, as well as the Population Control and Family Planning Office of Deli Serdang District, in accelerating the reduction of stunting. Through this analysis, it is hoped that the concrete contributions and impacts of these offices in addressing the issue of stunting in the area can be identified. Secondly, the study aims to examine and analyze the supportive and inhibiting factors faced by the Women's Empowerment and Child Protection Office, as well as the Population Control and Family Planning Office of Deli Serdang District, in implementing the stunting reduction acceleration program. Thus, this research is directed towards providing a deeper understanding of the factors that can influence the success or failure of stunting mitigation efforts conducted by these offices.

Methods

The research was conducted from December 2023 to January 2024. The focus of this study was on the Women's Empowerment and Child Protection Office, as well as the Population Control and Family Planning Office of Deli Serdang District, located in Lubuk Pakam Subdistrict. The research was focused on one village in the area, namely Sekip Village, chosen because it has families with stunted

children and pregnant women experiencing chronic energy deficiency, increasing the risk of giving birth to stunted children. The selection of this village was based on available data from field officers.

Research is a long journey that begins with someone's interest in understanding a particular phenomenon, which then evolves into ideas, theories, and concepts (Sugiyono, 2013) [22]. To realize this interest, the selection of research methods appropriate to the objectives becomes a crucial step. Research methods aim to address the issues raised in the. In this case, this study will use a qualitative approach (Bungin, 2008) [7]. This approach emphasizes the human element as the main instrument in research, thus allowing adaptation to field realities. The definition of qualitative research by Kirk and Miller in Moleong (2018) [12] underscores the importance of direct observation of humans and language interaction and terminology (Moleong, 2018) [12]. In this context, the researcher will directly engage with the community and examine the object of study, namely the Role of the Housing and Settlement Agency of Gayo Lues District in providing healthy housing environments for the people of Kutapanjang Subdistrict. The qualitative approach is used to obtain descriptive data in the form of written or spoken words and observable behaviors (Bogdan & Taylor, 1992) [6].

This study uses two types of data, namely primary data and secondary data. Primary data are obtained directly by the researcher from its source and involve observation, interviews, and focused discussions. Meanwhile, secondary data are pre-existing data, such as theoretical books, scientific works, and journals relevant to the research topic (Bah *et al.*, 2020b, 2020a) [2, 3]. Research informants were purposively sampled, considering their ability to provide relevant information. There were five informants involved in this study, namely:

1. The Head of the Women's Empowerment and Child Protection Agency as well as the Population Control and Family Planning Agency of Deli Serdang District, serves as the key informant.
2. The Head of the Population Control Division at the Women's Empowerment and Child Protection Agency as well as the Population Control and Family Planning Agency of Deli Serdang District, acts as the primary informant.
3. A parent of a stunted child from Sekip Village, serves as the first additional informant.
4. A Pregnant Woman with Chronic Energy Deficiency at risk of giving birth to a stunted child Sekip Village, acts as the second additional informant.
5. The Family Welfare Program Officer (PLKB) of Lubuk Pakam Subdistrict, serves as the third additional informant.

Data collection techniques used include observation, documentary study, and in-depth interviews. Observation is conducted to observe the actual social realities and facts at the research site, while documentary study aims to collect supportive data from the object under study. In-depth interviews are conducted based on a previously prepared interview guide, with open-ended and flexible questions tailored to the evolving interaction.

Results and discussion

The Role of the Women's Empowerment and Child Protection Agency as well as the Population Control and Family Planning Agency of Deli Serdang District in Accelerating the Reduction of Stunting

This study focuses on examining the role of the Women's Empowerment and Child Protection Agency as well as the Population Control and Family Planning Agency of Deli Serdang District in Accelerating the Reduction of Stunting in line with the vision and mission of the Deli Serdang District Government. One of the targets of the SDGs by 2030 is to end all forms of malnutrition by reducing the prevalence of stunting. Specific nutrition interventions directly influence the nutritional adequacy and development of fetuses and children, especially up to the age of less than 23 months.

These interventions aim to ensure adequate nutrition for pregnant women and children and reduce the risk factors for infection. Meanwhile, sensitive nutrition interventions indirectly affect the occurrence of stunting. These interventions primarily involve improving the quality of family life preparation, enhancing parenting practices, increasing access and quality of health services, improving access to clean water and sanitation, food security, and social assistance. If both interventions can be integrated, timely, and targeted appropriately, many benefits can be obtained throughout human life. These benefits have a positive impact on addressing the challenges of human resource development.

Based on Presidential Regulation 72 of 2021 on Accelerating the Reduction of Stunting, specific nutrition interventions are those related to improving nutrition and health. Meanwhile, sensitive nutrition interventions are supportive interventions for reducing the rate of stunting, such as providing clean water and sanitation. In addition to nutrition interventions, what needs to be done for the prevention and management of stunting is the strengthening of capacity and behaviors. The subjects in the behavior strengthening for stunting management are adolescent girls, adolescent boys, prospective brides and grooms, pregnant women, and new mothers.

This is in line with the statement from the Head of the Women's Empowerment and Child Protection Agency as well as the Population Control and Family Planning Agency of Deli Serdang District, Dr. Dra. Hj. Miska Gewasari, MM. Speaking about stunting is not just about our view on toddlers. Our subjects also include adolescent girls and boys, prospective brides and grooms, pregnant women, and new mothers. We need to shift the program's focus to these groups. Strengthening capacity and behavior begins with awareness of family health, such as building family awareness to provide complete basic immunizations for children to prevent diseases that can interfere with their growth. Multi-stakeholder collaboration is needed to strengthen behavioral capacity in families and adolescents to prevent stunting.

Stunting is the biggest obstacle in preparing quality human resources, as it not only poses health risks but also affects productivity and economics. In the short term, stunting hinders optimal brain development in children, leading to lower cognitive abilities, and in the long term, it hampers productivity and economic growth.

Meanwhile, the Head of the Population Control and Family Planning Department (P3AP2KB) of Deli Serdang District

explained that the standards and objectives of specific nutrition intervention policies refer to the Regent Regulation of Malang District Number 5A of 2020 on Accelerating the Prevention and Control of Integrated Stunting. This regulation sets the target groups for intervention, consisting of adolescent girls, women of childbearing age, pregnant women, breastfeeding mothers, children under 23 months old, and children aged 24 to 59 months.

Families at risk of stunting are those with a risk of giving birth to new stunting cases, namely families with pregnant women, postpartum women, infants, toddlers, and prospective brides and grooms. This indicates that much still needs to be done, requiring the attention of all of us to be more focused and serious in accompanying and meeting the needs of families at risk of stunting through specific and sensitive intervention services. The importance of an integrated nutrition intervention approach through specific and sensitive nutrition interventions is emphasized. Specific nutrition intervention involves directly intervening in how nutrition is provided to pregnant women up to babies aged 23 months.

Meanwhile, sensitive intervention is an indirect intervention that affects the occurrence of stunting, such as improving parenting patterns, providing social assistance, and

providing clean water and healthy sanitation facilities. Furthermore, a multi-sectoral and multi-stakeholder approach involves collaborating on specific and sensitive intervention services through various Regional Apparatuses and relevant stakeholders.

Lastly, the family-based approach to stunting risk targets all interventions, both specific and sensitive, provided by Regional Apparatuses and relevant stakeholders to reach all families at risk of giving birth to stunted children. Upon examination, this third approach is considered the most effective as it directly targets the subjects, ensuring that stunted children are well managed and new stunting cases are prevented.

Efforts to prevent stunting are implemented comprehensively in all villages and urban areas in Deli Serdang District. Activities are carried out under Article 6 to ensure the even distribution of intervention activities, touching all target groups. Therefore, priority locations are designated based on the prevalence of stunting in a particular area. The Population Control and Family Planning Department (P3AP2KB) of Deli Serdang District coordinates with various cross-sectoral Regional Apparatuses to develop indicators for priority intervention locations for stunting prevention.

Table 1: Indicators for Determining Priority Locations for Specific Nutrition Interventions in Deli Serdang District

No	Indicator	Target
1	Coverage of KEK Pregnant Women Receiving Supplementary Feeding	Village/Urban area
2	Coverage of Pregnant Women Receiving IFA (Iron Folic Acid) with a minimum of 90 tablets during pregnancy	Village/Urban area
3	Coverage of Malnourished Toddlers Receiving Supplementary Feeding	Village/Urban area
4	Attendance Coverage at Integrated Health Posts (ratio of attendees to total targets)	Village/Urban area
5	Coverage of Pregnant Women - K4	Village/Urban area
6	Coverage of Children aged 6-59 months Receiving Vitamin A	Village/Urban area
7	Coverage of Infants aged 0-11 months Fully Immunized with Basic Vaccines	Village/Urban area
8	Coverage of Diarrheal Children Receiving Zinc Supplementation	Village/Urban area
9	Coverage of Adolescent Girls Receiving IFA	Village/Urban area
10	Coverage of Postnatal Care Services	Village/Urban area
11	Coverage of Maternal Classes (mothers attending nutritional and health counseling)	Village/Urban area
12	Coverage of Household Members Participating in National Health Insurance (JKN/Jamkesda)	Village/Urban area

Source: Population Control and Family Planning Department (P3AP2KB)

This is in line with the issuance of the Deli Serdang Regent's Decision Number 118 of 2022 Regarding the Determination of Priority Villages for the Prevention and Control of Stunting in Deli Serdang District in 2023. Activities in 2023 consist of (a) the Dahsat Program (Healthy Kitchen to Overcome Stunting); (b) Maternal class orientation; (c) KIA book orientation; (d) Monitoring of the implementation of basic and advanced immunization target sweeps; (e) Exclusive breastfeeding program campaign; (f) Pregnant women mentoring; and (g) Congenital hypothyroidism screening orientation. However, the activity planning for the priority locations in 2023 has not reached the final stage due to budget limitations. Article 2 explains that stunting prevention efforts are intended to improve the nutritional status of the community, human resource quality, and the environment by involving all elements of local government, villages, the private sector, and the community. The success of these policies can be assessed by calculating the prevalence of stunting in Deli Serdang District during the years of activity implementation.

Challenges of the Deli Serdang District Office of Women's Empowerment, Child Protection, Population Control, and Family Planning in Accelerating Stunting Reduction

The Deli Serdang District Office of Women's Empowerment, Child Protection, Population Control, and Family Planning (P3AP2KB) in implementing the Acceleration of Stunting Reduction in Deli Serdang District, especially in Sekip Village, through specific and sensitive nutrition interventions, is known to face issues related to its annual work plans. While most aspects from planning to implementation generally proceed as expected, there are obstacles encountered during execution, including program implementation, budgeting, and procedures.

Based on interviews with respondents, the challenges faced by the Deli Serdang District Office of P3AP2KB in Accelerating Stunting Reduction are as follows:

Suboptimal Supervision of Programs/Activities: Challenges in Accelerating Stunting Reduction in Deli Serdang District

The Deli Serdang District Office of Women's Empowerment, Child Protection, Population Control, and Family Planning (P3AP2KB) encounters various issues related to its programs and activities, from planning to monitoring and supervision stages. In addressing the acceleration of stunting reduction, the involvement of 13 Regional Apparatus Organizations (OPDs) in the Stunting Reduction Acceleration Team (TPPS) highlights the complexity of coordinating efforts. While these OPDs encompass 38 activities related to stunting reduction, the evaluation reveals that most OPDs struggle to implement a coherent stunting prevention strategy despite socialization efforts.

The stunting prevention initiative relies on the roles and functions of each OPD to refine planning and regular budgeting based on factual data and information. However, evaluations indicate that OPDs have not effectively aligned their regular programs at both the district and village levels, leading to misdirected programs and activities and a sense of sectoral ego. Insufficient human resources for problem analysis and determination of stunting determinants contribute to planning based on outdated approaches rather than real problem-solving cycles.

The lack of comprehensive dissemination of program information further complicates matters, with many OPDs failing to fully grasp the stunting prevention strategy. Consequently, programs cannot proceed synchronously and cohesively. Despite efforts to coordinate inter-OPD programs, local governments have faced challenges due to a lack of understanding among OPDs, with some preferring to pursue their own programs independently. To address this, priority district governments have demonstrated commitment by establishing Coordination Team Decrees and Task Force Team Decrees for Accelerating Stunting Prevention. These decrees aim to facilitate cross-sectoral coordination and underscore the commitment to involving multiple sectors in stunting prevention and reduction efforts. However, despite the issuance of these decrees, coordination and convergence remain challenging, as reflected in informant statements. While there have been efforts to strengthen coordination through decrees, practical implementation faces hurdles, particularly in ensuring all relevant OPDs are involved. Field findings indicate that coordination and convergence among OPDs in Deli Serdang District have not been fully optimized.

Planned programs/activities have not targeted priority recipients of specific and sensitive nutritional interventions

Coordination is strengthened at every administrative level, from the district level to the village level, with specific roles and functions. At the district level, coordination is expected to create a regional policy environment that supports convergent nutritional intervention policies by aligning policies with local conditions. District-level coordination functions are expected to ensure the allocation of resources for convergent nutritional interventions through planning and budgeting processes, including human resource capacity, budgeting, logistical support, and partnerships. Districts are also expected to provide guidance and support for the implementation of convergent priority nutritional

interventions at the sub-district and village levels. The P3AP2KB Office monitors progress through monthly meetings to discuss reporting and progress in stunting prevention implementation, including developing mentoring plans.

Specific and sensitive nutritional interventions are differentiated based on target groups to ensure each group understands the efforts required for stunting prevention within their respective scope. This serves as a guide for all stakeholders to have a consistent understanding of the definition and efforts for stunting prevention, which can then be further developed according to the local context of each area.

Limited Budget Availability

Budget constraints also affect the acceleration of stunting reduction in Deli Serdang District, particularly in the Office of Women's Empowerment, Child Protection, Population Control, and Family Planning in Deli Serdang District. The stunting reduction program primarily relies on BKOB funds, while the district's APBD funds for stunting reduction activities are very limited. There are limitations in the capacity of program implementers, availability, quality, and utilization of data for policy development. Advocacy programs, socialization efforts, stunting campaigns, counseling activities, and community involvement remain severely restricted.

Conclusion

The findings of this research indicate that the role of the Office of Women's Empowerment, Child Protection, Population Control, and Family Planning in Deli Serdang District plays a crucial role in the efforts to reduce stunting. Through the implemented programs and activities, there has been an increase in awareness and improvement in nutrition among pregnant women and stunted children in Sekip Village. However, challenges such as suboptimal program monitoring, programs not targeting priority recipients, and limitations in the capacity of program implementers still pose significant challenges that need to be addressed. Therefore, to enhance the effectiveness of the stunting reduction program, there is a need for more intensive monitoring of program planning and budgeting, increased support to sub-districts and villages, as well as periodic verification and validation of stunting data.

As a recommendation, the Office of Women's Empowerment, Child Protection, Population Control, and Family Planning in Deli Serdang District are advised to tighten monitoring of program planning and budgeting by every Local Government Organization in stunting areas. Additionally, there is a need to increase support to sub-districts and villages in implementing convergent stunting reduction efforts, along with enhancing coordination and mentoring at the district, sub-district, and village levels. Regular verification and validation of stunting data and intervention coverage by field cadres are also necessary to ensure accurate and valid data for policy-making.

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