

Monitoring and Evaluation of the Stunting Reduction Acceleration Policy: A Case Study in Cibingbin District, Kuningan Regency, Indonesia

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Abstract

One of the key indicators within the broader framework of achieving Indonesia's Golden Vision 2045 is the reduction of stunting prevalence. In pursuit of this goal, various efforts have been implemented in Cibingbin District, Kuningan Regency, in accordance with the national policy on accelerating stunting reduction, involving multiple relevant stakeholders. This study aims to monitor and evaluate the implementation of the stunting reduction policy in Cibingbin District from 2021 to 2024. Employing a qualitative approach with a case study design, the research explores the depth of monitoring and evaluation processes. Data were collected through interviews, observations, documentation, and literature review. Data analysis was grounded in the policy monitoring and evaluation theory proposed by Dunn. The findings reveal that the stunting rate increased from 3.02% in 2021 to 4.67% in 2024. Monitoring efforts were found to be suboptimal, particularly in terms of data presentation, verification, recording, and interpretation. The evaluation of the policy indicates that the six evaluation criteriaeffectiveness, efficiency, adequacy, equity, responsiveness, and accuracyhave not been fully met. Key challenges identified include limited inter-sectoral coordination, budgetary and human resource constraints, and low community participation. Nonetheless, the study also identified several supporting factors, such as commitment to national policy, the active role of community health volunteers and the Family Assistance Team (TPK), and the availability of data on families at risk of stunting as a basis for targeted intervention. The findings support the efforts of the Stunting Reduction Acceleration Team (TPPS), the use of integrated data systems, and the enhancement of public education. With structured and continuous monitoring and evaluation, the implementation of stunting reduction policies is expected to become more effective and contribute positively to the quality of human resources.

Keywords: *Stunting, Monitoring, Evaluation.*

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INTRODUCTION

Stunting is a complex public health issue with multifaceted impacts. According to the World Health Organization (2020), stunting refers to impaired growth and development in children under five, primarily caused by chronic malnutrition, especially during the first 1,000 days of life. This condition is characterized by a child's height being significantly lower than the average for their agespecifically, more than two standard deviations below the median height-for-age (H/A) (WHO, 2020; de Onis & Branca, 2016). The negative consequences of stunting extend beyond physical growth retardation, encompassing cognitive development impairments that ultimately reduce individual productivity and the overall quality of human resources in the long term (Victora et al., 2008).

According to the Administrative Committee on Coordination/Sub-Committee on Nutrition (ACC/SCN, 2000), stunting also serves as an indicator of long-term malnutrition, reflecting poor past nutritional status and indicating severe growth failure during the critical window of the first 1,000 daysfrom pregnancy through the child's second year of life. Furthermore, UNICEF (2009) emphasizes that stunting is a growth disorder that prevents children from reaching their full genetic potential, often resulting from inadequate dietary practices and repeated exposure to infectious diseases. In addition, stunted children are more likely to experience difficulties in educational achievement and economic productivity later in life, reinforcing cycles of poverty and inequality (Black et al., 2013; Grantham-McGregor et al., 2007).

In Indonesia, reducing the prevalence of stunting has become a national priority, as outlined in Presidential Regulation No. 72 of 2021 concerning the Acceleration of Stunting Reduction. This policy promotes an integrated approach involving both specific and sensitive nutritional interventions, while emphasizing cross-sectoral collaboration (Bappenas, 2021). However, the implementation of this policy continues to face numerous challenges across regions due to disparities in local governance capacity, resource allocation, and community engagement (Pramono et al., 2020; TNP2K, 2018). One such example is Cibingbin District, Kuningan Regency, where the stunting rate has continued to risefrom 3.02% in 2021 to 4.67% in 2024 (Cibingbin Health Center Profile, 2024).

The situation in Cibingbin District, Kuningan Regency, indicates that the implementation of the stunting reduction policy has not been effective. Therefore, research is needed to analyze the underlying causes, with a particular focus on the aspects of policy monitoring and evaluation. This study aims to monitor and evaluate the implementation of the stunting reduction acceleration policy in Cibingbin District, as well as to identify the challenges encountered and the efforts undertaken to overcome them.

METHOD

This study employed a qualitative approach using a descriptive-explanatory method and applied a case study design to comprehensively describe and explain the phenomenon under investigation. Qualitative approach is used to explore and deeply understand the meaning that individuals or groups ascribe to a social or human problem (Creswell, 2014; Moleong, 2017). A case study is appropriate for investigating contemporary phenomena in real-life contexts, especially when the boundaries between the phenomenon and context are not clearly evident (Yin, 2018). The case in this study was bounded by a specific timeframe and activities, and data were collected comprehensively through various data-gathering techniques within a defined period.

The sources of information in this study were selected purposively, a technique often used in qualitative research to ensure the inclusion of knowledgeable and relevant informants (Patton, 2002). Informants included the Head of the Stunting Reduction Acceleration Team (TPPS) in Cibingbin District, the Deputy Head of TPPS (Head of the Cibingbin Community Health Center), the TPPS Secretary (Head of the Population Control Unit in Cibingbin), the Nutrition Program Officer, midwives, family planning counselors, village heads, village-level TPPS representatives (heads of the village Family Welfare Movement/PKK), Posyandu cadres, and members of the Family Assistance Team (TPK).

Data collection techniques included literature review, interviews, observation, and documentation, all of which are common strategies in qualitative studies for ensuring comprehensive data (Flick, 2018). The collected data were then analyzed using Miles and Huberman's (2014) interactive model of qualitative data analysis, which consists of four stages: data reduction, data display, verification, and conclusion drawing. To ensure the validity and reliability of the findings, triangulation was employed, involving the use of multiple sources and methods to cross-check data accuracy (Moleong, 2017).

RESULT AND DISCUSSION

Stunting Issues in Cibingbin District

Cibingbin District is the largest sub-district in Kuningan Regency, covering an area of 69.72 km², with a projected population of 40,967 residents in 2024, predominantly engaged in the agricultural sector (BPS Kuningan Regency, 2025). Although the Human Development Index (HDI) of Kuningan Regency is relatively high, reaching 71.56, the poverty rate remains significant at 11.88%, with an average per capita income of IDR 420,867 per month, indicating considerable socioeconomic vulnerability (BPS Kuningan Regency, 2025).

Despite adequate health infrastructure and personnel including one community health center (Puskesmas), 38 integrated health service posts (Posyandu), and a complete set of medical staff the prevalence of stunting in Cibingbin District has shown an increasing trend from 2021

to 2024. Several villages, such as Cipondok, Sukaharja, Citenjo, and Cisaat, have experienced a surge in cases, while others like Ciangir and Bantarpanjang, which previously saw a decline, have witnessed a resurgence. These patterns reflect weak intervention effectiveness and the limited impact of current policies. The stunting issue in Cibingbin District is illustrated in the table below:

Table 1 Stunting Prevalence in Cibingbin District, Kuningan Regency (2021–2024)

Year	Stunting Prevalence	Remarks
2021	3.02 %	-
2022	5.09 %	Increased 2.07 %
2023	5.27 %	Increased 0.18 %
2024	4.67 %	Decreased 0.6 %

Source: Profile of UPTD Cibingbin Community Health Center, Kuningan Regency, 2024

Based on Table 1, the stunting rate in 2021 was recorded at 3.02%, which is considered relatively low. However, in 2022, the rate increased significantly to 5.09%, reflecting a rise of 2.07%. This substantial increase suggests that the policy interventions implemented to reduce early childhood stunting were inadequate and failed to address the root causes of the problem. These underlying issues include limited access to nutritious food, insufficient healthcare services, and low community awareness regarding nutrition and child care practices.

In 2023, the stunting rate continued to rise, albeit slightly, increasing from 5.09% to 5.27%. This modest increase indicates a slowing trend in stunting prevalence compared to the previous year. It suggests that the stunting reduction acceleration program has begun to yield positive effects, alongside improved policy implementation and field monitoring efforts. By 2024, the stunting rate declined to 4.67%, reflecting a decrease of 0.6%. This reduction may be interpreted as a sign of progress in stunting prevention, enhanced field monitoring, and growing collaboration among local governments, community health centers (Puskesmas), healthcare professionals, and the public.

However, overall, from 2021 to 2024, the stunting rate increased by 1.65%, indicating that despite the decline in 2024, the prevalence has not returned to its 2021 level. Furthermore, monthly data from 2025 reveal ongoing fluctuations, underscoring that challenges in stunting mitigation efforts persist. Table 2 below presents the monthly stunting data from January to April 2025:

Table 2 Number and Prevalence of Stunting (January–April 2025)

Month	Number of Stunted Children	Stunting Prevalence	Remarks
January 2025	231	13.97 %	–
February 2025	162	9.68 %	Decreased 4.29 %
March 2025	191	11.42 %	Increased 1.74 %
April 2025	178	10.19 %	Decreased 1.23 %

Source: Nutrition Program Report, Cibingbin Community Health Center, Kuningan Regency, 2025

Based on Table 2, monthly data on stunting prevalence in Cibingbin District, Kuningan Regency, for the year 2025 sourced from the Nutrition Program Report of the Cibingbin Community Health Center indicate that in January 2025, the number of stunted children reached 231 (13.97%), a figure that may be considered high and indicative of a serious chronic nutritional problem at the beginning of the year. In February 2025, a sharp decline occurred, with the number dropping to 162 (9.68%), marking a 4.29% decrease. However, in March 2025, the rate increased again to 191 children (11.42%), representing a 1.74% rise from the previous month. In April 2025, the number slightly declined to 178 (10.19%), showing a 1.23% decrease.

Analyzing the stunting prevalence trends from 2021 to April 2025 reveals that the acceleration efforts to reduce stunting in Cibingbin District have shown signs of improvement, although the results remain inconsistent and unsustainable. The sharp increase at the beginning of 2025 reflects the weak initial foundation of the interventions. In contrast, the decline observed in 2024 and in some months of 2025 suggests progress driven by improved program management, strengthened nutritional interventions, and enhanced cross-sectoral collaboration (Bappenas, 2021; Ministry of Health, 2022). Nonetheless, recurring short-term fluctuations indicate that such progress remains fragile and susceptible to both internal and external factors, including household food insecurity, inadequate parenting practices, and limited access to healthcare services (UNICEF, 2020).

The causes of stunting can be classified into two categories: direct and indirect causes. Direct causes include inadequate nutritional intake and a high incidence of infectious diseases such as diarrhea and upper respiratory tract infections. Indirect causes are associated with poor childcare practices, limited access to basic healthcare services, insufficient availability and accessibility of nutritious food, unhealthy environmental conditions, and socio-cultural and economic factors that affect the quality of a child's life (UNICEF, 2008; Bappenas, 2013). Disparities in meeting children's basic needs make stunting a critical indicator for assessing the quality of human development. The consequences of stunting are not only immediate but also long-lasting and severe.

In the short term, stunted children face impaired brain development, reduced intelligence, delayed physical growth, and metabolic disorders. In the long term, they are at high risk of decreased cognitive ability, poor academic performance, weakened immune systems, and greater vulnerability to non-communicable diseases such as diabetes, obesity, heart disease, stroke, and cancer (Ministry of Health, Republic of Indonesia, 2016). These conditions ultimately lead to reduced work quality and lower productivity in adulthood. Research has shown that stunted children generally attain lower educational achievements, spend fewer years in school, and earn less income as adults. They also tend to grow into less healthy individuals who are more susceptible to disabilities and chronic illnesses. For these reasons,

stunting is regarded as a key indicator of poor human capital quality, which undermines a nation's productive capacity in the long term (UNICEF, 2012).

Hoddinott et al. (2013) also emphasize that stunting has substantial economic impacts at the individual, household, and societal levels. Adults with short stature have been found to experience poorer labor market outcomes, including lower wages and reduced productivity. Children affected by stunting often exhibit age-inappropriate behavioral development, delayed school entry, lower academic performance, and reduced cognitive abilities compared to their non-stunted peers (Prendergast & Humphrey, 2014).

Policy Implementation of Stunting Reduction Acceleration

The implementation of the stunting reduction acceleration policy in Cibingbin District, Kuningan Regency, represents a concrete manifestation of national public policy execution. This policy underscores the role of the state in addressing chronic malnutrition, which significantly impacts the quality of human resources. In line with the perspectives of Dye (1992) and Wanna (2010), public policy is not merely a set of governmental decisions but also reflects what the state chooses to do in response to public issues. Within this context, the high prevalence of stunting in Cibingbin District necessitates concrete actions that go beyond regulatory frameworks and are oriented toward the public interest. As emphasized by Islamy (2000), public policy must embody the opinions and aspirations of the people. Therefore, the interventions undertaken in Cibingbin District constitute a form of governmental responsibility toward communities facing the intergenerational risks associated with nutritional deficiencies.

Administratively, the stunting reduction policy in Cibingbin District, Kuningan Regency, is implemented through cross-sectoral collaboration, reflecting the principles of public administration as a coordinative process involving executive, legislative, and technocratic institutions (Nigro & Nigro, 1970; Pfiffner & Presthus, 1960). The acceleration program aligns with the overarching objectives of public policy as described by Anderson (1984) and Rusli (2015), who assert that public policy is always directed toward achieving specific goals. In this context, the reduction of stunting prevalence. In practice, implementation represents the action phase of the policy cycle (Denhardt & Denhardt, 2006), requiring tangible execution so that policies do not remain merely as written documents.

The sub-district government of Cibingbin, in collaboration with the Community Health Center (UPTD Puskesmas), the Population Control Unit (UPTD Pengendalian Penduduk), the Stunting Reduction Acceleration Team (TPPS), and the Family Assistance Team (TPK), has operationalized the policy through a range of preventive and promotive programs. These programs are designed in accordance with WHO standards (World Health Organization, 2010), such as the Zero Hunger Strategy, the promotion of healthy family kitchens (*dapur sehat atasi*

stunting), nutritional surveillance, and the strengthening of family-based primary healthcare services (Ministry of Health of Indonesia, 2021; BKKBN, 2022).

Policy implementation is also guided by the five pillars of the National Strategy and the eight priority activities outlined in the National Action Plan for Stunting Reduction Acceleration (RAN-PASTI). In Cibingbin District, these activities include periodic data collection on families at risk of stunting, family mentoring by TPK, premarital education via the Elsimil application, and the conduct of stunting case audits to identify root causes and refine intervention strategies. In addition, village governments and TPPS collaboratively engage in convergent program planning and budgeting, as well as staged evaluation and reporting. However, field implementation still faces several challenges, such as limited village budget allocations for nutrition, low capacity of local health volunteers, and weak integration of data across sectors. Therefore, in order for the stunting reduction acceleration policy to generate meaningful impact in Cibingbin District, there is a critical need to strengthen coordination among stakeholders, enhance the capacity of implementers, and ensure consistent monitoring and evaluation based on valid and real-time data.

Policy Monitoring in the Stunting Reduction Acceleration Program

According to Anderson (1984), public policy consists of five stages: problem formulation, policy formulation, policy adoption, policy implementation, and policy evaluation. Similarly, Dunn (2003) outlines five phases in the public policy process: agenda setting, policy formulation, policy adoption, policy implementation, and policy evaluation. Dunn further explains that policy analysis occurs at each stage of the policy cycle: problem identification during agenda setting, prediction during policy formulation, recommendation during policy adoption, monitoring during policy implementation, and evaluation during the policy assessment phase (Dunn, 2003). Therefore, policy monitoring is a specific form of policy analysis that occurs during the implementation stage of the public policy process.

According to Dunn (2003), policy monitoring provides policy-relevant knowledge regarding the consequences of previously implemented policies. Monitoring supports policymakers during the implementation phase by enabling them to assess compliance levels, identify unintended consequences of policies and programs, recognize implementation barriers and constraints, and determine the responsible actors at each stage of the policy process. The analysis of policy monitoring in the context of accelerating stunting prevalence reduction in Cibingbin District, Kuningan Regency, is carried out based on Dunn's (2003) framework, in which policy monitoring serves four core functions within policy analysis: the investigative function, the compliance (or auditing) function, the accounting function, and the explanatory function.

1. Compliance

Compliance is a critical aspect of public policy. Winarno (2014) emphasizes that public policy possesses a coercive nature that legitimizes its existence. This coercive characteristic is not present in policies implemented by private organizations. In other words, public policy requires broad-based compliance from society. This distinguishing feature sets public policy apart from other forms of policy.

The compliance of policy implementers with established standards and procedures can be assessed through policy monitoring. According to Dunn (2003), monitoring serves to evaluate whether the actions of program implementers, staff, and other actors adhere to the standards and procedures set by legislators, government agencies, and professional organizations. In the context of monitoring the stunting reduction acceleration policy in Cibingbin District, this explanation can be observed through the extent to which policy implementers follow the prescribed standards and procedures.

Findings from interviews with the Head of the Sub-district TPPS, the Secretary of the TPPS in Cibingbin (Head of the Population Control Unit), village facilitators, Posyandu cadres in Cisaat Village, and TPK cadres in Ciangir Village revealed several instances of non-compliance among field implementers, including:

- a. From the perspective of regulations and operational standards, the national policy has established eight priority activities in the national action plan for accelerating stunting reduction. However, not all of these activities have been implemented optimally. For instance, programs such as premarital counseling, monitoring of at-risk families, and stunting case audits have not been carried out in a systematic manner. This indicates a degree of technical non-compliance with the program design.
- b. In terms of resource availability particularly village funds there has been an allocation of budget to support the stunting reduction acceleration. Nevertheless, the utilization of these funds has not been specifically directed toward prioritized activities as stipulated in the regulatory framework.

This indicates that non-compliance is not always the result of limited resources, but rather of weak management and utilization that does not align with policy directives. In terms of implementation structure, formal bodies such as the Stunting Reduction Acceleration Team (TPPS) at the village and sub-district levels have been established. However, the coordination, monitoring, and oversight functions that should be performed by the TPPS have not been fully carried out. This reveals a discrepancy between the establishment of formal structures and the substantive execution of their roles in the field.

Regarding reporting and evaluation, the biannual reporting requirement stipulated in the regulations has been met. However, the reports prepared are largely administrative in nature and do not

adequately reflect the realities of program implementation or address the root causes of the issues.

Thus, the findings of this study indicate that policy implementation requires strengthening across multiple dimensions from technical compliance with program design, to the optimal use of available resources, and the revitalization of TPPS structures and functions as the primary driving force of the program. Evaluation of implementation should not only assess the existence of activities but also their quality, relevance, and impact on families at risk of stunting. A more integrative, evidence-based, and results-oriented approach is needed to ensure that the formulated policies serve not merely as a blueprint, but as an effective solution to the persistent stunting problem in the region.

2. Audit

According to Dunn (2003), auditing in policy monitoring aims to evaluate the extent to which resources, services, and programs designed within public policy actually reach the intended target groups accurately and in a timely manner. In the context of accelerating stunting reduction, audits play a critical role in identifying the alignment or lack thereof between the planned actions and their actual implementation in the field.

The implementation of the stunting reduction policy in Cibingbin District, Kuningan Regency, highlights the importance of monitoring and evaluation functions in assessing the effectiveness of program execution at the field level. According to the evaluation framework developed by William N. Dunn (2003), one of the critical dimensions of monitoring is the auditing function, which assesses the alignment between action plans and actual outcomes.

Findings from this study reveal that the auditing process conducted by the Sub-district Stunting Reduction Acceleration Team (TPPS) continues to face significant obstacles. Interviews with the Coordinator of Specific and Sensitive Intervention Services (also serving as the Maternal and Child Health Program Coordinator at the Cibingbin Health Center), a Family Planning Counselor who is also a member of the Field Mobilization Division of the TPPS, the Vice Chair of the Sub-district TPPS (Head of the Cibingbin Health Center), and the Secretary of the Sub-district TPPS (Head of the Population Control Unit of Cibingbin) revealed several major challenges in the auditing process, including:

- a. In terms of resource distribution, there were notable discrepancies in delivering key interventions to the most vulnerable groups, such as pregnant women, children under five, and adolescent girls. For example, the provision of supplementary food (PMT) and iron and folic acid tablets (TTD) has not reached all targeted beneficiaries, both in terms of quantity and quality. This indicates a gap between the program design and its field implementation.

- b. Regarding service delivery, several families at risk of stunting did not receive adequate support from the Family Assistance Team (TPK). This is despite existing regulations that mandate such support as a critical component of the national strategy for accelerating stunting reduction. Low engagement from community health volunteers or TPK members has resulted in many families lacking access to proper education, healthcare services, and social assistance.
- c. Compliance with administrative and technical procedures also remains insufficient. Key programs such as surveillance of families at risk of stunting and stunting case audits have not been conducted systematically or consistently. These activities are essential for early detection and corrective action. The low implementation rate of case audits reflects the underutilization of relapse prevention principles in public policy execution.
- d. In terms of report quality, the biannual reporting system mandated under the Regulation of the Head of the National Population and Family Planning Board (BKKBN) No. 12 of 2021 has not been fully utilized as a feedback mechanism for planning and improving programs at the sub-district level. This shortfall hinders the effectiveness of data-driven decision-making.

Conceptually, these findings indicate a misalignment between the structure and function of the Stunting Reduction Acceleration Team (TPPS) and the execution of its duties in the field. According to the implementation framework proposed by Mazmanian and Sabatier (1983), successful policy implementation is influenced by three key factors: the clarity of policy objectives, institutional capacity, and environmental support. Although TPPS has been structurally established and operates within a formal reporting framework, its implementation remains weak due to limited technical capacity, poor cross-sectoral coordination, and low commitment among implementing cadres at the village level. Therefore, it is essential to strengthen the functional role of TPPS, provide clearer guidance to the Family Assistance Team (TPK), and reformulate the reporting system so that it accurately reflects achievements and challenges encountered in the field. Without a strong and continuous monitoring and evaluation system, the stunting reduction acceleration program will struggle to achieve the goals set forth in the national policy framework.

3. Accounting

According to Dunn (2003), accounting plays a vital role in policy assessment by providing information that supports accountability for the social and economic changes resulting from the implementation of public policy. In this context, accounting extends beyond financial reporting to include the evaluation of outcomes achieved by the policy over a given period. This underscores that public policy must be able to demonstrate its contribution to positive change within the communities it serves.

The government, through Presidential Regulation No. 72 of 2021 and the guidelines issued by the Head of the National Population and Family Planning Board (BKKBN), has emphasized both specific and sensitive interventions, as well as national strategies focused on families at risk of stunting. Based on interviews with representatives from the Family Welfare Empowerment Team (TPPKK) in Cibingbin District, as well as the Head of the Cibingbin Community Health Center and their team, this policy has been implemented through various programs, including premarital counseling, nutritional interventions, household surveillance, case audits, and routine monitoring and reporting. However, the stunting rate in Cibingbin District continued to increase annually from 2021 to 2024. This trend indicates that the policy has failed to generate the desired social and economic changes particularly in terms of improving child health and quality of life. Additionally, the financial resources allocated through village funds and other intervention programs have not yielded the expected social outcomes.

Furthermore, an interview with the Secretary of the Population Control Unit (TPPS) in Cibingbin District (Head of the Population Control Technical Implementation Unit) indicated that the current reporting system is not fully grounded in evidence-based indicators of measurable social change. Reports on program implementation have yet to provide clear data on key achievements such as increases in exclusive breastfeeding rates, reductions in anemia among pregnant women, and improved household access to sanitation and clean water. This concern was also echoed in interviews with the Coordinator for Specific and Sensitive Intervention Services in the Sub-district TPPS (Coordinator of the Maternal and Child Health Program at the Cibingbin Health Center), and the Family Planning Counselor serving as a Field Mobilization Division member in the Sub-district TPPS. The absence of data reflecting social change highlights a weak accountability function within policy monitoring, consistent with Dunn's (2003) assertion that relevant information must be provided as a basis for holding public policy accountable for its impact on the social and economic conditions of the community.

According to Dunn (2003), the accounting function emphasizes accountability for the social and economic changes resulting from policy implementation. In the case of Cibingbin District, the rising stunting prevalence between 2021 and 2024 indicates that policy outcome accountability has not been achieved. Although the policy has been implemented administratively and structurally, it has not demonstrated a positive impact on the community. This reflects the weak role of the accounting function in monitoring the policy and calls for a critical reassessment of the effectiveness of the strategies applied including the need for substantial revisions to performance indicators, reporting mechanisms, and inter-sectoral collaboration models.

This situation also reveals that the principles of accountability and transparency core tenets of General Principles of Good Governance

(AUPB) have not been consistently upheld. A study by Sutrisno et al. (2025) highlights that public institutions that fully implement accountability and transparency principles tend to experience higher levels of public satisfaction. The lack of concrete data on program achievements and the weakness of evidence-based reporting not only hinder data-driven decision-making but also undermine public trust in the effectiveness of government programs. Therefore, it is essential to reformulate outcome-based performance indicators, strengthen technical training for TPPS and TPK personnel, and improve the quality of reporting to provide tangible evidence of social change resulting from the implemented policies.

Thus, the weak accounting function within the monitoring of the stunting reduction policy in Cibingbin District, Kuningan Regency, indicates that public policy has not yet optimally fulfilled the substantive dimension of evaluation namely, the social impact produced. Moving forward, it is crucial to adopt an evaluative approach that not only focuses on program continuity but also prioritizes the achievement of social transformation and improvements in public health as key indicators of public policy effectiveness.

4. Explanation

This underscores the ineffectiveness of the accounting function in policy oversight and the need for a reassessment of the strategies employed, including a more substantive reformulation of performance indicators, reporting systems, and multisectoral convergence approaches. The explanatory function not only documents what has been done, but also investigates the root causes of the gap between policy planning and its implementation on the ground. As such, explanation serves as the analytical foundation for designing corrective measures and future policy improvements.

Interviews with the Head of the Sub-district Stunting Reduction Acceleration Team (TPPS) (Camat of Cibingbin), a TPK cadre in Ciangir Village, and the Secretary of the Sub-district TPPS revealed that the explanatory function in the policy monitoring process for accelerating stunting reduction has not been operating as effectively as expected. Several key challenges were identified:

- a. Limited effectiveness in implementing specific and sensitive interventions. Although these initiatives were designed through multisectoral collaboration, at the implementation level particularly in villages and sub-districts there remain significant obstacles related to integration and cross-sector coordination. Activities such as premarital counseling, nutritional consultation for pregnant women, and child growth monitoring are still carried out inconsistently and often lack quality.
- b. Inadequate human resource capacity at the grassroots level. Field cadres, healthcare workers, and program staff frequently lack sufficient training to implement interventions effectively, resulting in implementation that tends to be procedural rather than impactful.

- c. Mismatch between budget allocation and actual community needs. Village funds that should support stunting reduction efforts are often redirected to unrelated programs or implemented without accurate data on families at risk of stunting, leading to inefficient resource use.
- d. Insufficient quality and monitoring of data. The existing reporting system fails to provide direct, evidence-based information that accurately reflects the evolving stunting problem. Discrepancies between administrative data and field realities result in policy responses that are misaligned with actual conditions.
- e. Low levels of behavioral change in the community. Despite ongoing behavior change communication initiatives, cultural resistance, limited health literacy, and weak engagement from community leaders have hindered efforts to foster meaningful behavioral shifts in breastfeeding practices, child feeding habits, and sanitation behavior.

Based on these findings, a comprehensive reform of the system is required, particularly in the explanatory dimension. Monitoring must not be limited to documenting activities; it must also be capable of explaining the causes of deviations and formulating context-specific recommendations. This approach aligns with the principles of policy learning-based evaluation, where implementation failures serve as the foundation for developing more adaptive, collaborative, and data-driven strategies. Such reform will strengthen the overall quality of public policy and ensure that stunting reduction programs are implemented effectively and generate tangible improvements in the quality of life for children and families.

Stunting Policy Evaluation

Policy evaluation refers to the analysis conducted at the final stage of the policy process. This activity generates information related to the policy by identifying the gap between intended outcomes and actual results. In addition to providing conclusions about the extent to which the problem has been addressed, policy evaluation also offers explanations and critiques of the underlying principles of the policy, and contributes to the reassessment and refinement of the issues at hand (Dunn, 2003).

The evaluation of the stunting reduction acceleration policy is based on six key criteria:

1. Effectiveness

Effectiveness, as a criterion in policy evaluation, concerns the extent to which the desired outcomes have been achieved. In other words, it measures how well a specific objective has been fulfilled, both in terms of measurable results and the efforts undertaken. In the context of evaluating the stunting reduction policy in Cibingbin District, effectiveness relates to the question of whether the implemented activities have successfully reduced the prevalence of stunting (Dunn, 2003).

The stunting reduction policy emphasizes that local governments at all levels from the national to regional and village levels must actively participate in implementing the stunting reduction acceleration initiatives. This involvement is realized through four key aspects: strengthening the planning and budgeting process, improving program implementation quality, enhancing the integration of monitoring and evaluation systems, and developing the capacity of human resources involved in the program. This approach highlights the need for synergy across regions and levels of government to ensure the policy's effectiveness in reaching high-risk families, particularly in areas with a high prevalence of stunting. However, based on interviews with the Head of the TPPS in Sukaharja Village, a TPK cadre from Cipondok Village, and the Deputy Chair of the Sub-district TPPS (Head of the Cibingbin Health Center), it was revealed that these four pillars of the stunting reduction strategy have not been optimally implemented.

These findings suggest that the success of the stunting reduction policy cannot be ensured solely by the availability of programs and budgets; it also requires effective cross-sectoral coordination and active community engagement. Therefore, to enhance policy effectiveness in the future, it is essential to strengthen coordination among stakeholders, improve the capacity of village-level TPPS and community health cadres, and promote more participatory and context-sensitive public education initiatives that align with the local socio-cultural environment.

2. Efficiency

Efficiency is one of the key criteria in evaluating public policy, as emphasized by Dunn (2003), who defines it as the relationship between the resources expended and the results achieved. In the context of stunting reduction efforts in Cibingbin District, efficiency can be assessed by examining budget allocation and the number of activities implemented in relation to the reduction in stunting prevalence. Research findings indicate that various programs have been carried out by both sub-district and village-level TPPS, including support for at-risk families, provision of supplementary feeding (PMT), nutritional education for pregnant women, and monitoring of child growth and development. However, despite these activities being conducted annually, data show that the stunting prevalence in Cibingbin District has increased from 2021 to 2024. This suggests that the programs have not been implemented efficiently in terms of producing the expected outcomes.

Interviews with the Head of the Sub-district TPPS (Camat of Cibingbin) and the Village Head of Ciangir revealed several key challenges that have contributed to the rising stunting rates in Cibingbin District::

- a. Village budget allocations have not yet fully covered all core programs, particularly those aimed at reducing stunting prevalence.

- b. Government funding policies remain suboptimal, as limitations within both the Regional Budget (APBD) and Village Budget (APBDes) constrain the ability to comprehensively implement stunting reduction initiatives.
- c. The Sub-district Office of Cibingbin does not receive a designated budget for stunting reduction efforts, which restricts its authority and operational flexibility. As a result, the sub-district can only coordinate and support activities rather than make key decisions or execute programs independently.

This situation highlights a misalignment between program needs and the resources available, resulting in interventions that do not fully address the root causes of stunting within the community. In addition, funding policies at the regency level have yet to fully accommodate the cross-sectoral requirements necessary for accelerating stunting reduction. Budget allocations from the Regional Budget (APBD) and Village Budget (APBDes) remain limited and are often dispersed across various technical agencies without clear synergy. This fragmentation leads to either program duplication or a lack of intervention for specific target groups. This is particularly concerning given that national policy emphasizes the importance of convergence between specific and sensitive interventions. The low level of efficiency observed indicates that, although activities have been carried out administratively, the allocation of resources and program direction are not yet focused on measurable outcomes. Therefore, improvements in budget governance, cross-sectoral planning integration, and the revision of efficiency indicators toward outcome-based metrics are crucial. These reforms will ensure that stunting reduction policies are not only administratively functional but also produce tangible impacts on community well-being.

3. Adequacy

Key factors contributing to the inadequacy of the policy outcomes include limited human resources, insufficient funding, and inadequate infrastructure. The Head of the Sub-district TPPS (Camat of Cibingbin), the Deputy Head of the TPPS (Head of the Cibingbin Health Center), and the Village Head of Ciangir all reported that the adequacy criteria have not been met effectively, as evidenced by the following:

- a. A Shortage of qualified professionals and skilled personnel to address stunting, with the number of available staff not proportional to the number of stunted children in Cibingbin District.
- b. Limited financial resources, as there is no dedicated budget specifically allocated for stunting reduction at the sub-district level, leading to a lack of essential facilities to support rapid and targeted interventions.

These findings indicate that stunting reduction programs in Cibingbin District have not been supported by sufficient and appropriate resources. The lack of technical expertise, limited operational funds, and insufficient basic infrastructuresuch as growth monitoring tools and supplementary food supplieshave diminished the

effectiveness of the interventions. This inadequacy has contributed to the failure to achieve expected outcomes, as reflected in the rising prevalence of stunting. According to the policy effectiveness framework, the adequacy of inputs is a prerequisite for achieving successful outcomes. Therefore, local governments must reformulate their resource allocation strategies to be more proportional and targeted, ensuring that the implementation of stunting reduction policies can genuinely address the problem at its core.

4. Equity

According to Dunn (2003), equity is a fundamental policy evaluation criterion that emphasizes the importance of fairness in the distribution of both the benefits and costs of a policy across all segments of society. In the context of the stunting reduction acceleration policy in Cibingbin District, equity serves as a key indicator to assess the extent to which programs and services such as the provision of supplementary feeding (PMT), iron supplementation, and classes for pregnant women and toddlers are equitably accessible to pregnant women, young children, and adolescent girls across all villages.

Findings from the study reveal that although these activities have been implemented in various villages, the reach and intensity of services have not adequately covered all target groups, particularly those living in geographically remote or infrastructure-deficient areas. In interviews with the Head of the Sub-district TPPS (Camat of Cibingbin) and the Head of the TPPS in Dukuhbadag Village, it was reported that PMT for pregnant women has been implemented, providing nutritious foods such as leafy greens, fruits, protein sources (fish, meat, eggs), and iron-rich meals. Additionally, PMT for children under five includes porridge, soft vegetables, fruit slices, and protein sources like minced meat, tofu, and tempeh. Iron supplementation tablets have also been distributed to pregnant and adolescent girls.

However, the coverage of stunting-related services remains uneven, as reflected in the following issues:

- a. Only a few villages receive intensive program support.
- b. Some villages are isolated or geographically constrained, limiting optimal support.
- c. There is a lack of resources, funding, and infrastructure.

This highlights an imbalance in program allocation, where policy benefits have not been fairly distributed to the entire target population. Stunting reduction efforts, by design, should be implemented in a convergent and equitable manner not only administratively, but also substantively at the community level. The disparity in service delivery has led to uneven outcomes among villages. Villages with better access and more consistent support tend to show improvement, while those facing geographic isolation, urbanization pressure, limited human resources, and weak institutional support often experience stagnation or even increases in stunting prevalence. Therefore, the equity principle has not been fully realized in the implementation of the stunting

reduction policy in Cibingbin District. Future improvements must prioritize geographic mapping of high-need areas, strengthen logistical support for remote villages, and allocate funding based on local needs to ensure that the policy produces equitable and impactful outcomes for all intended beneficiaries.

5. Responsiveness

Responsiveness is one of the key dimensions in policy evaluation as defined by Dunn (2003), which assesses the extent to which a public policy addresses the needs and values of its target population. In the context of stunting reduction efforts in Cibingbin District, Kuningan Regency, responsiveness refers to the ability of the program to meet the health and nutritional needs of pregnant women, children under five, and adolescent girls.

Presidential Regulation No. 72 of 2021 provides clear guidelines and encourages the establishment of Stunting Reduction Acceleration Teams (TPPS) down to the village level. However, the study indicates that despite formal policy implementation and a demonstrated commitment from local actors, the actual delivery of services in the field remains insufficiently attuned to the needs and conditions of the community.

According to the Deputy Chair of the TPPS in Cibingbin Sub-district (Head of the Cibingbin Community Health Center) and the Head of the Village TPPS in Cibingbin, several challenges remain in addressing these needs:

- a. Although staff have made strong efforts to carry out their duties, interactions between service providers and the community have not been effectively established.
- b. Many residents report that information about the stunting reduction acceleration program is still unclear.
- c. There is a general lack of understanding among community members about the importance of stunting prevention.
- d. Nutritional campaigns remain limited, resulting in low public awareness of their role in accelerating stunting reduction efforts.
- e. There is a lack of incentives for frontline workers, which affects their motivation to deliver high-quality services.

These findings highlight the need to improve communication mechanisms and the quality of interaction between frontline workers and the community, so that public needs can be more accurately identified and addressed. Without effective communication and motivated service providers, real community needs are difficult to detect and respond to in a timely manner. To achieve high responsiveness, active communication, cultural understanding, and adequate support for field-level implementers are essential. Although the policy framework is in place, its success largely depends on the quality of implementation that is responsive to the specific needs of the local population.

According to William N. Dunn (2003), accuracy is a key policy evaluation criterion that highlights the extent to which a policy's objectives are formulated based on accurate assumptions and

appropriately aligned with the problem being addressed. In the context of stunting reduction efforts in Cibingbin District, Kuningan Regency, accuracy refers to the validity of the underlying assumption that stunting can be addressed through specific and sensitive nutritional interventions, as well as strengthened healthcare services targeted toward pregnant women, young children, and adolescent girls.

Chronic malnutrition during the first 1,000 days of life can be mitigated through strategies such as communication, information, and education (CIE), personal assistance, and access to basic health services. These approaches have proven to be relevant and compatible with the social conditions of communities in Cibingbin. The Head of the Sub-district TPPS (Camat of Cibingbin) and the Head of the Cibingbin Health Center affirmed that the national strategy applied is reasonably well-aligned with the local challenges and that the stunting reduction policy evaluation in Cibingbin District is appropriate given the current circumstances.

This alignment also reflects the principles of Good Governance (Asas Umum Pemerintahan yang Baik/AUPB), such as efficiency and equity. As noted by Sutrisno et al. (2025), when these principles are applied consistently, they enhance public satisfaction with government services. The stunting reduction acceleration policy in Cibingbin District is conceptually sound and tailored to local needs. However, to ensure accurate and effective results, the policy must be supported by improved implementer capacity, systematic training, and proportionate logistical and budgetary support to address the varying complexities of stunting in each village.

Follow-Up on Monitoring and Evaluation of the Stunting Reduction Acceleration Policy

The follow-up to policy monitoring on stunting reduction in Cibingbin District has been carried out by the Stunting Reduction Acceleration Teams (TPPS) at both the sub-district and village levels. These teams are primarily tasked with coordinating program implementation, monitoring progress, and preparing periodic reports. However, research findings reveal that the implementation of monitoring has not been optimal. Many activities remain administrative in nature and are not yet fully grounded in accurate and validated field data. Technical and structural barriers such as weak human resource capacity, inconsistent program execution, and limited substantive supervision have contributed to the suboptimal progress in reducing stunting.

The most urgent follow-up action based on the monitoring and evaluation results is the strengthening of the compliance function. Many implementers at the village and sub-district levels have not fully executed the eight priority activities outlined in Regulation No. 12 of 2021 by the Head of BKKBN. Therefore, there is a need for more detailed and measurable technical guidelines, along with refresher training for TPPS members and Family Assistance Teams (TPK) to

ensure a uniform understanding of policy standards. The supervisory function must also be reinforced through regular oversight from the sub-district level and the implementation of a reward-and-punishment system based on key performance indicators. Furthermore, the auditing function needs to be optimized by developing a transparent, data-driven tracking system for program distribution. Deviations between planned and actual distributions of supplementary food (PMT) and iron tablets (TTD), along with the absence of systematic stunting case audits, highlight the need for an integrated reporting system between villages and sub-districts that is not merely administrative but evidence-based.

In addition, the accounting and explanatory functions of monitoring must be improved to generate more accurate policy recommendations. Evaluation results indicate a lack of outcome-based reporting, such as coverage of exclusive breastfeeding or reductions in anemia rates among pregnant women. Therefore, local governments must develop outcome-based performance indicators and conduct qualitative evaluations to trace the gap between planning and implementation. Such evaluations are essential to understanding structural barriers, including cultural resistance, weak cross-sectoral coordination, and limited village budgets. As a follow-up, there is a need to reformulate the stunting reduction acceleration strategy in Cibingbin District through remapping at-risk families, strengthening the capacity of local human resources, and adopting more culturally adaptive behavior change communication approaches tailored to the community's sociocultural context.

CONCLUSION

The implementation of monitoring and evaluation mechanisms for the stunting reduction acceleration policy in Cibingbin District, Kuningan Regency, has not yet reached an ideal state. This indicates that the application of national regulations at the local level remains weak, despite the existence of a solid legal framework such as Presidential Regulation No. 72 of 2021 and Regulation No. 12 of 2021 issued by the Head of the National Population and Family Planning Agency (BKKBN). The failure to fulfill key monitoring functions and evaluation criteria as outlined by Dunn (2003) serves as an indicator of the policy's low effectiveness, which has contributed to the continuous rise in stunting prevalence over the years.

Fundamental issues such as poor cross-sectoral coordination, limited village-level budget allocations for nutrition, and insufficient community participation must be urgently addressed through concrete corrective actions. Institutional strengthening strategies, capacity building for cadres and Family Assistance Teams (TPK), and the actual utilization of data on at-risk families must be integrated into program implementation.

Therefore, a strong commitment from local governments and all relevant stakeholders is essential to reframe stunting not as a sectoral concern, but as a strategic development issue. Only through systematic,

comprehensive, and continuous monitoring and evaluation can the stunting reduction acceleration policy be implemented effectively and make a tangible contribution toward building a healthier, more productive, and competitive future generation paving the way for the realization of Indonesia Emas 2045.

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