

INTEGRATING POLICY, SDGs, AND BEHAVIOR CHANGE FOR STUNTING CONTROL

MENGINTEGRASIKAN KEBIJAKAN, SDGs, DAN PERUBAHAN PERILAKU UNTUK PENGENDALIAN STUNTING

Wahyu Fitri Handayani¹, Rozidateno Putri Hanida^{1*}, Muhammad Refo Baqirdin Zaim¹,
Taufiq Akbar Daulay¹.

¹Departement of Public Administration, Faculty of Social and Political
Science, Andalas University, Indonesia

*Correspondence: ozidateno@soc.unand.ac.id

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ABSTRACT

Indonesia is committed to achieving *Sustainable Development Goals* (SDGs), especially the second and third goals, child health and nutrition are very important. *Stunting* is a problem that often occurs in Indonesia. The prevalence of *stunting* in West Sumatra in 2022 still touched 25.2%, still high from Indonesia's target of 14%. This scientific paper analyzes various relevant literature with descriptive qualitative methods. The AGIL *Framework* approach by Talcott Parsons found that policy success depends on adaptation to community conditions, achieving clear targets, cross-sector integration, and long-term behavior change. Policies or programs in reducing the prevalence of *stunting* affect people's attitudes, awareness, and parenting of health and nutrition in children. Based on the analysis conducted, efforts to prevent and manage *stunting* in West Sumatra have shown changes in community behavior. Programs that are in line with policy directions, such as routine posyandu programs, actions to report children indicated as *stunted*, Supplementary Food Provision (PMT), and the establishment of Healthy Village Houses (RDS), behavior change communication policies, and specific nutrition interventions, in children aged 0-23 months and pregnant women, have proven effective in influencing changes in community behavior. Therefore, it is hoped that the government can provide support and collaboration between stakeholders, and help increase community participation in controlling the prevalence of *stunting* in West Sumatra.

Key words: Behavior Change; Health and Nutrition; Stunting; Sustainable Development Goals (SDGs); West Sumatra

ABSTRAK

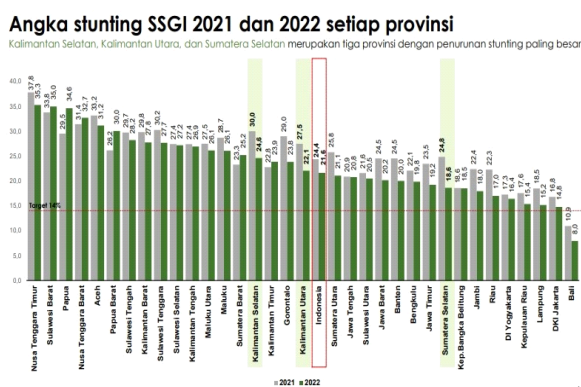
Indonesia berkomitmen untuk mencapai *Tujuan Pembangunan Berkelanjutan* (SDGs), terutama tujuan kedua dan ketiga, yaitu kesehatan dan gizi anak yang sangat penting. *Stunting* merupakan masalah yang sering terjadi di Indonesia. Prevalensi *stunting* di Sumatera Barat pada tahun 2022 masih mencapai 25,2%, masih tinggi dibandingkan target Indonesia sebesar 14%. Artikel ilmiah ini menganalisis berbagai literatur relevan dengan metode kualitatif deskriptif. Pendekatan Kerangka AGIL oleh Talcott Parsons menunjukkan bahwa keberhasilan kebijakan bergantung pada penyesuaian dengan kondisi masyarakat, pencapaian target yang jelas, integrasi lintas sektor, dan perubahan perilaku jangka panjang. Kebijakan atau program dalam mengurangi prevalensi stunting mempengaruhi sikap, kesadaran, dan pola asuh orang tua terhadap kesehatan dan gizi anak. Berdasarkan analisis yang dilakukan, upaya pencegahan dan penanganan stunting di Sumatera Barat telah menunjukkan perubahan perilaku masyarakat. Program-program yang sejalan dengan arah kebijakan, seperti program posyandu rutin, tindakan pelaporan anak yang terindikasi *stunting*, Penyediaan Makanan Tambahan (PMT), dan pendirian Rumah Sehat Desa (RDS), kebijakan komunikasi perubahan perilaku, serta intervensi gizi spesifik pada anak usia 0-23 bulan dan ibu hamil, telah terbukti efektif dalam mempengaruhi perubahan perilaku masyarakat. Oleh karena itu, diharapkan pemerintah dapat memberikan dukungan dan kolaborasi antar pemangku kepentingan, serta membantu meningkatkan partisipasi masyarakat dalam mengendalikan prevalensi *stunting* di Sumatera Barat.

Kata kunci: Perubahan Perilaku; Kesehatan dan Gizi; Stunting; Sumatera Barat; Tujuan Pembangunan Berkelanjutan (SDGs)

INTRODUCTION

Indonesia is committed to achieving Sustainable Development Goals (SDGs) 2 and 3, namely ending hunger, achieving food security, improving nutrition, and sustainable agriculture, as well as ensuring healthy lives and well-being. Child health and nutrition are important indicators in assessing a country's progress. *Stunting* is one of the important targets in the Sustainable Development Goals (SDGs), which emphasizes the importance of paying more attention to child nutrition in development policies. *Stunting* is characterized by a child's height being lower than the average age, due to a lack of maternal nutritional intake during pregnancy and during the child's growth period (Agustina, 2022; Pratidina, et al., 2023). According to (Nirmalasari, 2020) risk factors for *stunting* in Indonesia include maternal conditions (age at pregnancy, arm circumference, height, complementary feeding and breastfeeding, early breastfeeding initiation, and food quality), child conditions (history of LBW, prematurity, gender, history of disease, infectious diseases, diarrhea, and immunization), and environmental factors (socioeconomic status, family education, income, habits of using inadequate latrines, defecation in rivers, untreated drinking water, and pesticide exposure).

Figure 1. Stunting Rates in Each Province

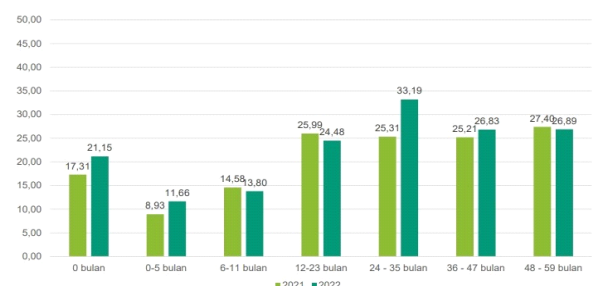


Source: Ministry of Health of the Republic of Indonesia. (2022). Indonesia Nutrition Status Survey (SSGI) 2022 results. Indonesian Ministry of Health. <https://ayosehat.kemendes.go.id>

Based on Figure 1, in 2021 the *stunting* rate in Indonesia dropped from 24.4% to 21.6% in 2022. To reach the 2024 target of 14%, a reduction of around 3.8% per year is required.

In 2021, there were 5,253,404 *stunted* children, with 565,479 children aged 0-11 months, 1,269,436 children aged 24-35, 1,163,744 children aged 48-59 months. In 2022, the expected number of *stunted* children was 4,754,223. However, the number exceeded expectations by 4,558,899. In children aged 0-11 months, there was a decrease from 564,172 to 559,799 about 0.8%). Age 12-23 months saw an increase from 565,479 to 978,930 (about 73.1%). Age 24-35 months decreased from 1,191,392 to 1,144,752 (approximately 3.9%), age 36-47 months decreased significantly from 1,269,436 to 983,508 (approximately 22.5%) and age 48-59 months decreased from 1,163,744 to 891,910 (Ministry of Health of the Republic of Indonesia, 2023) approximately 23.4%. This means that there are challenges in overcoming *stunting*, the need for interventions in certain age groups, and sustainable efforts through increasing awareness, access, and health programs on nutrition. In (Regional Regulation of West Sumatra Province Number 6 of 2021 concerning the Regional Medium-Term Development Plan year 2021-2026., 2021), West Sumatra is one of the provinces that has a high percentage of *stunting*. In 2019, the prevalence of *stunting* in West Sumatra was recorded at 27.47%. In 2020, due to the COVID-19 pandemic, national prevalence data was not available due to the Indonesian Nutrition Status Survey (SSGI). Instead, nutrition surveillance data from the ePPGM application was used. The prevalence of undernutrition including weight/height in West Sumatra in 2020 was 6.1%, a decrease from 2019.

Figure 2 Stunting by Age Group in Sumatera Barat Province 2021-2022

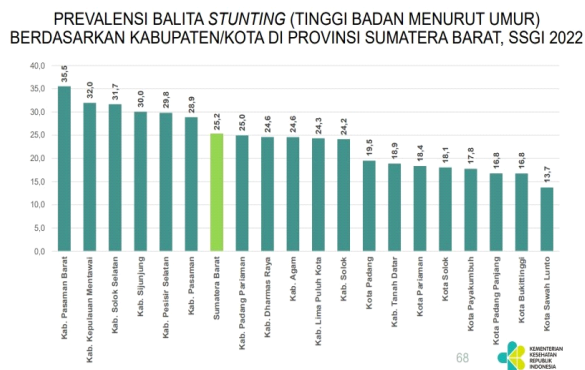


Source: Ministry of Health of the Republic of Indonesia. (2022). Indonesia Nutrition Status Survey (SSGI) 2022 results. Indonesian Ministry of Health. <https://ayosehat.kemendes.go.id>

Looking at Figure 2 from (Ministry of Health of the Republic of Indonesia, 2023), there

are differences in the prevalence of *stunting* across different age groups of children between 2021 and 2022. In children aged 0 months, in 2021 the prevalence of *stunting* decreased to 8.93% in 2022. Improvements were seen in 2021 in children aged 6-11 months, which decreased from 14.58% to 13.8% the following year. However, in some age groups of 24-35 months, the prevalence of *stunting* increased significantly from 25.31% in 2021 to 33.19% in 2022. This fluctuation shows that despite the decrease in some age groups, challenges in *stunting* control still remain, especially in certain age groups. This suggests that there is a need for further assessment of the success of policies and interventions that have been carried out, especially in identifying factors that cause an increase in the prevalence of *stunting* in certain age groups.

Figure 3 Prevalence of Stunting in Districts/Cities in Sumatera Barat:



Source: Ministry of Health of the Republic of Indonesia. (2022). *Indonesia Nutrition Status Survey (SSGI) 2022 results*. Indonesian Ministry of Health. <https://ayosehat.kemendes.go.id>

Figure 3 shows that *stunting* is a serious health problem in West Sumatra. Areas such as West Pasaman and Mentawai Islands require special attention to reduce the high prevalence of *stunting*. Conversely, regions with low *stunting* rates can serve as examples in implementing *stunting* control policies. More coordinated efforts between local governments and communities are needed to achieve more significant *stunting* reduction targets in the future.

Health problems related to *stunting* in the community are caused by a lack of knowledge about the causes and prevention of *stunting*, as well as the importance of balanced nutrition, especially in the first 1000 days of life

(HPK). The number of families who have not implemented good parenting and eating habits, cultural norms that affect awareness about nutrition have a negative impact on the nutritional status of children (Septivani et al., 2023). Based on (Regional Regulation of West Sumatra Province Number 6 of 2021 concerning the Regional Medium-Term Development Plan for 2021-2026., 2021) in the short term, *stunting* causes suboptimal physical growth, inhibited cognitive and motor development, and metabolic disorders. *Stunted* children tend to have smaller physical size. In the long term, *stunting* permanently affects intellectual capacity, disrupting the structure and function of nerves and brain cells that reduce learning ability when children reach school age. As a result, as adults, productivity, economic opportunities and quality of life decrease.

Stunting control policies in Indonesia, especially in West Sumatra, require a multisectoral approach involving various interventions. (Vaivada et al., 2020) state this includes improving parental education on parenting and balanced nutrition, accessibility of adequate health facilities and infrastructure for pregnant women and children in remote areas. According to (Roediger et al., 2020) improving sanitation infrastructure as a step to reduce infectious diseases. Also, (Wahyuningsih et al., 2022) stated that supplementary feeding, vitamin and mineral supplementation are important in specific nutrition interventions. These programs must be tailored to local needs. (Nurdin & Muhammad, 2022) argue that strong commitment and coordination from local governments as well as cross-sectoral cooperation are essential to ensure effective policy implementation and achieve significant results.

The West Sumatra Provincial Government published (West Sumatra Provincial Regulation Number 6 of 2021 concerning the Regional Medium-Term Development Plan for 2021-2026., 2021) which focuses on the vision and mission of provincial development. The main mission is to improve the quality of healthy, skilled, knowledgeable and competitive human resources (HR). One of the challenges is the high prevalence of *stunting*. To overcome this, district/city governments are implementing various policies to achieve a reduction in *stunting* prevalence. For example, the *stunting* reduction policy in Solok Regency is important in controlling *stunting* rates (Gusdiva

et al., 2024). The Convergence Action Policy for Accelerating *Stunting* Reduction in Sasak Ranah Pasisie District, West Pasaman Regency (Manggala & Suryapusita, 2024). These two areas focus on resource allocation, target setting, and evidence-based interventions. Government involvement is essential to ensure sustainability, mobilize resources, encourage collaboration between stakeholders, and increase community awareness in *stunting* control.

Stunting control policies must be accompanied by efforts to increase public awareness and understanding to encourage behavior change. Education and intervention programs have proven to be useful, as shown by research (Darmansyah & Yusran, 2024) in Puskesmas Kerinci Barat, which successfully reduced *stunting* rates through information campaigns for pregnant women and adolescent girls. The campaign was conducted through various media and supported by the commitment of various parties.

Behavioral changes that occur are the result of the policies implemented. The study (Rahmanindar & Harnawati, 2020) showed that the "Isi Piringku" program was effective in improving mothers' attitudes and behavior towards parenting malnourished toddlers. The counseling conducted succeeded in changing the mother's attitude from negative to positive. Research (Oktavilantika et al., 2023) found that health promotion can change individual and social behavior, with individual readiness playing an important role in the change process. Motivation for health behavior change comes from self-instruction, and is supported by learning theory, social cognitive, and stages of change able to underlie interventions that are relevant to *stunting* control policies.

Policy impact is the result or consequence arising from the implementation of a policy, which can be direct and indirect, and can be positive or negative. In line with this concept, the study shows that appropriate health policies and interventions can positively change individual attitudes and behaviors. This confirms the importance of impact in assessing whether or not the policy achieves its objectives. Therefore, understanding the impact of policies is important to ensure that the policies implemented are beneficial, real, and promote the desired development in the community.

Based on the background, it is necessary to know more about How Government Policy Impacts Changes in Community Behavior in *Stunting* Control? With the aim of analyzing the impact of West Sumatra's policies on behavior change in *stunting* control based on literature review. Thus, it is hoped that this scientific paper can contribute to sustainable development, especially in creating healthy, superior, skilled and competitive human resources through the direction of *stunting* control policies.

MATERIALS AND METHODS

This research was conducted to describe the impact of policies on changes in community behavior in *stunting* control, trying to solve problems related to reducing the prevalence of *stunting* in order to realize superior and competitive resources, in line with the first mission in the West Sumatra Province RPJMD 2021-2026. This scientific paper uses a descriptive qualitative method which is specifically carried out with a literature study approach. This research is not included in empirical studies, because it analyzes and synthesizes information and data from existing literature instead of primary data. The literature study or literature review was conducted in several steps.

First, conducting a literature review of the concepts of policy impact, and *stunting* control. Second, conduct a secondary data study. The types of secondary data used include one theoretical book to understand the theory, news related to the actual issue of *stunting* from two websites, 20 reference journal articles related to policy implementation, control, countermeasures, and prevention of *stunting*. Other types of secondary data used are the West Sumatra Province RPJMD document for 2021-2026 and (West Sumatra Governor Regulation Number 31 of 2023 concerning the Regional Action Plan for Sustainable Development Goals for 2023-2026.), in line with the RPJMD. Thus, in simple terms this paper is library research.

The literature study was used to comprehensively review various previous research findings. The literature study analyzes various policies or programs related to *stunting* control that have been implemented in the West Sumatra government area. As well as, the effect of these policies on community behavior in

stunting prevention and handling. The impact of *stunting* control policies in West Sumatra was analyzed using the AGIL *Framework* approach developed by (Talcott Parsons, 1964). The AGIL *Framework* explains how a social system can maintain balance and sustainability through four main functions namely *Adaptation* (A), *Goal Attainment* (G), *Integration* (I), and *Latency* (L).

The purpose of this method is to search, identify, and validate various related research variables, then synthesize the results empirically. This approach allows research to be conducted in a transparent, structured and more systematic manner, resulting in more comprehensive conclusions. This scientific paper seeks to identify changing behaviors and factors, both inhibiting and supporting in efforts to control *stunting* through implemented programs and policies.

The selection of literature using this approach is carried out using three stages, namely planning, implementation, and reporting. Planning begins with identifying problems and formulating objectives, namely determining the focus of the research and the questions to be answered through this approach. In this first stage, keywords were determined and methodical searches were conducted. The keywords in this research topic are policy impact, *stunting* policy implementation, *stunting* policy impact, *stunting* control program, *stunting* prevention, *stunting* prevalence. These phrases became the review reference used in searching for related literature on Google and Google Scholar.

Inclusion and exclusion criteria were used to limit the literature search to be able to explain the phenomenon factually and actually. Inclusion criteria included articles published between 2020-2024, written in Indonesian or English, focusing on the impact of *stunting* policy implementation. Exclusion criteria include articles that do not contain opinions or presentations, the focus is limited to *stunting* prevalence programs, the impact of *stunting* policies, and prevention programs in West Sumatra Province. After determining the criteria, the implementation stage is carried out by finding relevant articles, analyzing and synthesizing them. This stage is done manually until 20 relevant articles are obtained.

The last stage of this method is to interpret and draw conclusions on the impact of West Sumatra's policies on behavior change in *stunting* control in West Sumatra Province.

Overall, this research has a systematic stage that helps ensure stronger and more accountable conclusions.

RESULTS AND DISCUSSION

Stunting, understood as the condition of children due to chronic malnutrition with lower height than their age standards, is still a serious problem in West Sumatra. This condition can occur during pregnancy until the child is two years old, which causes growth, cognitive, motor, and metabolic disorders. In the long term, *stunting* results in decreased intellectual capacity, permanent brain neurological disorders, and increased chances of hypertension, non-communicable diseases such as diabetes, and heart disease. The prevalence of *stunting* in districts/cities in West Sumatra still exceeds WHO standards.

The problem of *stunting* cannot only be solved through nutritional interventions, but also requires changes in community behavior. As explained in *Behavior Change Theory*, the *Transtheoretical Model* ((Prochaska & Diclemente, 1983) Behavior Change Stages Model) by that behavior change occurs in several stages. Initially, people do not realize the dangers of *stunting* and the importance of a healthy lifestyle. Then the community understands the risk of *stunting* and considers changes, which are realized in small steps through diet and parenting. Finally, the community makes it a daily habit that is maintained in the long term and is sustainable. Behavior change takes time and a gradual strategy to be sustainable in reducing the prevalence of *stunting*. Where the preparation of *stunting* control policies, the programs launched need to target directly on the habits and lifestyle of the community, especially mothers and children. So that the impact of *stunting* control policies can have a holistic effect on behavior change.

To analyze the impact of *stunting* control policies in West Sumatra, the AGIL *Framework* developed by (Talcott Parsons, 1964) is a relevant approach. This analytical framework explains how a social system can maintain balance and sustainability through four main functions namely *Adaptation* (A), *Goal Attainment* (G), *Integration* (I), and *Latency* (L). Analysis was conducted on various relevant sources such as scientific articles, and reference journals.

Figure 1
Targets and Performance Indicators of West Sumatra Province RPJMD 2021-2026

Tujuan	Sasaran	Indikator Kinerja	Satuan	Kondisi Awal 2021	Target Capaian					Kondisi Akhir	OPD Penanggung Jawab
					2022	2023	2024	2025	2026		
Misi 1 : Meningkatkan Kualitas Sumber Daya Manusia yang Sehat, Berpengetahuan, Terampil, dan Berdaya Saing											
Mewujudkan sumber daya yang unggul dan berdaya saing IK: Indeks Pembangunan Manusia (IPM)	Menurunnya prevalensi <i>stunting</i>	Prevalensi <i>stunting</i> (pendek dan sangat pendek) pada balita	%	21,45	18,44	15,43	14,00	12,50	10,60	10,60	-Dinas Kesehatan -Dinas Bina Marga, Cipta Karya, Tata Ruang -Dinas Perkimtan -Dinas Sosial -Dinas Pendidikan -DP3AP2KB -Dinas Pangan -DPMD -Dinas Pertanian -Dinas Perternakan -DKP-Dinas Kominfo

Source: Regional Regulation of West Sumatra Province Number 6 of 2021 concerning RPJMD 2021-2026. West Sumatra Provincial Government. Page V.15

Figure 2

Vision, Mission, Goals, Objectives, Strategies and Policy Directions

Visi: Terwujudnya Sumatera Barat Madani yang Unggul dan Berkelanjutan			
Tujuan	Sasaran	Strategi	Arah Kebijakan
Misi 1: Meningkatkan Kualitas Sumber Daya Manusia yang Sehat, Berpengetahuan, Terampil dan Berdaya Saing			
Mewujudkan Kualitas Sumber Daya Manusia yang Sehat, unggul dan berdaya Saing	2. Menurunnya prevalensi <i>stunting</i>	1. Intervensi gizi spesifik yang ditunjukkan untuk menjangkau semua sasaran prioritas yakni ibu hamil dan ibu menyusui dan anak 0-23 bulan	<ol style="list-style-type: none"> 1. Pemberian makanan tambahan bagi ibu hamil Kurang Energi Kronik (KEK) 2. Pemberian suplementasi tablet tambah darah 3. Promosi dan konseling pemberian ASI eksklusif 4. Promosi dan konseling pemberian makanan bayi dan anak (PMBA) 5. Penatalaksanaan gizi buruk 6. Pemberian makanan tambahan pemulihan bagi anak gizi kurang 7. Pemantauan dan promosi pertumbuhan 8. Pemasarakatan Gemar Makan Ikan
		2. Intervensi gizi sensitif yang ditunjukkan pada sasaran penting yakni Remaja Putri dan wanita usia subur, dan anak berusia 24-59 bulan	<ol style="list-style-type: none"> 1. Pemberian suplementasi tablet tambah darah 2. Penatalaksanaan gizi buruk 3. Pemberian makanan tambahan pemulihan bagi anak gizi kurang 4. Pemantauan dan promosi pertumbuhan 5. Fasilitas pembimbingan, pengembangan, dan penguatan penyiapan pengasuhan 1.000 Hari Pertama Kelahiran (HPK)
		3. Intervensi gizi sensitif yang ditunjukkan pada kelompok umum yakni keluarga dan masyarakat umum	<ol style="list-style-type: none"> 1. Peningkatan penyediaan air bersih dan sanitasi 2. Peningkatan akses dan kualitas pelayanan gizi dan kesehatan 3. Peningkatan kesadaran, komitmen, dan praktik pengasuhan dan gizi ibu dan anak 4. Peningkatan akses pangan bergizi 5. Peningkatan pelayanan dasar anak terlantar di dalam panti 6. Penyediaan PSU Kawasan Permukiman yang aman nyaman berkelanjutan 7. Pemberdayaan KWT untuk mengembangkan potensi lahan pekarangan dalam rangka penyediaan dan diversifikasi pangan 8. Pemberdayaan kelompok-kelompok pengelolaan pangan lokal 9. Advokasi, edukasi dan sosialisasi konsumsi pangan Beragam, Bergizi, Seimbang dan Aman (B2SA) 10. Advokasi dan sosialisasi konsumsi pangan asal hewan yang Aman, Sehat, Utuh, dan Halal (ASUH) 11. Penanganan terhadap pelanggaran atas ketentuan perlindungan konsumen

		12. Penyelenggaraan gerakan pemberdayaan masyarakat dan kesejahteraan keluarga
	4. Peningkatan komitmen pemerintah daerah	<ol style="list-style-type: none"> 1. Penyusunan kebijakan tentang percepatan <i>stunting</i> ditingkat Provinsi 2. Pelaksanaan rembuk <i>stunting</i> pada tahap perencanaan program/kegiatan 3. Mobilisasi sumber daya dan mendorong partisipasi secara aktif dalam percepatan pencegahan <i>stunting</i> di kalangan masyarakat serta dunia usaha, universitas/akademisi, organisasi profesi, media, dan organisasi/kelompok masyarakat lainnya.
	5. Komunikasi perubahan perilaku untuk meningkatkan kesadaran dan pemahaman serta mendorong perubahan perilaku untuk mencegah <i>stunting</i>	<ol style="list-style-type: none"> 1. Melaksanakan kampanye perubahan perilaku bagi masyarakat umum yang konsisten dan berkelanjutan 2. Memperkuat komunikasi antar pribadi sesuai konteks sasaran melalui pengembangan pesan yang sesuai dengan kebutuhan kelompok sasaran Rumah Tangga 1.000 HPK, wanita usia subur, dan remaja putri untuk disampaikan melalui berbagai saluran, seperti Posyandu, kelas pengasuhan, kelas ibu hamil, pusat pembelajaran keluarga, kunjungan rumah, konseling pra-pernikahan, konseling reproduksi remaja 3. Memastikan advokasi berkelanjutan kepada pengambil keputusan 4. Mengembangkan kapasitas pengelolaan program, dengan memberikan pengetahuan dan meningkatkan kapasitas bagi penyelenggara kegiatan komunikasi perubahan perilaku yang efektif dan efisien
	6. Pelaksanaan aksi Konvergensi untuk mencegah <i>stunting</i> kepada sasaran prioritas melalui penyelenggaraan intervensi secara konvergen dilakukan dengan menyelaraskan perencanaan, penganggaran, pelaksanaan, pemantauan, dan pengendalian kegiatan lintas sektor serta antar tingkat pemerintahan dan masyarakat	<ol style="list-style-type: none"> 1. Memastikan konvergensi dalam perencanaan dan penganggaran program dan kegiatan untuk meningkatkan cakupan dan kualitas intervensi gizi prioritas 2. Meningkatkan kualitas pengelolaan layanan program untuk memastikan sasaran prioritas (Rumah Tangga 1.000 HPK) memperoleh dan memanfaatkan paket intervensi yang disediakan 3. Memperkuat koordinasi lintas sektor dan antar tingkatan pemerintah, sampai dengan desa untuk memastikan keselarasan penyediaan dan penyelenggaraan pelaksanaan program 4. Membagi kewenangan dan tanggung jawab pemerintah di semua tingkatan untuk menyelenggarakan konvergensi

Source: Regional Regulation of West Sumatra Province Number 6 of 2021 concerning RPJMD for 2021-2026. West Sumatra Provincial Government. Page. VI.3

Figure 3
 Regional Development Programs Accompanied by Indicative Ceiling for 2021-2026

Kode	Misi/ Tujuan/ Sasaran/ Program Pembangunan Daerah	Indikator Kinerja (Tujuan/ Impact/ Outcome)	Satuan	Kinerja Awal RPJMD (2021)	Capaian Kinerja Program dan Kerangka Pendanaan										Kondisi Akhir	Perangkat Daerah Penanggung Jawab
					Tahun 2022		Tahun 2023		Tahun 2024		Tahun 2025		Tahun 2026			
					Target	Rp	Target	Rp	Target	Rp	Target	Rp	Target	Rp		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)
	Sasaran 2: Menurunnya Prevalensi Stunting															
1.02.02	PROGRAM PEMENUHAN UPAYA KESEHATAN PERORANGAN DAN UPAYA KESEHATAN MASYARAKAT	Cakupan Pelayanan Ibu Hamil (K4)	%	73,8	74,8	160.4 73.17 4.000	76	162.521 277.00 0	78	166.515.6 51.00	80	172.405.6 92.00	82	180.664.13 1.000	82	DINAS KESEHATAN
		Insidensi Tuberkulosis (per 100.000 Penduduk)	Per 100.000	232	231		211		190		190		190		190	DINAS KESEHATAN
		Jumlah daerah terpencil yang melaksanakan pelayanan kesehatan bergerak (PKB)	daerah	2	2		2		2		2		2		2	DINAS KESEHATAN
		Jumlah Kabupaten/Kota Sehat Kategori WISTARA	Kabupa ten/ Kota	4	4		6		6		8		8		8	DINAS KESEHATAN
		Jumlah Kabupaten/Kota yang mencapai eliminasi malaria	kabupat en/ kota	17	17		18		18		18		19		19	DINAS KESEHATAN
		Presentase cakupan kepersertaan Jaminan Kesehatan Nasional untuk PBI JK daerah	%	34,4	35		37		38		39		40		40	DINAS KESEHATAN
		Presentase Kab/Kota dengan Ketersediaan Obat dan Vaksin esensial	%	90	92		94		96		98		100		100	DINAS KESEHATAN
		Presentase Kabupaten/Kota yang melakukan pencegahan perokok usia 10-18 tahun	Kabupa ten/ kota	9	8,9		8,8		8,7		8,6		8,5		8,5	DINAS KESEHATAN
		Presentase Kunjungan Neonatal Lengkap (KNL) sesuai standar	%	78,6	79,6		81		83		85		87		87	DINAS KESEHATAN
		Presentase rumah sakit yang direkomendasikan untuk penilaian akreditasi	%	85,53	86,84		88,16		89,47		90,79		92,11		92,11	DINAS KESEHATAN

Source: Regional Regulation of West Sumatra Province Number 6 of 2021 concerning RPJMD for 2021-2026. West Sumatra Provincial Government. Page. VI.3

Figure 4

Alignment of Support for Provincial and Regency / City Development Priority Programs to National Priority Programs

No	Kode (PN/PP)	Prioritas	Indikator	RPJMN Tahun 2022-2024					RPJMD PROVINSI							
				Target					Bidang Urusan Pemerintahan Dan Program Prioritas Pembangunan	Indikator Kinerja Program (Outcome)	Target					
				2020	2021	2022	2023	2024			2021	2022	2023	2024	2025	2026
3		Peningkatan Akses dan Mutu Pelayanan Kesehatan	Prevalensi stunting (pendekatan sangat pendek) pada balita (persen)	24,1	21,1	18,4	16	14	Program Pemenuhan Upaya Kesehatan Perorangan dan Upaya Kesehatan Masyarakat	Prevalensi Stunting (Pendek dan Sangat Pendek) Pada Balita (persen) (%)	21,1	18,44	15,43	14	12,5	10,6

Source: Regional Regulation of West Sumatra Province Number 6 of 2021 concerning RPJMD 2021-2026.

Based on Figure 1 (targets and performance indicators of the RPJMD of West Sumatra Province in 2021-2026), Figure 2 (vision, mission, goals, objectives, strategies and policy directions), Figure 3 (regional development programs accompanied by indicative ceilings for 2021-2026), and Figure 4 (alignment of support for provincial and district / city development priority programs to national priority programs) discuss targets and performance indicators, especially in improving the quality of human resources in the field of health and nutrition. The four functions of the AGIL *Framework* must run in a balanced manner so that government policies and programs in the field of public health, such as the study of controlling the prevalence of *stunting*, can be implemented effectively and can produce the expected *outcomes*.

Adaptation (A) refers to the system's ability to adjust to the environment and manage resources. In terms of *stunting* control, the policies implemented must consider the social, economic and cultural conditions of the community. *Stunting* reduction policies include various interventions that focus on specific and sensitive nutrition. Specific nutrition interventions include support for pregnant women, breastfeeding mothers, and children 0-23 months, such as supplementary feeding (PMT) for pregnant women with Chronic Energy Deficiency (SEF), exclusive breastfeeding promotion and counseling, blood supplementation tablets, and Infant and Young Child Feeding (IYCF). In addition, malnutrition management and supplementary feeding for undernourished children are also carried out, including growth monitoring and promotion and the promotion of the Gemar Makan Ikan movement. The most impactful policies are those that encourage changes in community behavior, such as convergence actions.

The implementation of convergence actions involves public awareness and understanding of the importance of *stunting*

prevention. The implementation of this action, which requires alignment of budgeting, planning, implementing, controlling and monitoring activities between levels of government and the community, is also an important element in efforts to prevent *stunting* in the community. There are several activities found in the implementation of this action in West Sumatra.

First, posyandu activities are routine programs in each district/city to prevent and manage *stunting*. At posyandu, weighing and measurement of toddlers, examination of pregnant women, and provision of blood supplement tablets (TTD) for pregnant women are carried out. Data on children under five who are indicated to be *stunted* are then reported to the Puskesmas through the nutrition manager (Indah & Yusran, 2022). *Second*, children who are indicated to be *stunted* are reported to the government for follow-up, including budget allocation. The field team reviews the home conditions and parenting patterns of the *stunted* children and interviews the parents. If the family has good economic conditions, the Puskesmas and midwives provide counseling on a balanced diet and parenting. If the family is less well-off, PMT assistance such as milk, green beans, and bread is distributed by the Puskesmas or nagari. *Third*, to support *stunting* prevention, the government built Healthy Village Houses (RDS) as health service centers with nutrition posts and toddler facilities.

Factors such as education level, access to health facilities, and dietary habits are important aspects for the policy to be accepted and run well. It was found that the factors that influence the effectiveness of *stunting* prevention policies in West Sumatra include several important aspects. Support from health workers plays a role in increasing awareness of the community's understanding of the importance of balanced nutrition. In addition, the education level of the community also

affects their ability to understand and apply knowledge about nutrition. Local culture and norms also play a role, as policies must be adapted to the existing cultural context in order to be accepted and implemented. There are several factors that inhibit and encourage behavior change.

Barriers include people's lack of understanding of the importance of balanced nutrition, limited access to health facilities, and cultural resistance that may hinder policy implementation if it is not adapted to local norms. Conversely, drivers of behavior change include education through campaigns that are effective in promoting public awareness, involvement of community leaders who can influence public views, and community-based intervention programs that help improve access to health services and people's understanding of the importance of balanced nutrition.

Goal Attainment (G) emphasizes the importance of setting and achieving goals in the social system. The policy goal of *stunting* control is to increase healthy, knowledgeable, skilled, and competitive human resources, with the main target of reducing the prevalence of *stunting* in children under five. Performance indicators focus on the prevalence of *stunting* (short and very short), which in 2021 reached 21.45%. The reduction target is set to 18.44% in 2022, 15.43% in 2023, 14% in 2024, 12.50% in 2025, and 10.60% in 2026. The main person in charge is the Health Office and other related agencies. The RPJMD of West Sumatra Province aims to improve the quality of human resources, especially in the field of health and nutrition, with a focus on reducing the prevalence of *stunting* in children under five years of age. This target is measured through an indicator of *stunting* prevalence (short and very short) in children under five, which is used to monitor progress in achieving this goal. Therefore, a policy evaluation is needed to assess whether the interventions

have been successful in achieving the set targets.

The next function, **Integration (I)**, relates to coordination between elements in the social system to ensure there are no conflicts that hinder the achievement of goals. In *stunting* control, collaboration between the government, health workers, families, and the community is the key to policy success. The synergy between various parties in community education, providing nutritional assistance, and increasing access to health services must be strengthened. These specific nutrition interventions are designed to reach priority groups, namely pregnant women, breastfeeding mothers, and children aged 0-23 months. Meanwhile, nutrition-sensitive interventions are aimed at important groups such as women of childbearing age, adolescent girls, and children aged 24-59 months, as well as general groups such as families and the wider community. To strengthen the success of this policy, it is necessary to increase local government commitment and communication aimed at providing public understanding of the importance of *stunting* prevention and control.

The implementation of *stunting* control policies in West Sumatra Province still faces challenges, with the prevalence of *stunting* reaching 25.2%, higher than the WHO standard of 20%. Despite various efforts, this policy has not been fully successful in reducing *stunting* rates. Several studies show that the policy has not been implemented optimally, such as in Padang City (Febrian & Yusran, 2021); (Iqbal & Yusran 2021); (Media & Elfemi, 2021), Solok Regency, South Solok Regency (Sari & Yusran, 2022). And Padang Pariaman (Yasri & Yusran, 2022). In Padang City, the coordination of *stunting* prevention has not been aligned with the policy direction, and policy convergence actions are still not well implemented. According to (Iqbal & Yusran, 2021) this is because the anticipation of *stunting* still focuses on the

Health Office, which should involve collaboration between various parties. This research also highlights that a comprehensive approach is needed in *stunting* control efforts.

Programs at the village/nagari level, such as posyandu, PMT, and RDS development still require active participation from the community. As emphasized at the beginning of the discussion, the most impactful policies are those that are able to change community behavior in diet, hygiene, and childcare. Specific nutrition interventions aimed at pregnant and lactating women, as well as children 0-23 months, can influence community behavior regarding diet and childcare. In addition, behavior change communication policies are effective in increasing public understanding and awareness of balanced nutrition and parenting, thus encouraging behavior change to prevent *stunting*.

Finally, **Latency (L)** focuses on maintaining social patterns and values in the long term. Changes in community behavior, especially in eating patterns, parenting patterns, and awareness of the importance of balanced nutrition, are crucial factors in policy sustainability. Therefore, long-term education and socialization are needed so that healthy living practices can be embedded in people's lives. For example, educational campaigns involving community leaders, such as the "Balanced Nutrition for Healthy Children" program and the "Eat Balanced, Live Healthy" campaign, have successfully increased public awareness about the importance of balanced nutrition. These programs use interesting and easy-to-understand educational materials, which are effective in changing people's behavior related to diet, hygiene, and childcare. Through efforts like this, the government and stakeholders can continue to encourage increased public awareness and understanding in *stunting* prevention.

Through the AGIL *Framework*, it can be understood that the effectiveness of

stunting control policies depends on the extent to which policies are able to adapt to community conditions, have clear targets, involve various parties in their implementation, and encourage sustainable behavior change.

The West Sumatra Provincial Government has responded to this problem with *stunting* control and prevention policies. So it is known that health policy plays an important role in several aspects. First, it encourages public awareness about proper diet and parenting. Second, encouraging changes in community behavior to prevent *stunting*. Third, expanding community access to health services, such as posyandu and Rumah Desa Sehat (RDS). Posyandu, as a routine activity in each district/city, conducts weighing and measurement of toddlers and provides blood supplement tablets to pregnant women. Meanwhile, the RDS functions as a health information and service center, with nutrition posts and toddler posts serving the community.

The policy to reduce the prevalence of *stunting* in children under five has a positive impact on changes in community behavior. It increases awareness of the importance of nutrition for children's health, community participation in nutrition and health programs, and access to health services. The impact is also seen in the improvement of quality of life, especially for children. Nutrition-specific interventions and behavior change communication play a role in developing community knowledge about the importance of balanced nutrition. In addition, the provision of PMT (Supplementary Feeding) helps improve diets, especially for pregnant women and children under five years of age, thus improving nutritional quality.

CONCLUSIONS AND IMPLICATIONS

Stunting is a serious health issue in West Sumatra, with the prevalence of *stunting* reaching 26.4% by 2022. *Stunting* control and handling policies have shown a

positive impact on changes in community behavior, especially in increasing awareness of the importance of balanced nutrition and healthy lifestyles. Various programs have been carried out such as routine posyandu in each district/city, reporting children who are indicated to be *stunted*, PMT, and the establishment of RDS contribute to building community understanding of the importance of nutrition and child health.

Based on analysis using the AGIL *Framework*, this policy supports community *adaptation* to specific and sensitive nutrition stunting interventions, such as the promotion of exclusive breastfeeding and nutrition supplementation. From the aspect of *Goal Attainment*, this policy gradually reduces the prevalence of stunting according to the RPJMD target. In addition, coordination between stakeholders (*Integration*) is a major factor in policy effectiveness with cross-sector synergy challenges. In the long term (*Latency*), the policy helps form new norms and habits in diet, parenting, and public awareness of the importance of balanced nutrition.

However, policy effectiveness still faces obstacles, such as less than optimal coordination between stakeholders, policy convergence actions that are not fully aligned with stunting control objectives, and inhibiting factors such as limited access to health facilities, lack of community understanding and cultural resistance. Nevertheless, effective educational campaigns, involvement of community leaders, and community-based intervention programs encourage behavior change.

Thus, stunting control efforts in West Sumatra need to be strengthened through increased coordination and collaboration across sectors, as well as strengthening community-based programs to increase community participation in the success of stunting control policies in a sustainable manner.

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