

TRENDS IN STUNTING PREVALENCE REDUCTION: AN EXAMINATION OF DATA TOWARD ACHIEVING THE 2024 TARGET IN INDONESIA

Bambang Soetono

Universitas Muhammadiyah Jakarta

Ade Siti Barokah

Universitas Muhammadiyah Jakarta

Corresponding Authors:

bambang.soetono@student.umj.ac.id

ade.sitibarokah@student.umj.ac.id

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Abstract: *This study employs a qualitative approach through purposive documents and literature reviews to analyze the trends in stunting prevalence reduction in Indonesia. With a specific focus on achieving the targeted 14% prevalence reduction by 2024, the research explores the current trajectory, underlying conditions, and challenges influencing this critical public health goal. Our findings indicate a promising trend toward the envisioned 14% reduction in stunting prevalence by the specified year. However, the analysis also reveals a nuanced landscape characterized by various conditions and challenges that could potentially impede the realization of this target. Through a meticulous examination of available data, this study sheds light on the multifaceted factors affecting the trajectory, providing valuable insights for policymakers, practitioners, and researchers engaged in addressing malnutrition issues in Indonesia. As the nation strives to overcome the complexities surrounding stunting, the outcomes of this research contribute to a nuanced understanding of the ongoing efforts, offering crucial considerations for the refinement and implementation of targeted interventions to ensure sustainable progress toward the 2024 goal.*

Keywords: *stunting, stunting prevalence, data, data trend.*

1. Introduction

Stunting is a type of chronic malnutrition that affects children under five years old. Small stature or length relative to age are its physical characteristics. Growing up stunted has a severe impact on one's growth, health, and finances both now and in the future. In addition to having delayed cognitive and language development and higher rates of illness and death, stunted children also have higher medical costs associated with their care. Chronic non-communicable diseases in adults, low stature in both parents, poor reproductive health, and inadequate body composition are among the long-term health implications of stunting. Meanwhile, reduced learning ability, unrealized potential labor capacity, and productivity are all indicators of weaker developmental and economic capability. Stunting is therefore considered a major global health problem and the focus



of international attention for the global reduction objective because of the severity of its repercussions.

The Government of Indonesia takes into serious consideration initiating and dedicated to tackling this problem. The National Medium-Term Development Plan (RPJMN) year 2020-2024 as legalized by Government Regulation No. 18 of 2020 clearly states that the target of the stunting prevalence in Indonesia in 2024 is 24%.

For this commitment, the Indonesian government is deserving of appreciation. The National Strategy to Accelerate Stunting Prevention was signed into law in 2021 as Presidential Regulation No. 72 of 2021. The policy allocates around \$3.9 billion annually, along with 23 ministries, towards the coordination of nutrition activities aimed at addressing the various underlying causes of stunting. Roughly 3.9 million women and 10.6 million children under the age of two have benefited across more than 75,000 villages since the strategy's package of activities was implemented in 2017. The national stunting rate fell by an astounding 24.4% from 30.8% in 2018 to 24.4% in 2021, a further 21.6% in 2022, (Mamta Murti, 2022).

In order to continue combat stunting, Indonesia has launched a number of focused programs in compliance with The Presidential Regulation, which seeks to hasten the decrease of stunting. These programs concentrate on proximate factors, such as teenagers, expectant mothers, babies, toddlers, and nursing mothers, that are highly associated with stunting at various life stages. Additionally, there is currently an inter-sectoral program in place that takes a sensitive approach to addressing distal determinants like healthcare, education, food systems, socioeconomic challenges, and infrastructure and services related to water and sanitation, (Gusnedi et al., 2023).

In 2020, about 22% of the population, or 149.2 million children under the age of five, would still be stunted, according to the World Health Organization (WHO). Most stunted children live in Asian and African countries; about one-third of all stunted children live in African countries, while around half of all stunted children live in Asian countries. In Indonesia, the size of the issue is comparable. The government still has to work toward achieving the national developmental goals, even if the incidence of stunting has decreased from 30.8% to 24.4% between 2018 and 2021. By 2024, the prevalence of stunting is predicted to reach 14%. Moreover, the country's provinces exhibit notable differences in childhood stunting rates, which range from 10.9 to 37.8 percent. An even more notable discrepancy was also seen, (Gusnedi et al., 2023)

There are many academic works conducted to document, learn, and analyze the strategy, efforts, and policies to tackle the stunting problems globally and in particular in Indonesia. However, there is not any study that learn the trends of different findings from different academic and data documentation. To learn about the trend of the captured data and foresee whether the Indonesian target potentially be reached or not, this study is being conducted.

2. Methods

This is a qualitative approach study through purposive documents and literature reviews to analyze the trends in stunting prevalence reduction in Indonesia. With a specific focus on achieving the targeted 14% prevalence reduction by 2024, the research explores the current trajectory, underlying conditions, and challenges influencing this critical public health goal. The source of the data is based on the research which collected through different sources and mainly from available online data information of different agencies of government, non-government, international organizations and local governments. The information in the form of previous various studies and researches, reports, policies and other relevant information then be systematically reviewing analysis to provide a comprehensive understanding of the current trends. The holistic information then be presented in descriptive way to show the development of the key issues to objectively determine the trends to justify that the goal for the stunting prevalence reduction is supported with the valid data.

3. Literature Review

There are two studies that are quite relevant to this paper, namely the study *Aiming High: Indonesia's Ambition to Reduce Stunting* by the World Bank, launched in 2018, (Word Bank, 2018) and the *Review of Stunting in Indonesia* study which provides an overview of the policies that have been implemented by the Indonesian government based on the RPJMN in stunting prevention (Anggraini & Romadona, 2020).

In the 1980s, Indonesia set an example for other countries in their efforts to reduce high levels of malnutrition. At that time, Indonesia had started nutrition programs and surveillance at the village level using child health and weighing posts, or Posyandu. In the following decades, there were some successes: small-scale and large-scale interventions that reduced malnutrition. At the same time, there were setbacks, loss of attention, other priorities, decentralization, weak management, and poor governance. In August 2017, the Indonesian government launched a new strategy to accelerate stunting reduction. This book examines what it will take to take that strategy - the National Strategy for Accelerating Stunting Prevention (StraNas Stunting) 2018-2021 - from vision to reality. The study reviews Indonesia's ambitious reforms and goals to reduce stunting.

This research report published by the World Bank examines the government's plans to raise awareness of the economic, social and personal impacts of stunting, to ensure a truly national, multi-sectoral effort to address stunting at scale in a coordinated and cohesive manner in communities across Indonesia. The book chronicles past successes and setbacks, and draws lessons from them for the future.

This Review of Stunting in Indonesia study notes that failure to reach one's growth potential - caused by chronic undernutrition and recurrent illness during childhood. This reflects the cumulative effects of chronic undernutrition over 1,000 HPK, and is also linked to lack of education, poverty, poor health, and greater susceptibility to non-communicable diseases, as well as indicating a poor quality of life that negatively impacts the nation's human capital. Globally, Indonesia is ranked fifth in terms of stunting. According to the Global Nutrition Report 2014 (based on data from 117 countries),

Indonesia is one of 17 countries with three major malnutrition problems: stunting, wasting and obesity. The 2018 National Health Research (Riskesdas), shows that 30.8% of children under five in Indonesia are stunted, which is a decrease compared to the 2013 Riskesdas data of 37.2%. In 2017, Indonesian Vice President Jusuf Kalla launched the National Strategy to Accelerate Stunting Prevention. The strategy, supported by the World Bank, builds on Indonesia's experience and global lessons, particularly Peru's success in halving stunting rates in just seven years.

4. Result

4.1. Global picture

The most recent estimates of child malnutrition for the years 2000–2022 were published in global and regional publications by UNICEF, WHO, and the World Bank Group in May 2023. To allow users to examine global and regional estimates of the prevalence and number affected by stunting, overweight, wasting, and severe wasting over the whole time-series (2000–2022), a set of interactive web dashboards has been constructed. To provide these statistics, various regional and income group nation classifications are used by the World Bank Group, UNICEF, WHO, and other organizations. According to the report, there is a favorable trend in lowering the prevalence of stunting worldwide, (UNICEF/WHO/WORLD BANK, 2021).

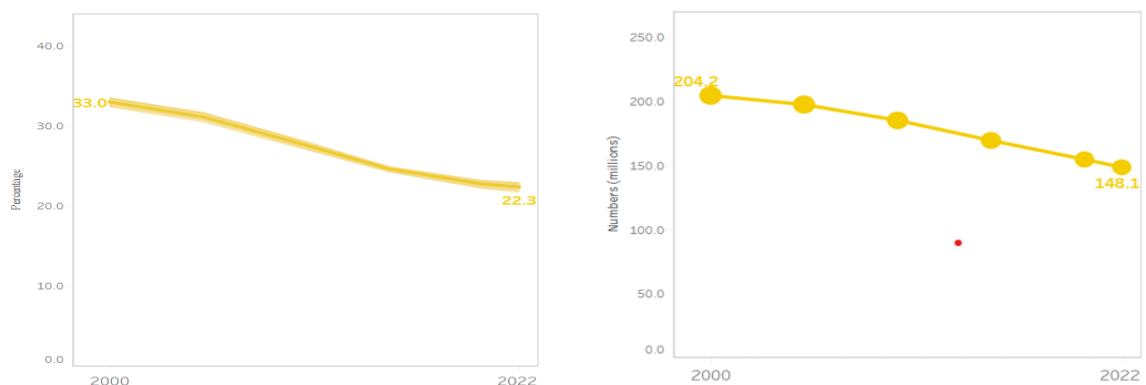


Figure 1 Percentage and number (millions) of Stunted Children age under five

Chronic malnutrition and recurrent illness in childhood are the main causes of stunting, which is the inability to grow to one's full potential. It can cause lifelong harm and irreversibly impede a child's physical and cognitive development. Approximately 25% of children under five worldwide suffer from malnutrition. Stunting rates in Indonesia are shockingly high. According to the 2013 National Health Survey, approximately 9 million children in Indonesia under the age of five, or 37% of all children, were stunted, (World Bank, 2018)(World Bank, 2018a).

To solve the issue, pregnant women and children under two must access critical services concurrently. A birth certificate to guarantee system registration, a foundational vaccine, breastfeeding, a variety of diets, good drinking water and sanitation, early childhood education, and assessments of food insecurity in their community are some of

the services offered. There is not much convergence of these essential services in Indonesia. Indonesia aims to create a national strategy that will enhance all of these services and encourage the convergence of local, regional, and national activities. With an anticipated budget of \$14.6 billion USD and 22 ministries, it promises to converge essential nutrition policies. The strategy's target districts and cities will rise from 100 in 2018 with high stunting rates to 160 in 2019, 390 in 2020, and eventually all 514 districts and cities by 2021, (Word Bank, 2018).

Stunting, or being underweight for one's age, is an indication of a longer-term chronic malnutrition. It is caused by a combination of factors, including diet, that hinder children's physical and mental growth and increase their chance of dying from common infections. Stunting in infancy and other forms of malnutrition may also increase a child's later-life risk of obesity and non-communicable diseases (NCDs). The predicted number of stunted children under five worldwide fell from 33.0 percent (204.2 million) in 2000 to 22.3 percent (148.1 million) in 2022, as shown in Figure 1, (FAO et al., 2023).

The distinct paths clearly show that nearly all of the advancements in the battle against hunger are anticipated to occur in Asia, where it is predicted that by 2030, there would be just 242 million undernourished individuals, down from the present 402 million, (FAO et al., 2023; Burki, 2022).

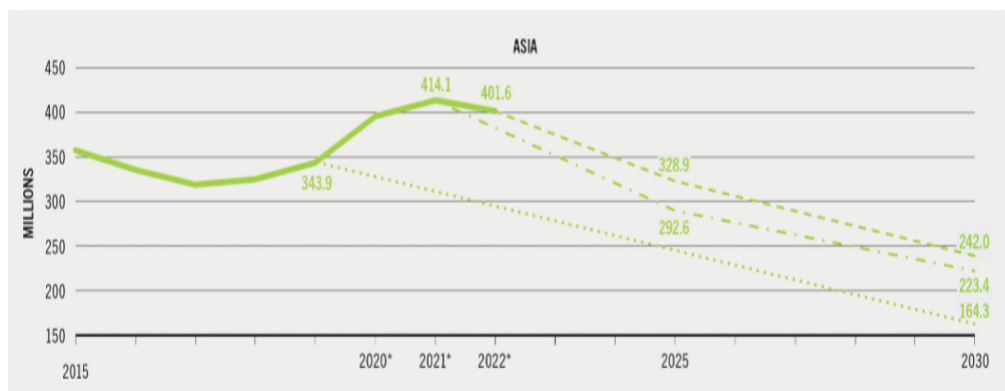


Figure 2 Projected Numbers of Undernourished in Asia

4.2. Indonesian context

The goal of the 2017–2021 National Strategy to Accelerate Stunting Prevention (StraNas Stunting) is to lower the high rate of stunting in Indonesia by improving federal, regional, and local government coordination and incentive alignment. Its objectives include scaling up successful initiatives and strategically allocating resources to the areas that need them the most. According to Word Bank (2018), the government would strategically deploy monies in an evidence-based manner to improve maternal and child care practices, food security, sanitation, and health care.

The comprehensive implementation of Indonesia's ambitious StraNas Stunting program might potentially avert the stunting of two million young children between 2018 and 2022. Furthermore, the World Bank exercises a projection as shown in the figure below, (Word Bank, 2018).

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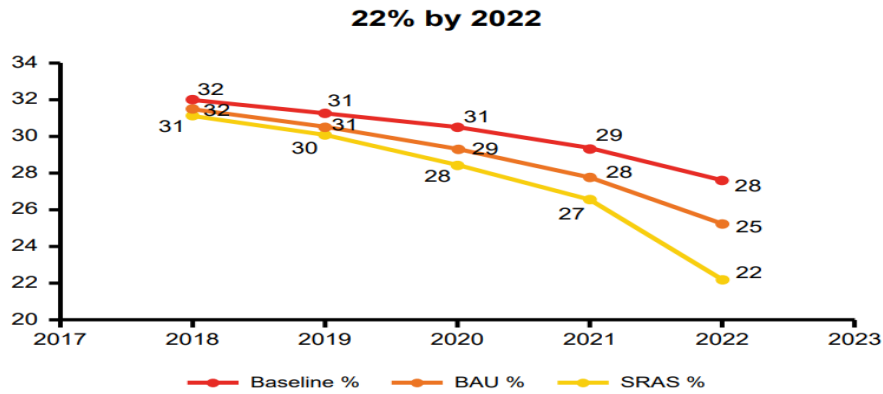


Figure 3 Projections of stunting in Indonesia, 2018-2022

A cautious scenario is referred to as the baseline; a more realistic or business-as-usual scenario is known as BAU; an accelerated or more optimistic scenario is known as StraNas Stunting, which reflects the government's Stunting Reduction Acceleration Strategy.

The Indonesian Ministry of Health continues to conduct surveys related to malnutrition impacting stunting. The surveys show that the stunting prevalence reduction happens year by year. The Research and Development of the Ministry summarize the stunting prevalence as follows, (Kemenkes RI, 2021; Ministry of Health, 2022)

Table 1 Summary of Nutrition Status Survey

NO	Year	Survey	Stunting Prevalence
1	2007	Riskesdas*	36,8 %
2	2010	Riskesdas	35,6 %
3	2013	Riskesdas	37,2 %
4	2018	Riskesdas	30,8 %
5	2019	SSGBI**	27,7 %
6	2020	Prediction	26,9%
7	2021	SSGI***	24,4%
8	2022	SSGI	21,6%

*National Basic Health Survey (Riskesdas)

** Survey of Indonesian Child under 5 years Nutrition Status (SSGBI)

***Survey of Indonesian Gizi Status (SSGI)

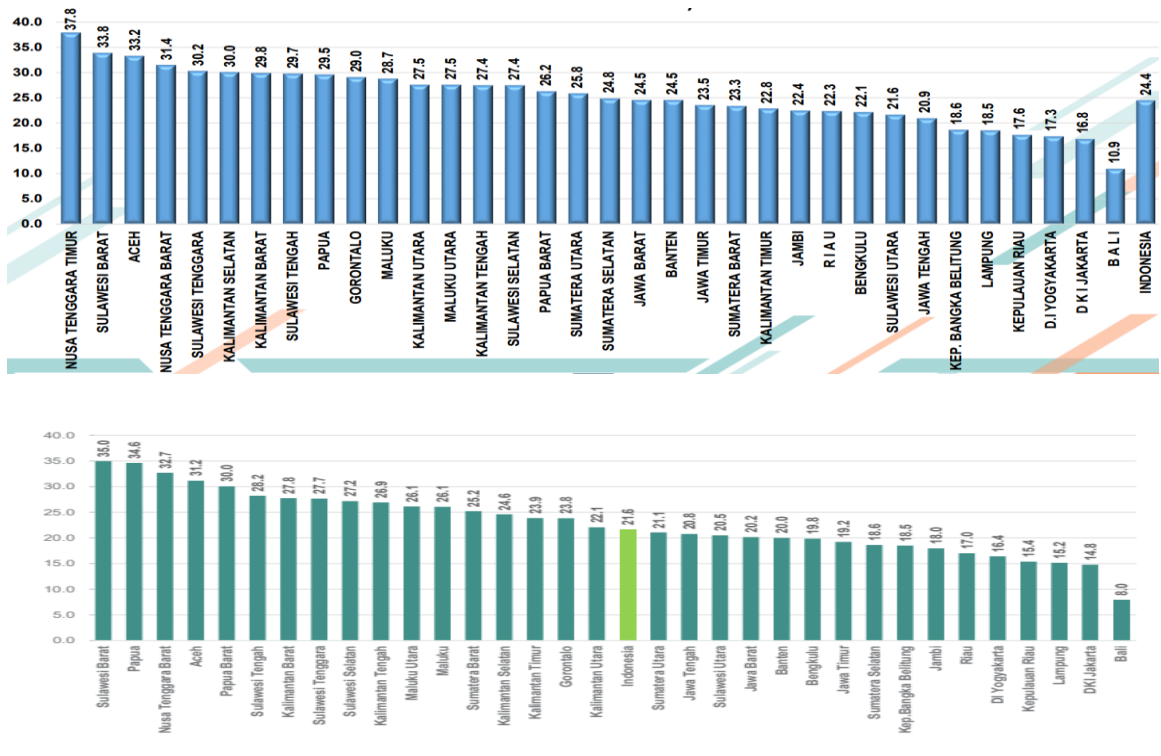


Figure 4 Stunting Prevalence Trend by Province 2021 and 2022

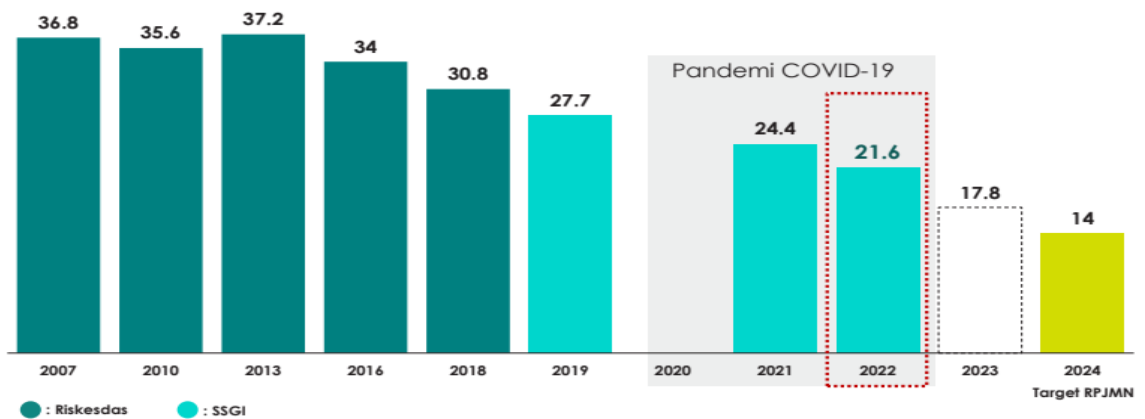


Figure 5 Stunting Prevalence Reduction Trend 2007-2022, Projection 2023 and Target 2024

As can be learned from figures above, in Indonesia, the problem's scope is somewhat comparable. While the frequency of stunting has decreased from 36.8% to 21.6% between 2007 and 2022, the nation still has to make progress toward achieving the national developmental goals, with a 14 percent prevalence predicted by 2024. Furthermore, the frequency of childhood stunting varies greatly amongst the regions of the nation, ranging from 8.0 to 35.0 percent. Within the districts, where the frequency of stunting ranges from 4.8 to 54.5 percent, this variation is even more noticeable, (Kemenkes, 2022).

A comprehensive review of the research and surveys conducted over the past few decades has been done in order to better understand the profile of nutritional status and



risk factors of childhood stunting in Indonesia. The results showed that moms, kids, homes, and communities are among the factors linked to childhood stunting in Indonesia. Stunted female low birth weight babies are more likely to have not had their worms removed. Premature birth, mother age of thirty years or above, and fewer than four prenatal care visits were all consistently associated with stunting. Stunting was primarily caused by three household and community risk factors: living in rural areas, facing food instability, and lacking access to clean, drinkable water. Stunting and child, mother, and household risk factors are significantly correlated, thus comprehensive and integrated nutrition therapies need to be strengthened, (Gusnedi et al., 2023).

4.3. Economic Development and Stunting

The fifteen years of steady economic growth in Indonesia have contributed to the country's decreased poverty and burgeoning middle class. Only the richest 20% of the population has profited from growth during the last ten years, with the remaining 205 million individuals, or 80% of the population, falling behind. Inequality is on the rise in Indonesia, surpassing that of several other East Asian countries, due to widening gaps in living standards and a growing concentration of wealth in the hands of a small number of individuals, (Kustanto, 2021).

Even with Indonesia's twenty years of fast economic expansion, many undernourished children and significant rates of poverty persist in many of the country's areas. This statistic demonstrates that improvements in public welfare and nutrition are not keeping up with the acceleration of economic expansion and advancements in the physical sector. Economic growth cannot be viewed as the ultimate goal in and of itself.

A study was carried out in 34 provinces to confirm the link between poverty, economic growth, and stunting, (Kustanto, 2021). In this study, it found that, firstly, there is evidence linking the incidence of stunting to both long-term economic growth of 0.02% and directional causality from poverty. In Indonesia, efforts must be directed on stunting reduction in every province. Stunting is insufficient on its own since it won't make a big difference. Stunting prevention initiatives need to use a multi-sectoral, integrated, and convergent approach. It is imperative for the government to guarantee collaboration across all ministries and institutions, academic institutions, professional associations, civil society organizations, business enterprises, and the media in order to expedite the prevention of stunting in Indonesia. Coordinated and integrated efforts to prevent stunting are needed at all levels of government, from the local to the village. Secondly, long-term economic growth and the prevalence of stunting demonstrate a causal link between poverty and 0.06%. Reducing poverty through initiatives to boost income and cut back on community spending, as well as by enhancing and growing social security and support programs. Lastly, the study finds that the incidence of poverty and stunting has a long-term, 0.57% directional causal link with economic growth. Growth in the economy coupled with improved welfare and socioeconomic development can lower poverty, and investments in food and healthcare facilities can lower the incidence of stunting in Indonesia.

4.4. Public Expenditure for Stunting Prevention at Regional Level

The World Bank and SMERU collaborated to conduct a study analyzing public investment for stunting prevention at the regional level: the determinants influencing stunting prevalence variance in six kabupaten/kota in Indonesia, (SMERU, 2019). A variety of thoughtfully planned and focused interventions were part of the stunting prevention initiatives. The whole basic immunization; iron folic acid supplements (TTD) for expecting mothers; vitamin A for toddlers; and zinc for diarrhea therapy were the five particular therapies that were the focus of this study. The study was carried out in six districts (Kabupaten/Kota) in November and December of 2018. According to Riskesdas (2013), Kabupaten Brebes, Kabupaten Lampung Tengah, and Kabupaten Sumba Tengah were among the 20 Indonesian districts with the greatest frequency of stunting; Kota Surakarta, Kabupaten Belitung, and Kabupaten Klungkung had the lowest prevalence.

The study highlights the close influence of socioeconomic status and stunting prevalence status. Based on Riskesdas (2013), the stunting rate in six case study districts revealed Indonesia's high stunting rate. The high stunting group's regions had a very high prevalence of stunting. Furthermore, there was a relatively high prevalence of stunting in the areas with low stunting levels. Sumba Tengah had the highest prevalence of stunting (64%), while Klungkung had the lowest prevalence (19%) of any case study region. Nevertheless, Riskesdas 2018 preliminary results indicated a sharp decline in the prevalence of stunting in areas with high levels of stunting. On the other hand, in places where stunting was not as common, there was a trend for it to increase.

Compared to communities in other regions, the people living in high stunting regions faced additional barriers to a good quality of life and health. These areas experienced greater rates of unemployment and poverty. These areas also have poorer educational performance and less access to essential services and amenities, such as healthcare with minimal stunting a tendency to rise.

The study also found that local government spending allocation for stunting-related actions were quite minimal on average, less than 2% of all local government spending. expenditures from 2015 to 2017, with Sumba Tengah having 3.5% of total expenditures. Spending on stunting was allocated to a number of industries. At up to 45%, only Brebes had the highest budget allocation in the health sector connected to stunting. The remaining five studies, Public works and housing received the majority of funding connected to stunting in various regions, ranging from 32% to 67%, and just from 5% to 30% for the health industry.

Although the amount spent by the governments in regions with high levels of stunting tended to rise for each recipient of stunting, the nominal value remained comparatively lower than that of regions with low levels of stunting. Sumba Tengah was given an exemption, despite being the location where the most money was allocated for each stunting objective. There was a discernible rise in per capita spending on stunting intervention in Klungkung, Brebes, Lampung Tengah, and Sumba Tengah from year to year.

The majority of spending connected to stunting from 2015 to 2017 was allocated to sensitivity intervention, with an average absorption rate of 73% to 96%. The creation of clean water infrastructure, early childhood education, and birth assurance were the primary uses for this outlay. However, the cost of a particular intervention was only between 4% and 27%.

The study conclude that the national government prioritizes efforts to avoid stunting. The implementation of fiscal decentralization will primarily depend on kabupaten/kota administrations. The primary funding source for numerous future actions aimed at preventing stunting is the budget at the kabupaten/kota level.

This study's budget analysis revealed that the regional government's spending and budget did not adequately explain the stunting situation. The reduction in the region's stunting level was not always closely correlated with the per capita budget of the regional government allocated to interventions linked to stunting. Even Surakarta and Klungkung had an increase in stunting, despite the fact that regions with low stunting spent comparatively substantial per capita budgets, their reduction in stunting was less than that of regions with high stunting levels.

There are two possible explanations for the low correlation between the budget and the decrease in stunting: either the budget is not effective because of an excessive reliance on transfers from the central government, which is not backed by synchronization between the central and local governments in high-quality planning and budgeting that can reflect the needs at the community level, or the budget is difficult to implement because of the administrative burden of accountability, which prevents implementers from working to their full capacity. Secondly, low utilization of intervention outcomes, especially for non-physical interventions, as a result of the lack of supporting elements. In areas where a sizeable budget was set up for the development of clean water and sanitation facilities that the community could really use, there was a noticeable decrease in stunting. This was not like non-physical interventions, which needed other elements like a shift in perspective and higher-quality community services in order to be effective.

In the meantime, the qualitative study discovered that local governments faced a number of challenges that ultimately affected the results of their budgetary decisions. These challenges related, among other things, to (i) the financial management of the regional government; (ii) the attempt to uphold accountability, which resulted in a significant administrative burden; (iii) the coordination and communication between the regional and central governments; and (iv) the capacity of the regional government to plan, manage, implement, and carry out monitoring evaluation on the budget, all of which came under their purview.

4.5. Regional Disparities in Accelerating Stunting Reduction

In an effort to meet the stated goal of reducing stunting as quickly as possible, the Indonesian government implemented the five pillars of the 2018 National Strategy for Stunting Reduction. National policymakers have talked about the Five Pillars Strategy to

combat stunting. This strategy consists of a national communication campaign, a convergent national program with regional and community programs, political commitment and leadership at the national level, nutrition and food security policy, and monitoring and evaluation. The plan was created using both international best practices and Indonesian understanding. The implementation of the eight convergence actions consists of the following: measurement, publication of stunting data, action planning, discussion of stunting, village role regulation, human development, cadre development, data management system, measurement, and annual performance reviews, (Word Bank, 2018)

Some studies show the disparities on driver factors of stunting prevalence reduction across different provinces, Yogyakarta Special Region, Jakarta Capital Special Authority and Riau. Additionally, Majene District of West Sulawesi Province, the province hold the highest status of stunting prevalence percentage that shows different pattern at more basic but fundamental issues of community perception on stunting's

Yogyakarta Province

After Bali and Jakarta, Yogyakarta is the province with the third-lowest prevalence of stunting. The percentage of people in this province who were stunted ranged from 14.1 to 20.6% over the course of the Indonesian Nutrition Status Survey (SSGI) in 2022, (Kemenkes, 2022).

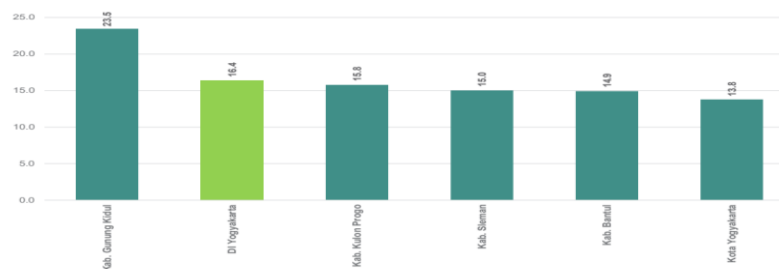


Figure 6 Stunting Prevalence Reduction of Yogyakarta, SSGI 2022

Year by year, the prevalence of stunting keeps falling. The average drop was 0.57% from 2007 to 2018, and 2.06% from 2018 to 2021. (Siswati et al., 2022) The national medium-term development plan for 2020–2024, which makes reference to the SDGs for 2024, sets a target of 14%.

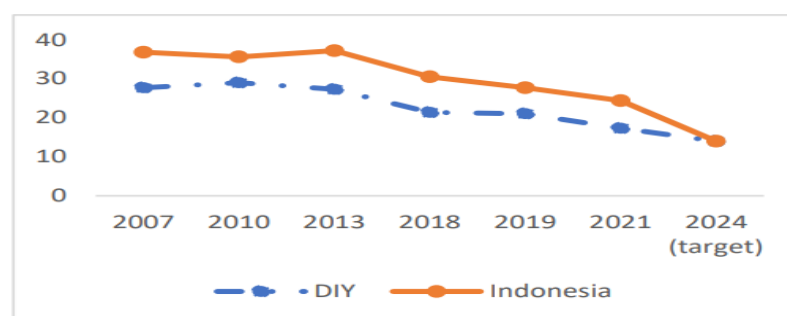


Figure 7 Trend Stunted Child under five in Yogyakarta, 2007-2021

According to the study's findings, Yogyakarta's situation offers as an illustration of a province that was able to swiftly lower the prevalence of stunting in children under five after experiencing a period of stagnation, (Siswati et al., 2022). This can be attributed to a number of factors, such as sensitive and targeted nutrition programs that are implemented in vulnerable communities, robust civil society, and effective leadership. Ensuring the equitable and long-term implementation of evidence-based interventions both inside and outside the sector, demonstrating effective and consistent political leadership, prioritizing adequate accountability mechanisms at all levels, and actively involving civil society in the creation and execution of policies and programs are all necessary for governing in a supportive environment. However, greater coordination through multi-sector, multi-actor, and strategic collaboration is still required to improve household food security, human resources, budgeting, parenting, food diversity, and the prevention of child marriage.

Convergence Action to Reduce Stunting in Riau Province

According to SSGI 2022 data, 17.0% of the population in Riau Province is stunted. The aim for the prevalence of stunting in 2024, as stated in the Riau Province Medium-Term Development Plan 2020–2024, is 18%; however, Riau Province has been exceeding this goal.

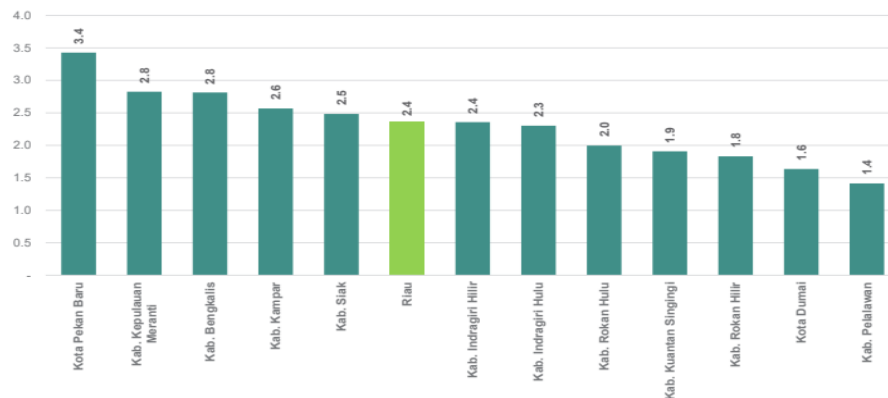


Figure 8 Stunting Prevalence Status of Districts in Riau Province, SSGI 2022

Referring to the study conducted in 2021 on intervention service coverage of convergence action to reduce stunting in Riau Province as one of the priority districts in Indonesia for stunting prevention action, there are some key factors that make Riau Province successfully to achieve the target even before the due date of the target time of 2024, (Rahmawati & Harahap, 2022).

Since 2019, the Riau Province Government has been pressuring the districts and cities chosen as intervention centers to implement the convergence initiatives, (Rahmawati & Harahap, 2022). Based on the intervention's specific scenario analysis for the service coverage, the intervention focal village is established. Low-coverage indicators are the best candidates for this kind of intervention, and the villages or subdistricts with the least amount of service coverage determine which interventions

should be prioritized. In ten districts/cities in 2021, 161 villages or sub-districts will be chosen as the intervention's focus areas based on the results of the scope of service study.

The study concludes that sensitive intervention had a lesser coverage service than targeted intervention, (Rahmawati & Harahap, 2022). Out of the 11 particular interventions, just two had coverage that had reached the aim, and all sensitive interventions had not met their objective. The priority districts had different levels of targeted and delicate intervention coverage. To improve coverage and service delivery to the targeted household, interventions must be strengthened. Stunting reduction was accelerated by the local government convergence action and the strengthening of the village authorities' involvement.

Jakarta Capital Special Territory

The World Health Organization's < 20 percent low category includes the 14.8 percent statistic in the stunting prevalence rate. However, the prevalence rate of stunting is not spread equally throughout the DKI Jakarta Province; South Jakarta City has the lowest prevalence rate of 11.9 percent, while the greatest prevalence rate is found in Pulau Seribu District (20.5 percent), (Wardani et al., 2021). Policy measures are needed to address this unequal imbalance and lower the frequency of stunting.

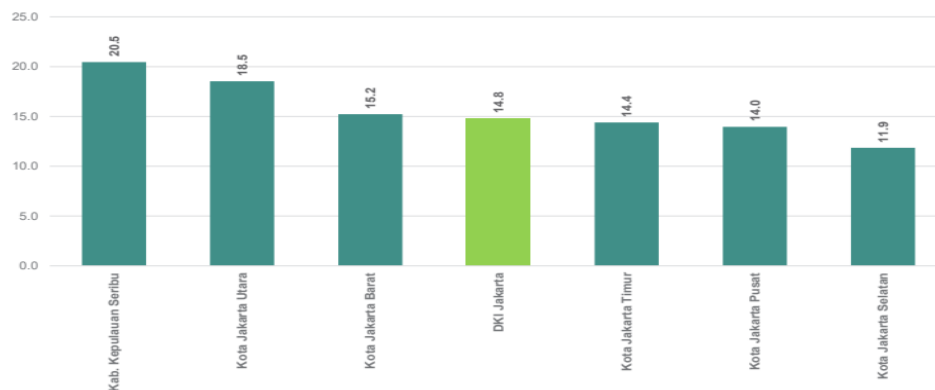


Figure 9 Stunting Prevalence Status of Districts in DKI Jakarta Province, SSGI 2022

A study was conducted in 2022 focusing on Jakarta Province Government Policies to Handle Stunting, (Taufiqurokhman et al., 2022). One of the key findings of the study that the main problem concerns strategic policies to overcome the problem of decreasing numbers prevalence of stunting so that the programs or activities carried out are more effective and on target in reducing the prevalence rate of stunting in DKI Jakarta Province after reviewing the results. The explanation of the research above is carrying out integrated data collection (data stunting toddlers must be by name by address). So that the program or activity will be possible carried out on target as planned and will be carried out by the Governor DKI Jakarta in reducing the prevalence of stunting.

The next finding of the study is that to make sure that the goals of the programs are met as planned, it is imperative to monitor the ones that have already been put into place. When giving extra food to underprivileged families or children, for instance, it's

important to keep an eye on whether the food is being consumed. In the end, this results in the program not functioning as intended. Stunting loses effectiveness as attempts are undertaken to combat and lower the incidence rate. In the meantime, the amount of money set aside for the prevention of stunting is deemed sufficient in terms of both size and allocation; it only needs to be implemented as efficiently as possible to produce the desired effects. So that efforts are made to overcome and reduce the prevalence rate stunting becomes less effective. Meanwhile, regarding the size and allocation of the budget, the amount the budget allocated for stunting prevention is considered adequate, it just needs to be optimized in its implementation so that it looks more significant expected results.

Lastly, of two legislative approaches, two decrees to combat stunting, DKI Jakarta ranked second with still an average ranking as a result of DKI Governor Decree No. 981 of 2022 Jakarta concerning the Acceleration of Decline Team stunting (TPPS) and Governor's Decree No. 774 of 2022 concerning determining assessment results the performance of the DKI Jakarta district city in implementing the reduction convergence action stunting. The rate of stunting is not evenly spread; Pulau Seribu District has the highest rate, while South Jakarta has the lowest rate. Thus, in order to implement the necessary strategic plans, regional regulations must be drafted to monitor the two relevant governor's decrees.

Majene District of West Sulawesi Province

The result of the SSGI 2022 confirms that West Sulawesi is the highest status of stunting prevalence by 35.0% to replace the position of East Nusa Tenggara Province in 2021. (Kemenkes, 2022) The prevalence increase by 1.2% from 33.8% in 2021. Learning from other regions, there are different possibilities as triggers of the stunting prevalence status. A study in one district of the West Sulawesi Province, Majene District focus on community perception on stunting confidently able to explain the causes of the record, (Hapzah & Asmuni, 2022).

West Sulawesi Province is second statewide in terms of stunting rates, with 48.02%, the highest being East Nusa Tenggara Province's 51.73%. The Electronic Data-Based Nutrition Recording and Reporting Society (E-PPGBM 2018) is the source of this information (Hapzah & Asmuni, 2022). The regional distribution is as follows: Majene district (42.37%), Mamasa (25.43%), Pasangkayu (22.49%), Mamuju North (21.47%), Mamuju (17.65%), Polman (16.58%), and Central Mamuju (11.07%). Sub-districts of Majene Regency: Ulumanda 182.38%, Tamerodo 75%, Pamboang 51.53%, Lembang 51.29%, Malunda 49.12%, Salutabung 48.37%, Sendana II 34.67%, Sendana I 34.18%, Majene 25.87%, Banggae I 13.85%, and Banggae II 12.53% are among the few, (Hapzah & Asmuni, 2022).

Furthermore, 2017 Nutritional Status Monitoring, with very short (14.90%) and short (25.10%) percentages among children 0-59 months old in West Sulawesi Province. After East Nusa Tenggara Province, with very short 18.00% and short 25.10%, and Papua

Province, with very short 15.90% and short 16.90%, West Sulawesi comes in third, (Hapzah & Asmuni, 2022).

The way a person interprets an event depends on the senses they use to gather it, such as sight, hearing, taste, touch, and so on is the definition of perception for the study. According to an established pattern created by experience, stimulation, such as information obtained by the senses, is recognized. It is then processed by requiring attention or attention to form an individual's understanding or perspective towards the surrounding environment, (Hapzah & Asmuni, 2022). This is because perception serves as a foundation or predictor of conduct, it has a significant impact on how people behave. It will be challenging to anticipate community involvement in government programs to eradicate stunting without proper perception and comprehension.

The study discovered and came to the conclusion that respondents did not perceive the term "stunting" to be foreign. Knowing stunting is more than just knowing that a person is short in stature; it also entails understanding how growth inhibition and development work together in tandem. In the respondents' statements, we relate them to parameters toddler development through DDST and KBK, some of which are self-help, intelligence, fine motor movements, and motor movements roughly speaking, all respondents believe that breast milk is the first source of nutrition and is important for the baby's growth and development. The respondents also gave MP-ASI to their babies, although some others gave MP-ASI at the baby's age. According to the understanding of the respondents, MP-ASI is food babies accompanied by breastfeeding. That's why the respondents do not stop breastfeeding until the baby is 2 years old.

4.6. Modalities towards the target of 14% Prevalence Stunting

The trend data examined in this article though cannot be justified as represent the solid evidence on the path moving forward towards achievement of the target 14% of stunting prevalence by 2024, but these show and guide that Indonesia is on the right track to the target for different aspects. First of all, the global data confirms that Indonesia as part of the South East Asian Countries does not on the fragile position on malnutrition and child nourished issues.

Secondly, the survey data trend directs that stunting prevalence is on the right track from the year of 2007 to 2022 dropping from 36.8 % to 21.6%. Some evidences of the study indicate the driver factors for this positive trend. The policy convergence is the ultimate key condition to drive the multi-stakeholder's collaboration and synergy to tackle stunting issues. The issuance of the National Stunting Reduction Acceleration (StraNas Stunting) which then formalized with Presidential Regulation No. 72 of 2021 strengthened the national platform and structure of policy and program convergence to combat stunting across the country. The five pillars of the strategy and the eight-convergence action which then followed by the National Action Plan of Stunting Reduction Acceleration (RAN PASTI) led by BKKBN (the National Population and Family Planning Agency) as the new implementation of national stunting program and action under the Presidential Regulation.

Thirdly, the social economic development which contributes for the exercising of the stunting reduction program. The budget allocation availability in all levels of government from national to villages level, in APBN, APBD-Provinces, APBD Districts and APBDesa. This will also be strengthened with the private sector's contribution and international organization support both on financial support and knowledge sharing.

The next modality is that even though there is discrepancy and gap among different regions among different provinces and internal provinces of the districts, but the Government have proposed mitigation to handle the issues.

To sum, the examination of different studies and data trends lead to a level of confidence that the target of 14% in 2024 of the national stunting prevalence is achievable, so far, the modalities as highlighted continue to be implemented and even be strengthened.

5. Conclusion

The data trend presented in this article both for the quantitative and qualitative data, the studies and reports at global, national and regional levels confirming that Indonesia is on the right track towards the target of stunting prevalence decreased by 14% in 2024. The joint report by WHO, UNICEF and World Bank, the joint report on a threaten of undernourished across the world countries shows that Indonesia is on the safe mode for moving forward to deal with stunting problem.

The data trend of stunting prevalence of Riskesdas, SSGBI and SSGI from 2007 to 2022 also leads to a good direction of continue stunting prevalence reduction. It is supported with the positive trends and different documentation from the regional levels though the challenges in place but the mitigation already define in different ways in the form of policy convergence, budgeting support and strategy of tackling the priority regions facing the highest stunting prevalence.

Thus, the lessons learned and evidences internationally and locally show that convergence action as one of the key driver factors for stunting reduction acceleration, so it needs to continue a call to action for the multi-stakeholders to continue work together to achieve the target to reduce stunting prevalence by 14% in 2024.

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Article

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