



Stunting Prevention Through Collaborative Governance in the Berbah Sub-district, Sleman

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Abstract. Berbah Sub-district's stunting rate is still worrying and requires accelerated handling through the involvement of many stakeholders. Such involvement can be framed through collaborative governance. This study aims to analyze how collaborative governance in the Berbah Sub-district is carried out to overcome stunting. This research employed a descriptive qualitative method with a case study approach. The data were collected through observation, interviews, and complementary documentation and analyzed using interactive analysis, with data validity by comparing observation with interview results, various perspectives of the research subjects, and interview results with related documents. The results unveiled that the implementation of collaborative governance, measured by the dynamics of collaboration, covering principled involvement, shared motivation, and joint action capacity, has been relatively good. However, several indicators have not worked well, such as the unavailability of a special and effective communication forum at the sub-district government, the lack of private and university participation, and the limited community involvement. This collaborative governance has resulted in a decrease in the stunting rate and a more educated community. Following these findings, the government is highly suggested to carry out more strategic monitoring and evaluation, increase the role of the private sector and universities, improve commitment and coordination between stakeholders, and provide the community with more space to overcome stunting.

Keywords: Collaborative Governance · Stunting · Sleman · Berbah · Sub-district

1 Introduction

Stunting is one of the primary problems in the health sector. Indonesia ranks fourth in the world and second in Southeast Asia as the country with the most stunting cases (Unicef, 2020). Data from the Indonesian Toddler Nutritional Status survey (SSGBI) in 2019 depict that the prevalence rate of stunting in Indonesia reached 27.7% (WHO

threshold of 20%). It signifies that every one in four children under five in Indonesia is stunted (BPS, 2019).

In 2019, the Special Region of Yogyakarta (DIY) became the province with the best stunting handling in Indonesia. The Special Index for Handling Stunting (IKPS), obtaining 79.94 points, evidences it. Sleman Regency, one of the regencies in the DIY, also demonstrates a positive trend in reducing the stunting rate yearly. The prevalence rate of stunting toddlers in Sleman Regency was 12.86% in 2015, 11.88% in 2016, 11.99% in 2017, 11% in 2018, and 8.38% in 2019 (Dinkes Sleman, 2020).

Although the prevalence rate in Sleman has always decreased, it remains an alarming scourge if no efforts are made to reduce it. If projected far ahead, for instance, by 2030, when Indonesia acquires the demographic bonus, stunting will be an obstacle to its economic growth and have a major effect on the future of the nation (P2PTM Kemenkes RI, 2018).

Stunting prevention must be carried out through collaboration from various sectors to jointly strive for stunting prevention. This collaboration is commonly known as *collaborative governance* (Sukanti & Faidati, 2021). This effort will be effective if the sub-district government, as a supervisor of the implementation of the village government, is highly committed to overcoming stunting because its prevalence in rural areas is higher than that in urban areas. In addition, the existence of public healthcare in each sub-district is the main driver for overcoming stunting at the sub-district level (Nugroho & Putri, 2020).

Berbah Sub-district in Sleman Regency is quite active in overcoming stunting. Activities performed include caring for pregnant women and toddlers to suppress stunting and malnutrition, prevention socialization, and increasing public knowledge in the prevention and management of stunting in children with the intervention of *Sribit Peduli Stunting* (Sribit Cares about Stunting), abbreviated “*Sri Penting*”. Unfortunately, the program has not significantly reduced the stunting rate in the Berbah Sub-district (8.11% in 2020) (Permatasari & Iqbal, 2021; Saraswati et al., 2020).

The topic of *collaborative governance* in overcoming stunting at the sub-district level is interesting and crucial to research. The central government has set a goal for 2024; thus, the stunting rate must be 14%. In addition, at the central level, 23 ministries/agencies have collaborated to accelerate stunting prevention. Especially in Sleman, the government has been committed to preventing stunting with various policies and innovations (Gian, 2021; TNP2K, 2018; Yani, 2020). Through a collaborative governance approach, researchers can clearly describe who and what their role is, as well as how and what the obstacles are in efforts to overcome stunting at the sub-district level, which not many researchers have examined.

This study presents essential findings on implementing collaborative governance to overcome stunting in the Berbah Sub-district. The findings are presented by focusing on the dynamics of collaborative governance, including the stakeholders involved and their roles. In addition, this study also provides several recommendations to the government, especially in improving stunting prevention efforts through collaborative governance in the Berbah Sub-district.

2 Literature Review

2.1 Stunting

Stunting is a growth and development disorder experienced by children due to poor nutrition, recurrent infections, and inadequate psychosocial stimulation. Children are defined as stunting if the height according to their age is more than -2 standard deviation of the median child growth standard set by the WHO (WHO, 2015).

Stunting in Indonesia is extremely serious because it can cause physical and mental development disorders. Stunted children are more at risk of inhibiting productivity and intellectual abilities and are susceptible to disease (E. T. Siringoringo B. Panunggal, R. Purwanti, and N. Widyastuti, 2020). Stunting has long-term effects on individuals and society, including reduced cognitive and physical development, reduced productive capacity and poor health, and an increased risk of degenerative diseases such as diabetes (WHO, 2014). Furthermore, stunting has four impacts on children: cognitive weakness, inhibited psychomotor skills, difficulty mastering science and achieving in sports, easier exposure to degenerative diseases, and low-quality human resources (Dasman, 2019).

Various factors can cause stunting. Endartiwi (2021), who conducted research in Sendangrejo Village, Minggir, Sleman, proposed seven factors causing stunting, including maternal height during pregnancy, socioeconomic, maternal parenting, exclusive breastfeeding, birth length, birth weight, and birth age. Meanwhile, research conducted by Anggraini (2019) in West Nusa Tenggara discovered that the dominant cause of stunting is the age of the mother, less than 18 years.

To prevent or overcome stunting, WHO (2014) has conveyed that the fulfillment of nutrition in the 1,000 days of pregnancy until the second birthday of the child is an extremely serious concern. Sukanti & Faidati (2021) disclosed that specific and sensitive interventions could carry out stunting prevention. Specific interventions are short-term programs focusing on health services involving health offices, public healthcare, integrated healthcare center, family welfare empowerment, and village governments. Meanwhile, sensitive interventions refer to efforts to empower the community to overcome stunting for a long time. Stunting prevention is performed with the principle of collaboration. It is not only the responsibility of the government but also an effort that must be carried out by every Indonesian family (Kementrian Kesehatan RI, 2018).

2.2 Collaborative Governance

The government cannot rely on its internal capacity. In the era of collaboration, like now, almost all activities are oriented to improve the quality of people's lives; the government cooperates with fellow government agencies, the private sector, civil forces, and society (Febrian, 2016). In the science of public administration, collaboration in government is more commonly known as collaborative governance.

Collaborative governance, in a sense, is a way to solve a problem by making various efforts together. The term collaborative government promises cost efficiency in policymaking, expanding democratic participation, and even returning rationality to public management (Ansell & Gash, 2008). Ansell and Gash in Arrozaq (2016) explained that collaborative governance is a strategy in governance in that various stakeholders come

together to make a common consensus. Furthermore, Ansel and Gash put forward the governance arrangement in the concept of collaborative governance directly involving nongovernmental actors in collective policymaking (Harmawan, 2017).

Collaborative governance presents dynamics that encourage and energize each actor to collaborate. Emerson conveyed three components of the interaction of the dynamics of collaboration: principled engagement, shared motivation, and capacity for action (Emerson et al., 2012).

2.3 Principled Engagement

Principled engagement occurs gradually over time, includes different stakeholders at different points, and takes place in a face-to-face or virtual format, a cross-organizational network, or a private and public meeting, among other settings. It aims to solve problems, resolve conflicts, or create value from the topics/problems being collaborated. There are four basic process elements in principled engagement: discovery, definition, consideration, and determination. Discovery refers to disclosing individual and shared interests, concerns, and values and identifying and analyzing relevant and significant information and its implications. The definition is a process to clarify common goals and objectives and agree on other matters related to efforts to achieve the collaboration goals. Consideration and determination are carried out in a democratic deliberation by providing an opportunity for each collaboration actor to express his views on consideration and decisions that must be determined.

2.4 Shared Motivation

Shared motivation is a cycle of self-strengthening consisting of four elements: mutual trust, understanding, internal legitimacy, and commitment. Mutual trust is a condition where the cooperating parties get to know each other and prove they are responsible and reliable. Meanwhile, understanding refers to the ability to understand and respect the positions and interests of others, even when one may disagree. Then, internal legitimacy is an act of confirmation that participants in collaboration are trustworthy and credible, have compatible and interdependent interests, and legitimize and motivate ongoing collaboration. Finally, commitment results from the three previous elements, leading to the unification of the joint steps to make collaboration successful throughout the process.

2.5 Capacity for Joint Action

Increasing the capacity of each collaboration actor is one of the goals of the collaboration. Therefore, *collaborative governance* must generate new capacities for joint action that did not exist before and maintain or grow those capacities during a common goal. The capacity for joint action is conceptualized as a combination of four vital elements: procedural and institutional arrangements, leadership, knowledge, and resources. *Procedural and institutional arrangements* include various process protocols and organizational structures necessary to manage repetitive interactions over time. *Leadership* is an essential part of the success of collaboration goals because it is related

Table 1. Stakeholders Involved and Their Roles in Overcoming Stunting in the Berbah Sub-district

Stakeholders	Role
Sub-district Government	Providing policy direction and as a leader in mobilizing stakeholders to maximize the implementation of the established program
Public Health Center	Designing a program of stunting prevention and at coordinating the implementation of the program in the community
Village Government	Providing personnel support and facilitation required in the implementation of the program in the village
Family Welfare Empowerment Mobilization Team	Facilitating the program activities and providing data and information
Health Cadre	Assisting the implementation of counseling and technical activities in the field

to managing the effectiveness of deliberations and conflicts and plays a crucial role in fighting for collaborative determination to implementation. *Knowledge* is likened to a collaboration currency that plays a vital role in aggregating, separating, and re-assembly of data and information. *Resources* may include funding, time, technical and logistical support, administrative and organizational assistance, skills required for analysis or implementation, and other skills.

The involvement of various parties in *collaborative governance* allows the programs or activities to be implemented, monitored, and evaluated optimally to achieve the objectives. A study by Ipan et al. (2021) entitled *Collaborative Governance in Stunting Mitigation in Kalirandu Village, Petarukan District, Pemalang Regency*, revealed that *collaborative governance* activities could be carried out through face-to-face dialogue, building trust, commitment in the process, mutual understanding, and interim results. Of all these stages, the key is communication in dialogue while implementing programs/activities (Amelia Novita, 2018). Furthermore, Agranoff and Mc Guire in Astari (2019) mentioned four primary keys to the success of *collaborative governance*. *First, trust*, common goals, and interdependence of sources. *Second, shared belief* and common purpose, as a collaboration handle. Third, a mindset and commitment replace traditional methods that do not work. Fourth, leadership and guiding ability replace the way of command and control.

Of various studies discussing collaborative governance, not many have discussed stunting mitigation, especially at the sub-district level. Sub-districts are a bridge between government programs and the main targets of stunting prevention programs. Accordingly, the sub-district government must be able to translate the stunting prevention policy from the government above it to the village government and ensure that all village governments in their area can carry out stunting prevention for their communities. As Anggreani (2021) asserted, the policies and regulations for stunting handling efforts issued by the

central government should be followed up with regulations by local governments and implemented at the lower level, the village.

Therefore, this research is expected to produce findings beneficial to the government, stakeholders, and the community concerning overcoming stunting at the sub-district level. The three elements conveyed by Emerson (principled involvement, shared motivation, and shared action capacity) are tools to analyze the collaboration in this study.

3 Research Method

This research utilized a descriptive qualitative method with a case study approach. This approach focuses on specific problems to express them in detail, factually, and in-depth (Creswell, 2015). This study employed both primary and secondary data, gathered through observation, interviews, and documentation, complementing each other.

Data analysis was performed using interactive analysis. This data analysis was carried out simultaneously with data collection. During data collection, Miles & Huberman stated that researchers should move interactively in the components of the analysis: data reduction, data presentation, and conclusion/verification (Rohmadi & Nasucha, 2015). A data validity test was conducted to ensure the validity of research results by comparing observations with interview results, various perspectives of research subjects, and interview results with related documents (Moleong, 2012).

4 Results and Discussion

4.1 *Collaborative Governance* in Overcoming Stunting in the Berbah Sub-district, Sleman

Stunting is a priority problem sought to be addressed immediately in the Berbah Sub-district. Although the stunting rate demonstrates a decrease, it is still worrying. Therefore, the Berbah Sub-district Government carried out activities to overcome stunting through a collaborative strategy with various stakeholders.

The parties involved in the collaboration in stunting prevention in the Berbah Sub-district consisted of the Berbah Sub-district Government, Berbah Health Center, village government, the sub-district to hamlet Family Welfare Empowerment Mobilization Team, and health cadres/integrated healthcare center. Table 1 display each role of the *stakeholders*. In addition to the parties mentioned, other *stakeholders* involved in overcoming stunting in the Berbah Sub-district were higher governments, such as the Sleman Regency Government, acting as a director and supervisor. In addition, community involvement has also been targeted in the activities while implementing policies issued by the government. However, in this study, what was analyzed were stakeholders who were actively, intensely, and directly involved in overcoming stunting in the Berbah Sub-district.

The subsequent discussion focuses on analyzing the dynamics of collaboration between the parties. This dynamic is seen in principal engagement, shared motivation, and joint action capacity. In the explanation of the three scopes, there is also an explanation of the obstacles faced in implementing collaboration.

4.2 Principled Engagement

Principled engagement concerns efforts to solve problems, resolve conflicts, or create value from the topics/problems. In this case, the analysis explains how stunting in the Berbah Sub-district is considered or interpreted as a problem that must be immediately addressed by the parties involved in the collaboration. There are four basic process elements in principled engagement: discovery, definition, consideration, and determination.

The parties involved in the collaboration on stunting countermeasures in the sub-district varied. As mentioned earlier, these parties consisted of cross-sectors, such as the government, health, and community empowerment field implementers. In addition, the upward relationship with the regency government and the downward one with the community is also an important part of the collaboration. The discussion on stunting prevention in sub-district was carried out through several face-to-face meetings. Online meetings were not conducted because, according to some, they were ineffective. Moreover, meetings were carried out on a limited basis in compliance with health protocols. Hence, they were safe to conduct during the Covid-19 pandemic.

The coordination meetings between parties in collaboration, especially at initial meetings, discussed the disclosure of interests/views on the issue of stunting. The regional coordinator mentioned that stunting appeared to be a problem that must be overcome with a strategic plan. Through such meetings, parties that should be involved and adjusted to the functions, tasks, and resources owned were revealed. After all, these parties have expressed their readiness to collaborate, and the objectives, directions, and strategies were clarified through a collective agreement document. The agreement document contained the opinions and suggestions submitted and discussed earlier at the coordination meetings. The collective agreement has become the basis for each party involved to carry out their respective duties.

4.3 Shared Motivation

Shared motivation in collaboration is self-strengthening that runs as long as the collaboration is carried out. It can be seen from four elements: mutual trust, understanding, internal legitimacy, and commitment. In implementing collaboration in stunting prevention in the Berbah Sub-district, joint motivation was strengthened through coordination conducted periodically.

Coordination is crucial in collaboration in stunting prevention in the Berbah Sub-district. The involvement of many parties has made communication and supervision a way to maintain mutual commitment. Even if there were problems/obstacles in carrying out their respective tasks, the parties recognized that the coordination could effectively unravel the problems/obstacles faced to produce mutually agreed solutions.

The strategy in the collective agreement underwent several adjustments in its implementation. It was considered reasonable because the real conditions in the field could change. The most important value, according to the parties, was that the spirit and commitment were always well maintained in overcoming stunting in the Berbah Sub-district. Although in principle, the parties were entrusted with their respective duties/roles, other parties with authority over them could intervene for the success of the policy. It is like

the sub-district government to the village government or the sub-district driving team to the village/hamlet driving team.

4.4 Capacity for Joint Action

The capacity for joint action in collaboration has been interpreted as a combination of four crucial elements: procedural and institutional arrangements, leadership, knowledge, and resources. The capacity of joint action is more technical because it concerns the structure of the implementing organization, the capacity of leadership in maintaining conditions and commitments, knowledge of policies and tasks, and resources concerning funding, time, technical and logistical support, administrative and organizational assistance, skills, and other skills required.

A special organizational structure in countermeasures collaboration has not yet been established. However, the program activities went well through the governance structure in the sub-district. The government structure has put the sub-district head in command or as a leader in the ranks of government and society. Hence, all levels of the institution could follow the policy and agreement. The absence of a special organizational structure was also mentioned to be due to the absence of outside parties actively involved in collaboration in the sub-district, such as private parties or universities. During the observation of the implementation of stunting prevention activities in the sub-district, the university was still limited to separating service activities and recommendations through research.

The leadership conditions of each party have become the key to the effectiveness of coordination and implementation of activities. In addition, the leadership of the parties also plays an important role in maintaining the commitment of each of the scopes they lead. Although structurally, the sub-district head holds the pillars of the implementation of collaboration, the role of each leader of the relevant institutions also supports the realization of dynamic collaboration oriented toward goals and mutual agreements.

Knowledge of collaboration policies and duties/responsibilities have been well established, especially in institutions with authority to control stunting, such as the public healthcare and health cadres. Then, the village government and village/hamlet Family Welfare Empowerment also understood the dynamics of implementing activities in their area. Thus, the implementation of stunting mitigation activities in the village/hamlet was adjusted to community conditions, such as the time, place, and concept. Resources supporting the implementation of collaboration were constrained by relatively limited and inadequate funding. Then, other elements of resources, such as time, could be well-conditioned due to the designed schedule of the activities. Technical, logistics and administration were carried out or owned by each party, especially for medical devices or demonstrations in socialization or counseling activities, owned or available at public healthcare. Furthermore, analysis or implementation skills did not experience any significant obstacles. The analysis of the development of the stunting prevention program was mainly performed by competent personnel from the public healthcare, supported by the Sleman Regency Health Office.

Collaboration in overcoming stunting in the Berbah Sub-district is still ongoing due to the temporary impact. It must continue to strive to reduce its rate. The biggest obstacle in implementing the program was the limited public understanding of stunting. Therefore, based on the program evaluation results, the collaboration should be continued

by changing the implementation model based on the community. In other words, the community would be more involved in every activity in the stunting prevention program in the Berbah Sub-district.

5 Conclusion and Recommendations

Collaborative governance in overcoming stunting in the Berbah Sub-district has been appropriately implemented. However, because the impact of the collaboration cannot be directly identified, is temporary, and always develops, the collaboration must continue to be carried out and developed through the evaluation results. In addition, there are several obstacles, such as the unavailability of a special and effective communication forum at the sub-district government that provides strategic supervision and evaluation, limited budget allocation, lack of private participation and universities, and limited community involvement. Concerning stunting mitigation in the Berbah Sub-district, the government is highly suggested to carry out more strategic monitoring and evaluation, increase resources owned, especially related to budget allocation, improve the role of the private sector and universities, enhance commitment and coordination between *stakeholders*, and provide more space to the community.

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References

- Amelia Novita, A. (2018). Collaborative Governance and Environmental Management in Mining Areas. *Jurnal Ilmiah Administrasi Publik*, 4(1), 27–35. <https://doi.org/10.21776/ub.jiap.2019.004.01.4>
- Anggraini, N. D. (2019). Risk Factor Analysis of Stunting Events in Children Aged 12–59 Months in West Nusa Tenggara Province. *Medical Technology and Public Health Journal*, 3(1), 86–93. <https://doi.org/10.33086/mtphj.v3i1.649>
- Anggreani, R. D., Margawati, A., & Nurjazuli, N. (2021). Evaluation of Stunting Handling through Village Funds During the Covid-19 Pandemic With Systematic Review Method. *Jurnal Ilmiah Kesehatan*, 14(2), 139–151. <https://doi.org/10.48144/jiks.v14i2.571>
- Ansell, C., & Gash, A. (2008). Collaborative Governance in Theory and Practice. *Journal of Public Administration Research and Theory*, 18(4), 543–571. <https://doi.org/https://doi.org/10.1093/jopart/mum032>

- Arrozaaq, D. L. C. (2016). Collaborative Governance (Study of Collaboration Between Stakeholders in the Development of the Minapolitan Area in Sidoarjo Regency). *Public Policy and Management*, 3, 1–13.
- Astari, M. Moh., Mahsyar, A., & Parawangi, A. (2019). Collaboration Between Government Organizations in The Control of Transportation Modes in Makassar City (Case Study of Motor Rickshaw Vehicles). *JPPM: Journal of Public Policy and Management*, 1(1), 1–8.
- BPS. (2019). *Report on the Implementation of Integration of Susenas March 2019 and SSGBI 2019*. Jakarta: Badan Pusat Statistik.
- Creswell, J. W. (2015). Qualitative Research & Research Design. *Mycological Research*, 94(4), 522.
- Dasman, H. (2019). Four impacts of stunting on children and the country of Indonesia. *The Conversation (Disiplin Ilmiah, Gaya Journalistik)*, 2–4. http://repo.unand.ac.id/21312/1/Empat_dampak_stunting_bagi_anak_dan_negara_Indonesia.pdf
- Dinkes Sleman. (2020). Health Profile of Sleman Regency in 2020. *Dinas Kesehatan Sleman*, 6, 1–173.
- E. T. Siringoringo B. Panunggal, R. Purwanti, and N. Widyastuti, A. S. (2020). Family Characteristics And The Level Of Adequacy Of Gizi As A Risk Factor For Stunting In Baduta. *Jurnal of Nutrition College*, 9 (Number 1, Year 2020), 54–62.
- Emerson, K., Nabatchi, T., & Balogh, S. (2012). An Integrative Framework for Collaborative Governance. *Journal of Public Administration Research and Theory*, 22(1), 1–29. <https://doi.org/https://doi.org/10.1093/JOPART/MUR011>
- Febrian, R. A. (2016). Collaborative Governance In Rural Development (Concept And Regulatory Review). *Wedana*, 2(1), 200–208.
- Gian, A. C. (2021). *Jokowi's Decree to Muhadjir Cs: Stunting Rate Must Be 14% in 2024*. CNBC Indonesia. <https://www.cnbcindonesia.com/news/20210125125327-4-218487/titah-jokowi-ke-muhadjir-cs-angka-stunting-harus-14-di-2024>
- Harmawan, B. Nuari. D. (2017). Collaborative Governance in the Regional Cultural Values Development Program through Banyuwangi Ethno Carnival. *E-Sospol*, IV(1), 50–55.
- Ipan, I., Purnamasari, H., & Priyanti, E. (2021). Collaborative Governance In Stunting Prevention In Kalirandu Village, Petarukan District, Pemalang Regency. *Kinerja*.
- Ministry of Health. (2018). Prevent Stunting, it's Important. *Data and Information Center, Ministry of Health of the Republic of Indonesia*, 1–27.
- Moleong, Lexy. J. (2012). *Qualitative Research Methodology*. Remaja Rosdakarya.
- Nugroho, A., & Putri, S. (2020). Different Determinants of Stunting Toddlers in Rural and Urban Areas in Lampung Province. *Jurnal Ilmiah Keperawatan Sai Betik*, 15(2), 84. <https://doi.org/10.26630/jkep.v15i2.1499>
- P2PTM Kemenkes RI. (2018). *Stunting, a Threat to Indonesia's Future Generation*. Kemenkes RI. <http://p2ptm.kemkes.go.id/kegiatan-p2ptm/subdit-penyakit-diabetes-melitus-dan-gangguan-metabolik/stunting-ancaman-generasi-masa-depan-indonesia>
- Permatasari, A., & Iqbal, M. (2021). Socialization of Stunting Prevention with Education on Improving the Diet of Young Women. *Proceedings of the National Seminar on Community Service Programs*, 724–730. <https://doi.org/10.18196/ppm.34.286>
- Rohmadi, M., & Nasucha, Y. (2015). *Basics of Research*. Pustaka Brilliant.
- Saraswati, A., Peronica, D., Fitriani, K., A, M. I. H., SA, M. B., & F, F. Z. (2020). *Community Knowledge In The Prevention And Management Of Stunting In Children With The Intervention Of "Sri Penting" (Sribit Peduli Stunting)*.
- Sri Sularsih Endartiwi. (2021). Factors affecting the Incidence of Stunting in Toddlers in Sendangrejo, Minggir, Sleman Yogyakarta. *Jurnal Kesmas Untika Luwuk : Public Health Journal*, 12(1), 1–10. <https://doi.org/10.51888/phj.v12i1.58>
- Sukanti, S., & Faidati, N. (2021). Collaborative Governance in Efforts to Overcome Stunting in Sleman Regency. *Jurnal Caraka Prabhu*, 5(1), 91–113. <https://doi.org/10.36859/jcp.v5i1.418>

- TNP2K. (2018). (National Strategy for Accelerating Stunting Prevention 2018–2024). *Tim Nasional Percepatan Penanggulangan Kemiskinan (TNP2K) Sekretariat Wakil Presiden Republik Indonesia*, November, 1–32. [http://tnp2k.go.id/filemanager/files/Rakornis 2018/Sesi 1_01_RakorStuntingTNP2K_Stranas_22Nov2018.pdf](http://tnp2k.go.id/filemanager/files/Rakornis%2018/Sesi%201_01_RakorStuntingTNP2K_Stranas_22Nov2018.pdf)
- Unicef. (2020). *The Situation of Children in Indonesia - Trends, Opportunities, and Challenges in Fulfilling children's rights*. Jakarta: Unicef Indonesia.
- WHO. (2014). Global nutrition targets 2025: stunting policy brief (WHO/NMH/NHD/14.3). *Canadian Pharmaceutical Journal*, 122(2), 74–76, 78. <https://doi.org/10.2307/j.ctv1xx9ks4.30>
- WHO. (2015). *Stunting in a nutshell*. WHO. <https://www.who.int/news/item/19-11-2015-stunting-in-a-nutshell>
- Yani, W. M. (2020). Overcoming Stunting from Upstream to Downstream with Innovation at Every Stage of Life and Reducing AKI and AKB. 1–119.

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