

Implementation of Stunting Prevention Policy in Bolaang Mongondow District Indonesia

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ABSTRACT.

The prevalence of stunting cases in the Bolaang Mongondow region is influenced by an environment affected by TB disease, the use of drugs freely and early marriage. This study aims to analyse the implementation of stunting prevention policies by focusing on environmental conditions, inter-agency relationships, increasing agency resources for the implementation of stunting prevention programs and the characteristics and capabilities of implementing agencies. The method used was descriptive qualitative (1) secondary data collection techniques and primary data to identify villages with high stunting cases in Bolaang Mongondow Regency. Observations were made by making initial observations of each village that had high stunting cases. Interviews were conducted by asking about nutrition for pregnant women and infants in each village. (2) Data analysis was conducted continuously along with data collection even after data collection was completed. The stages in the data analysis process are (a) data reduction, (b) data presentation, (c) understanding, interpretation and interpretation, (d) conclusion drawing and verification. The implementation of stunting prevention policies in Bolaang Mongondow district, North Sulawesi province, is less than optimal, such as environmental conditions, inter-agency relationships, inadequate resources and less than optimal implementing characters.

Keywords: The Implementation, Stunting prevention

INTRODUCTION

Efforts to improve the quality of human resources begin with primary attention to the process of child development from conception to young adulthood. During this growth and development period, the fulfilment of children's basic needs such as care and nutritious food provided with affection can form healthy, intelligent and productive human resources (Liputan 6.com). The state of community nutrition will affect the level of health and life expectancy which is one of the main elements in determining the success of development, handling nutrition is closely related to the strategy of a nation in creating healthy, intelligent and productive human resources. Indonesia is a developing country that has complex problems, especially in nutrition. Nutrition in Indonesia or other developing countries has a different nutritional case from developed countries, namely Indonesia has a double nutrition and on the other hand there is more nutrition.

Stunting is one of the nutritional problems experienced by toddlers, where toddlers experience a condition of growth failure due to chronic malnutrition so that the toddler is too short for their age. In general, stunting is caused by a lack of nutritional intake over a long period of time and recurrent infections, and both of these causative factors are influenced by inadequate parenting from the womb to the first 1,000 days of birth (Izwardy, 2019).

The North Sulawesi Provincial Government is accelerating the reduction of stunting rates to 14 per cent by



2024, in synergy with regional stakeholders. Although the stunting rate of 14 per cent is the national target in 2024 as set by the government, many parties are working together to take a role in reducing the stunting rate, including the TNI-Polri, district and city governments, BKKBN and other parties. The stunting prevalence in the province of more than 2.6 million people is at 18 per cent. (manado.antaranews.com, 2022).

Nu.	Region	Stunting Prevalence (%)
1	Bolaang Mongondow Selatan of Regency	37,4
2	Bolaang Mongondow of Regency	26,6
3	Bolaang Mongondow Utara of Regency	26,4
4	Kepulauan Talaud of Regency	25,8
5	Minahasa Tenggara of Regency	25,5
6	Kotamobagu City	25,1
7	Minahasa of Regency	17,5

Tabel 1. Tingkat Prevalensi Stunting Di Sulawesi Utara

Source: Indonesia Nutrition Status Study 2021

Table 1. shows that Bolaang Mongondow district has the second highest number of stunting cases in North Sulawesi province. Why it is important to conduct this research is because it pays attention to the lives of many people and people must get balanced nutrition so that they can think intelligently as an effort to improve the quality of human resources.

The implementation of stunting reduction policies in Indonesia, analysing secondary data using qualitative methods to understand the effectiveness of various programs such as the National Strategy for Accelerating Stunting Prevention 2018-2024, the nutrition week program for the first 1000 days of life, and the Supplementary Feeding Program. Recommendations for improving the National Strategy to Accelerate Stunting Prevention 2018-2024 include improving breastfeeding promotion and training, and addressing delays in the disbursement of Health Operational Assistance (BOK) funds. Improving human resource management and measuring programme effectiveness are also critical. Increased monitoring of existing programmes will also accelerate stunting reduction Sunarya (2023).

LITERATURE REVIEW

According to Avula, et al., (2022) factors favouring the reduction of stunting across countries; studying four states in India, assessed the contributors to the decline in stunting between 2006 and 2016. The main contributors to stunting reduction were improvements in the coverage of health and nutrition interventions (ranging from 11 to 23% across states), household conditions (22-47%), and maternal factors (15-30%). Political and bureaucratic leadership involving civil society and development partners facilitates change. Therefore, reducing stunting should focus on implementing multisectoral actions with equity, quality and intensity that ensure convergence in the same geographical areas and households.

Similarly, Rivera-Dommarco et al. (2013) described the magnitude, distribution, and trends of undernutrition and overnutrition from 1988 to 2006, and provided recommendations to address them. Anthropometric indicators of nutritional status in children aged <5 years from four surveys were analysed. Despite significant reductions over the study period, stunting remains a public health problem, with the highest prevalence in indigenous populations, the rural south, and the lowest living conditions. Measures to improve the effectiveness of nutrition policies and programmes, especially among indigenous peoples and



the poorest communities.

According to Paluturi (2020), there have been many studies on stunting in relation to nutrient intake, infection, and sanitation, especially at the household level. In addition, stunting is also related to community, state or political contexts, but these aspects are rarely studied comprehensively. Therefore, this study aims to look at the influence of political aspects on the existence of stunting problems in a country and region. Furthermore, Tschida et al. (2021) stated that the target of reducing the prevalence of stunting in children in Guatemala is unlikely to be achieved based solely on increasing intervention coverage. Limitations of the paradigm currently recommended by the international nutrition community. Policies and strategies are needed to address the broader structural causes of stunting.

Policy implementation is, in principle, a way for a policy to achieve its objectives. No more and no less. To implement public policy, there are two choices of steps available, namely direct implementation in the form of programmes or through the formulation of derivative policies or derivatives of these public policies. The sequence of policy implementation can be clearly observed, starting from programmes, to projects and to activities. The model adapts mechanisms that are common in management, especially public sector management. Policies are derived in the form of programmes, which are then reduced to projects, and finally manifest in activities, whether carried out by the government, the community or government cooperation with the community.

According to Van Meter and Van Horn (in Sirojudin, 2022) the implementation of public policies by looking at implementation performance in aspects of: policy standards, targets and objectives; resources; communication between units; organisational character; attitudes of implementers. The meaning of implementation according to Mazmanian and Sabatier (2000) is that policy implementation starts from the characteristics of the problem, the characteristics of the policy or law and environmental variables. According to Cheema and Rondinelli (2007) that policy implementation can be seen in indicators a). environmental conditions; b). inter-organisational relationships; c). organisational resources for program implementation; d). characteristics and capabilities of implementing agents. As Edward III (1980) said that public policy indicators are communication, resources, disposition or attitude, bureaucratic structure.

The success of implementation according to Grindle (2017) is influenced by two major variables, namely the content of the policy and the implementation environment (context of implementation). These variables include: the extent to which the interests of the target group or target group are included in the content of the policy, the types of benefits received by the target group, the extent of the desired changes from a policy, whether the location of a programme is appropriate, whether a policy has mentioned its implementors in detail, and whether a programme is supported by adequate resources. Policy implementation from Weimer and Vining (2017) has three variables, namely policy logic, the environment in which the policy is operated and the ability of policy implementers. The knowledge gap in this study is not frequent coordination meetings between related agencies and not optimal cooperation between agencies, especially building cooperation with the private sector. Although health workers are available at each Puskesmas, it is still not enough to serve cases. The distribution of bikuit logistics, milk for pregnant women and children is somewhat hampered by the long distance between sub-districts with high stunting cases and the district capital. Meanwhile, Presidential Regulation no. 72 of 2021 states that nutrition is a public health problem whose overcoming cannot be done with a medical approach and health services alone, nutrition is a poverty syndrome that is closely related to food security problems at the household level and involves aspects of knowledge and behaviour that are less supportive of a healthy lifestyle. This study aims to analyse the implementation of stunting prevention policies in Bolaang Mongondow Regency.

Paper Objective

This research discusses the implementation of policies in stunting prevention in Bolaang Mongondow



Regency and the focus of the research is: analysing environmental conditions, relationships between agencies/SKPD, SKPD resources for the implementation of stunting prevention programs, characteristics and capabilities of implementing organisations.

METHODOLOGY

Research methods include: (1) data collection techniques. This study used secondary data analysis and primary data to identify villages with high stunting cases in Bolaang Mongondow District. Secondary data was obtained from the Bolaang Mongondow District Health Office and sub-district health centres. Primary data was obtained through observations and interviews with village midwives, village heads, heads of health centres and relevant government officials in the Bolaang Mongondow district. Observations were made by making initial observations of each village that had high stunting cases. Interviews were conducted by asking about nutrition for pregnant women and infants in each village. (2) Data analysis was conducted continuously along with data collection and even after data collection was completed. Given the large amount of data, the relationship between one data and another must be determined, namely editing and classification by type and characteristics according to the focus of the study on mapping villages that have a high prevalence of stunting in Bolaang Mongondow District. The stages in the data analysis process are (1) data reduction, (2) data presentation, (3) understanding, interpretation and interpretation, (4) conclusion drawing and verification.

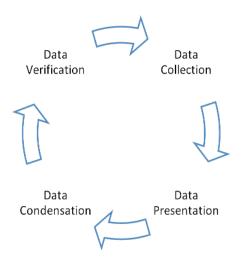


Figure 1. Interactive model data analysis (Miles & Huberman, 2014)

RESULTS AND DISCUSSION

In 2021 data, for Lolayan sub-district, there are 8 villages on the priority list. These villages are Mopusi Village, Matali Baru Village, Lolayan Village, Bakan Village, South Tanoyan Village, North Tanoyan Village, Lolayan Village, Kopanfakan II Village and Mengkang Village (stunting.bolmongkab.go.id, 2023). An interview with the head of Bolmong Health Office explained that in 2021, Bolmong recorded 117 cases and in 2022 there were 104 cases of stunting. However, of those 104, by February 2023, there were 57 cases left and we will continue to drive them to zero. Why and how this happens can be seen from the environmental conditions, the relationship between each related agency, and the condition of agency resources for the implementation of the stunting prevention programme.

The findings on the environmental conditions indicator show that the people of Bolmong district have resource constraints, this can be seen geographically from the distance between the capital of Bolmong district in Lolak and Lolayan sub-district, which has many stunting cases between Lolayan and Lolak sub-districts, which is approximately 60 km away. Socio-cultural conditions vary from place to place and can



affect various aspects of life including social norms, values, beliefs, interactions between individuals and groups and the availability of adequate physical infrastructure.



Figure 2. stunting cases in mopuya village

Another finding is the indicator of relationships between agencies/Regional Work Units, the response of stakeholders involved in handling stunting in Bolmong Regency is that coordination meetings are only held 2 (two) times a year. Furthermore, they only communicate at any time through whatsapp groups. The lack of cooperation and collaboration between related agencies or SKPD in serious handling, such as in terms of informing the community that in village A there are cases of stunting, there are pregnant women with chronic energy deficiency (KEK) that must be considered by the Sangadi (village head) in terms of allocating Village Funds for the benefit of stunting prevention, this shows that the lack of budget in order to accelerate the handling of stunting cases.

The problem of agency/SKPD resources for the implementation of the stunting prevention programme is known that policy implementation needs to be supported by resources, both human resources and nonhuman resources. Data found in the field that the list of health workers with work agreements in Bolaang Mongondow Regency in 2023 has been accepted, namely general practitioners totalling 10 people, pharmacists 8 people, village midwives totalling 37 people and nutritionists 11 people, the condition of the data obtained shows that especially human resources are still inadequate. The data above illustrates that competent human resource support is still very minimal in tackling stunting cases. Especially for midwives in Lolayan sub-district, there are 8 villages on the priority list. These villages are Mopusi Village, Matali Baru Village, Lolayan Village, Bakan Village, South Tanoyan Village, North Tanoyan Village, Lolayan Village, Kopandakan II Village and Mengkang Village by looking at the stunting cases in the village, not all villages get village midwives. In accordance with Bolmong Regent Decree No. 39 of 2023 concerning health workers, only Kopandakan II and Mengkang villages have not received village midwives, even though these two villages are included in the list of priority villages in Lolayan sub-district to get serious treatment in order to reduce stunting cases. Although almost every village has one midwife, because the duties of the village midwife are midwifery care for pregnant women, midwifery care for mothers in labour, midwifery care for infants and toddlers and midwifery care in productive age. A midwife is the spearhead of health services, especially facing the problem of stunting.





Figure 3: stunting case audit

The findings of the characteristics in the form of responsibility, commitment, cooperation, openness and communication are still not running optimally and the ability of related institutions has not been able to solve existing problems, creativity ability, decision-making ability, data analysis ability is still very minimal, the proof is that we have not been able to get the latest data that has been analysed properly even though the data already exists but tables have not been made and the distribution of medical personnel for each existing village. The pattern of relationships that occur within the relevant regional work units is still less agile and not on target because work meetings and coordination are only held twice a year while stunting prevention really needs a fast and continuous movement, because it will affect programme implementation.

Non-human resources are assumed to be in the form of additional food assistance, milk, eggs and toddler biscuits. The Lolayan sub-district community that is included in the priority list for handling stunting is a low economic level community, this has an impact on malnutrition, therefore assistance from related agencies is expected as well as budget transparency in accelerating stunting prevention in Bolaang Mongondow district.

The characteristics and capabilities of the implementing organisation, indicating the capabilities and responsibilities of the health office, Bappeda, Puskesmas, Social Service and other related agencies in supervising, evaluating are less than optimal and less effective in implementing stunting prevention programs in Bolaang Mongondow district. The implementation of stunting prevention policies in Bolaang Mongondow district is a complex problem according to Cheema & Rondinelli (2007) that policy implementation refers to the process of turning plans or policies that have been formulated into real and operational actions in society or organisations.

Environmental Conditions

Policy implementation involves a series of concrete steps and actions to implement the policy effectively. The aspect of environmental conditions (Cheema & Rondinelli, 2007) is still very much a focus in mitigating the high number of stunting cases in Bolmong district, because it is seen from the environment where the policy is operated (Weimer & Vining, 2017) which is far from the centre of government which can hinder coordination meetings or logistical distribution of milk, toddler biscuits as nutrition as well as for pregnant women. Environmental variables including sociocultural conditions in the form of family economics, the level of education, both formal and informal education, greatly affect policy implementation (Mazmanian & Sabatier, 2000).



Relationships between agencies/Regional Work Units

The data obtained shows that there is still a lack of coordination meetings between related agencies and multi-sectoral cooperation has not been maximised so that these factors greatly hinder policy implementation (Cheema & Rondinelli, 2007; Avula, et al., 2022) means interactions and connections between two or more organisations that work together or have a relationship in tackling stunting cases, including the Bolmong district health office, Bappeda, social services, Puskesmas and other related agencies. Relationships between agencies/SKPD are formed to achieve common goals, share resources, or support each other in achieving their respective goals. There is also a lack of cooperation with the private sector to work together in tackling stunting, which is a government programme.

Agency/SKPD resources for programme implementation

In overcoming the decline in the number of stunting cases, it must pay attention to the resources of the organisation to implement the programme (Cheema & Rondinelli, 2007). The findings above explain that human resources or health workers, namely village midwives, nutritionists and doctors, are still lacking in serving pregnant women and toddlers in providing balanced nutrition and nutrition.

Characteristics and capabilities of implementing agencies/SKPDs

The properties and capabilities possessed by an organisation in carrying out its duties and responsibilities are the characteristics and capabilities of the agency/SKPD (Cheema & Rondinelli, 2007). In the context of government or public organisations, these characteristics and capabilities are very important to ensure that the organisation can function properly in providing public services or achieving predetermined goals. The field findings show that the characteristics and capabilities variables of relevant agencies such as strict supervision systems (Sunarya, 2023), policy effectiveness and good monitoring and evaluation are key to ensuring that maternal and child health programmes run well and deliver the expected results in addressing the problem of stunting (Rivera-Dommarco. et al., 2013; Tschida. et al., 2021). Indicators of monitoring, effectiveness and evaluation are the characteristics and capabilities of agencies implementing stunting prevention programmes.



Figure : nutritious food aid from TNI

CONCLUSION

The final part of this research answers the objectives that have been formulated, including statements

regarding things that can be judged right or wrong in the implementation of stunting prevention policies in Bolaang Mongondow district, North Sulawesi province, less than optimal such as environmental conditions, inter-agency relationships, inadequate resources and less than optimal implementing characters.

The usefulness of this research is academically, to add to the study of science, especially in the field of Public Administration related to public policy. Theoretically, to train and develop oneself and improve the understanding of thinking through scientific writing by applying theory and knowledge, while practically it is expected to make a positive contribution through consideration and input for local governments in overcoming stunting. The results of the study can provide benefits for improving nutrition and nutrition in the context of preventing stunting in Bolaang Mongondow Regency in particular and North Sulawesi Province in general.

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