

The Analysis of Implementation of Stunting Prevention Program Case Study at the Air Beliti Community Health Center, Tuah Negeri District, Musi Rawas Regency, 2021

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Abstract

The purpose of this study was to determine the performance or success rate of stunting prevention program implementation related to the characteristics of the institution structure, network and communication, community culture, community needs, and external networks at the Air Beliti Community Health Center, Musi Rawas Regency. The method of this research is quantitative research. The research was conducted at the Air Beliti Community Health Center, Tuah Negeri District, Musi Rawas Regency. It was carried out from March to May 2021. The number of samples of the stunting program working team at the Air Beliti Community Health Center was 43. The results of research on factors related to the success of the stunting program at the Air Beliti Community Health Center, Musi Rawas Regency, were the characteristic variables of the institution's structure, network and communication, and community needs. The factors that are not related to the success of the stunting program are organizational culture and external networks. The conclusion of the implementation of the stunting prevention program at the Air Beliti Community Health Center, Musi Rawas Regency in general, has been going well, with positive community responses. Stunting program implementation factors that can affect the success of the stunting program are the characteristics of the institution structure, network and communication, and community needs.

Keywords

implementation; prevention program; stunting



I. Introduction

The current digital era requires all countries to spur the development of both natural and human resources. National development related to the improvement of human resources has been proclaimed in the 1945 Constitution. To develop human resources in a sustainable manner based on the vision of national development, it is necessary to develop health in order to achieve a healthy Indonesia. This is in accordance with the 1945 Constitution paragraph 4, which reads to protect the entire Indonesian nation and the entire homeland of Indonesia, as well as to promote public welfare and educate the nation's life. In order to achieve the objectives stated in paragraph 4th of the 1945 Constitution, the government seeks to implement sustainable, planned, and targeted development programs. One of the planned developments to prepare a strong generation in the future is health development. This is because a strong nation is a healthy nation. Health development will be integrated with overall national development (Muthia & Yantri, 2019).

There are current health problems that interfere with the development of future generations, one of which is malnutrition. The consequences of malnutrition in children will have a major impact on future generations. One of the serious health problems that must be addressed in Indonesia is stunting. According to (Supariasa & Purwaningsih, 2019), stunting is a failure condition of under-five children's development due to chronic

malnutrition, low psychosocial stimulus factors, and exposure to repeated infections, especially in the first 1,000 days of life (Yuliastini & Sudiarti, 2020). This often happens in developing countries, including Indonesia. Stunting is still not fully understood by the wider community. There are still many people who think that stunting is normal, and there is still an assumption that stunting is hereditary.

Stunting is a linear growth disorder in children due to a persistent lack of nutrient intake. Stunting can also be described as a chronic infectious disease, as indicated by the z-score for height for age (TB/U)-2SD. Based on this data, toddlers are said to be stunted if they have a z-score below the normal line, which is less than -2 SD, which is usually said to be short toddlers. Meanwhile, if it is less than 3 SD, the toddler is categorized as very short (Kemenkes, 2018).

According to WHO, the definition of stunting is a child who has growth and development disorders. Children suffer from malnutrition, recurrent infections, and inadequate social and psychological stimulation (Kwami, Godfrey, Gavilan, Lakhanpaul, & Parikh, 2019).

Stunting has future consequences for children, namely low cognitive abilities and physical development, so it has an impact on preventing children's capacity when they grow up. Stunting can have an impact on children's productivity after adulthood. Stunted children are susceptible to various degenerative diseases. The results of the study predict that the impact of stunting on children, namely psychosocial and mental health losses in children, will result in a loss of GDP of up to 300 trillion rupiah every year. This is a serious problem for the future of the nation and state, because today's children are the future of the nation and state (Yuliastini & Sudiarti, 2020). Stunting factors are very complex and many. The main factor is lack of food or nutrition, but other factors such as improper feeding, poor health services, and poor sanitation are also important (Dimitrova & Muttarak, 2020).

In 2013, in Indonesia, data showed that out of four babies born, one was stunted. This means that stunting occurs before the child is born. The data also shows that after birth, in children aged 12–23 months, the prevalence of stunting increases by almost 40%. The pattern of stunting in early childhood makes the period from conception to the second birthday of a child, which is the first 1,000 days of life, into a window of opportunity, or golden opportunity, that is very important to prevent stunting in children. This period is a child's growth and development that needs to be considered (Purba, 2020).

When compared to other countries with similar economies in the Southeast Asia region, Indonesia is still lagging behind. The prevalence of stunting in Indonesia in 2018 was 29.9%. This is not in accordance with the government's target for 2015–2019. The stunting prevalence in Indonesia could be as high as 28%. The stunting prevalence data for children under five was 30.8% in 2018. Based on the data above, it is still necessary to pursue programs from the Ministry of Health and related institutions in the context of preventing stunting prevalence. The Ministry of Health targets that by 2024 the prevalence of stunting in Indonesia will be 14% (Ministry of Health, 2018).

The prevalence of stunted children under five in South Sumatra Province was 31.7% in 2018. In 2019, the number of children experiencing prevention fell by 29.0%, with an average annual change of approximately 1.3 percent. However, when compared to the WHO standard, the prevalence of stunting in 2019 remains high, with less than 20% of children stunted. (Djide, 2021).

Based on data from the South Sumatra Health Office as of 2018, the number of stunted children under five in 17 regencies or cities in South Sumatra is as follows: Lahat Regency 48.10%, Ogan Ilir Regency 43.90%, Pali Regency 39.50%, Empat Lawang

Regency 36.00%, Musi Rawas Regency 34.60%, Muara Enim Regency 34.40%, North Musi Rawas Regency 33.20%, Lubuk Linggau City 32.00%, Pagar Alam City 31.90%. Then, Musi Banyuasin Regency had 31.10%, Ogan Komering Ilir Regency 30.60%, Banyuasin Regency 29.30%, Ogan Komering Ulu Timur Regency 27.20%, Ogan Komering Ulu Selatan Regency 26.40%, Prabumulih City 26, 20%, and Palembang City 25.90% (Apriani, 2020). According to the results of the Basic Health Research, in 2018, the number of stunted children exceeded the national percentage, which was about 31%. Meanwhile, in 2019, the percentage of stunted children was 28.98%. Based on reports from the Community-Based Nutrition Recording and Reporting Application (e-PPGBM) during the months of January and February 2020, it was recorded that 10,169 children under five experienced stunting.

The Musi Rawas Regency was ranked fifth for under-five children who experienced stunting out of 17 districts or cities in South Sumatra. In 2018, it was recorded in the nutritional surveillance data by the Musi Rawas District Health Office that as many as 1,499 children in Musi Rawas Regency were stunted. Meanwhile, in 2019, based on a report from the Community-Based Nutrition Recording and Reporting Application (e-PPGBM), 1,140 children in Musi Rawas Regency were stunted. However, based on e-PPGBM data as of November 24, 2020, it was recorded that 1,930 children in Musi Rawas Regency were stunted. This shows a significant addition.

Based on observations, stunting cases in Musi Rawas district occurred in all community health centers. Of the 19 community health centers in Musi Rawas Regency, the highest stunting cases were found in the working area of Megang Sakti Community Health Center, with quite a high number of cases at Air Beliti Community Health Center and low stunting cases at L. Sidoharjo Community Health Center. With its abundant natural resources, Musi Rawas Regency should not have a high rate of stunting. To find out the factors that cause this problem, a study is needed to analyze how the implementation of the stunting prevention program in Musi Rawas Regency is carried out by conducting a case study at the community health center that has quite high stunting cases, with 115 cases of short and very short toddlers, namely the Air Beliti Community Health Center, Tuah Negeri District, Musi Rawas District Regency.

II. Research Method

2.1 Research Design

This research design is quantitative research. The population of this study were all employees of the Air Beliti Community Health Center, Tuah Negeri District, Musi Rawas Regency. While the sample of this study were some employees of the Air Beliti Community Health Center, Tuah Negeri District, Musi Rawas Regency, namely employees who became part of the Stunting Prevention Program Team, as many as 43 employees.

2.2 Types, Data Sources and Research Instruments

This study used primary data types. Primary data is data obtained by researchers directly from respondents. The data collection method used was a questionnaire. The research instrument is a questionnaire about the characteristics of the institution structure, network and communication, community culture, community needs, and external networks.

2.3 Data Analysis

In this study, the analysis of quantitative data consisted of univariate and bivariate analysis. The analytical tool used is the chi-square test.

III. Results and Discussion

4.1 Results

a. Univariate Analysis

Table 1. Frequency Distribution of Respondents According to the Characteristics

No	Characteristics	Total (N)	Percentage (%)
1.	Sex		
	1. Male	5	11,63
	2. Female	38	88,37
2.	Age		
	1. > 20 years old	0	0,00
	2. 21 – 30 years old	19	44,19
	3. 31 – 40 years old	9	20,93
	4. 41 – 50 years old	4	9,30
	5. 51 – 60 years old	8	18,60
	6. > 60 years old	3	6,98
3.	Education		
	1. Senior High School	2	4,65
	2. D3/Diploma	25	58,14
	3. S1/Bachelor	16	37,21
	4. S2/Master	0	0,00
4.	Working Period		
	1. < 2 years	6	13,95
	2. 2 – 4 years	13	30,23
	3. 5 – 7 years	9	20,93
	4. > 7 years	15	34,88

Based on the table above, the most predominant respondent is female, namely 88.37%. Most of them are 21-30 years old, namely 44.19%. The majority of the respondents are D3/Diploma, which is 58.14%, and the working period of more than 7 years is 34.88%.

Tabel 2. Frequency Distribution of Respondents According to the Independent dan Dependent Variable

No	Characteristics	Total (N)	Percentage (%)
1.	Institution Structure		
	1. Good	22	51,2
	2. Poor	21	48,8
2.	Network and Communication		
	1. Good	25	58,1
	2. Poor	18	41,9
3.	Organization Culture		
	1. Good	34	79,1
	2. Poor	9	20,9

4.	Society Need 1. Good 2. Poor	25 18	58,1 41,9
5.	Institutional External Network 1. Good 2. Poor	25 18	58,1 41,9
6.	Performance or success of Stunting Program 1. High 2. Low	27 16	62,8 37,2

Based on the data above, it shows that the proportion of institution structure characteristics of 43 respondents who answered good was greater than those who answered poor, namely 51.2% while poor 48.8%. The proportion of network and communication respondents who answered good was greater than those who answered poor, namely 58.1% while poor was 41.9%. The proportion of respondents' organizational culture who answered good was greater than those who answered poor, namely 79.1% while less well was 20.9%. The proportion of community needs of respondents who answered well was greater than those who answered poor, namely 58.1% while less well was 41.9%. The proportion of the external network of the respondent institutions who answered well was greater than those who answered less well, namely 58.1% while the poor was 41.0%. The proportion of Performance or Success of Stunting Program respondents who answered high was greater than those who answered low, namely 62.8% while low was 37.2%.

b. Bivariate Analysis

1. The Relationship between Institutional Structure Characteristics and the Performance of Stunting Program

Table 3. The Relationship between Institutional Structure Characteristics and the Performance of Stunting Program

Institutional Structure Characteristic	Performance or Success of The Stunting Program				Total		95% CL	P Value
	Low		High					
	N	%	N	%	N	%		
Poor	11	52,4	10	47,6	21	100	(1,005-13,922)	0,044
Good	5	22,7	17	77,3	22	100		
Total	16	37,2	27	62,8	43	100		

The results of the analysis of the relationship between Institution structure characteristics and stunting program performance or success showed that in the group of respondents who stated the institutional structure characteristics were not good, the proportion of stunting program performance or success was low, 52.4%, while in the group of respondents who stated structural characteristics In good institutions, the proportion of performance or success of stunting programs is low, there are fewer, namely 22.7%. Based on the table above, the results of the Chi-Square test obtained a P-Value value of 0.044 ($p < 0.05$), so it can be concluded that there is a statistically significant relationship between the characteristics of the institution structure and the performance or success of the stunting program in the Air Biliti Community Health Center area, Musi Rawas Regency.

2. Relationship of Network and Communication with Performance or Success of Stunting Program

Table 4. Relationship of Network and Communication with Performance or Success of Stunting Program

Network and Communication	Performance or Success of The Stunting Programs				Total		95% CL	P Value
	Low		High		N	%		
	N	%	N	%				
Poor	10	55,6	8	44,4	18	100	(1,072-14,618)	0,035
Good	6	24,0	19	76,0	25	100		
Total	16	37,2	27	62,8	43	100		

The results of the analysis of the relationship between network and communication with stunting program performance or success showed that in the group of respondents who stated that the network and communication were not good, the proportion of low stunting program performance or success was higher, namely 55.6%, while in the group of respondents who stated that the network and good communication showed that the proportion of stunting program performance or success was low, which is 24%. Based on the table above, the results of the Chi Square test obtained a P-Value value of 0.003 ($p < 0.05$), so it can be concluded that there is a statistically significant relationship between network and communication with the performance or success of the stunting program in the Air Biliti Community Health Center area, Musi Rawas Regency.

3. Relationship between Organizational Culture and Performance or Success of Stunting Program

Table 5. Relationship between Organizational Culture and Performance or Success of Stunting Program

Organizational Culture	Performance or Success The Stunting Program				Total		95% CL	P Value
	Low		High		N	%		
	N	%	N	%				
Poor	5	55,6	4	44,4	9	100	(0,584-1,6946)	0,200
Good	11	32,4	23	67,6	34	100		
Total	16	37,2	27	62,8	43	100		

The results of the analysis of the relationship between organizational culture and stunting program performance or success show that in the group of respondents who stated that organizational culture was not good, the proportion of low stunting program performance or success was higher, namely 55.6%, while in the group of respondents who stated that organizational culture was good, the proportion of low stunting program performance or success was less, namely 32.4%. Based on the table above, the Chi Square test results obtained a P-Value value of 0.200 ($p > 0.05$), so it can be concluded that there is no statistically significant relationship between organizational culture and the performance or success of the stunting program in the Air Biliti Community Health Center area, Musi Rawas Regency.

4. Relationship of Community Needs with Performance or Success of the Stunting Programs

Table 6. Relationship between Community Needs and Performance or Success of Stunting Program

Community Needs	Performance of Stunting The Program				Total		95% CL	P Value
	Rendah		Tinggi		N	%		
	N	%	N	%				
Poor	8	44,4	10	55,6	18	100	(0,486-5,953)	0,405
Good	8	32,0	17	66,0	25	100		
Total	16	37,2	27	62,8	43	100		

The results of the analysis of the relationship between community needs and the performance or success of the stunting program showed that in the group of respondents who stated the community's needs were not good, the proportion of low stunting program performance or success was 44.4%, while in the group of respondents who stated the community's needs were good, it was obtained the proportion of low stunting program performance or success is less, namely 32%. Based on the table above, the Chi Square test results obtained a P-Value value of 0.405 ($p > 0.05$), so it can be concluded that there is no statistically significant relationship between community needs and the performance or success of the stunting program in the Air Biliti Community Health Center area, Musi Rawas Regency.

5. The Relationship of the Institution External Network With the Performance or Success of the Stunting Program

Table 7. The Relationship of the Institution External Network with the Performance or Success of the Stunting Program

Institution External Network	Performance or Success of The Stunting Program				Total		95% CL	P Value
	Low		High		N	%		
	N	%	N	%				
Poor	10	55,6	8	44,4	18	100	(1,072-14,616)	0,035
Good	6	24,0	19	76,0	25	100		
Total	16	37,2	27	62,8	43	100		

The results of the analysis of the relationship between the Institution's external network and the performance or success of the stunting program showed that in the group of respondents who stated that the institution's external network was not good, the proportion of performance or success of the stunting program was low, 55.6%, while in the group of respondents who stated that the external network In good institutions, the proportion of performance or success of stunting programs is low, there are fewer, namely 24%. Based on the table above, the Chi Square test results obtained a P-Value value of 0.035 ($p < 0.05$), so it can be concluded that there is a statistically significant relationship between the institution's external network and the performance or success of the stunting program in the Air Biliti Community Health Center area, Musi Rawas Regency.

3.2 Discussion

Based on the analysis of the research results, it is known that the factors related to the success of the stunting program at the Air Beliti Community Health Center, Musi Rawas Regency, are the characteristics of the institution structure, network and communication variables, and the institution's external network. This shows that if the characteristics of the institution structure, network and communication, and institution external networks are carried out well in its implementation in the institution, in this case at the Air Beliti Community Health Center, it will have an impact on the success rate of the stunting prevention program at the Air Beliti Community Health Center. The government's efforts through the Health Office to prevent stunting by means of specific nutrition interventions. Specific nutrition interventions are carried out with mentoring programs for nutritionally aware families. The Health Office conducted socialization by holding a meeting to convey information about nutrition, which impacts on stunting.

If the child's body has not increased for 2 months in a row, it is necessary to consult a doctor that the child needs to have a growth disorder. This can be caused, perhaps, because the nutritional intake that the child needs is not proportional to the energy expended during activities. Then the counseling program must evaluate the complementary food menu that you give to children, whether the nutritional coverage is in accordance with the child's needs, the portion of food is in accordance with the needs of his body, and whether the variation of the menu provided already contains all the nutrients the body needs. These are the things that parents need to pay attention to if their child has growth disorders.

This is in accordance with the findings (Supariasa & Purwaningsih, 2019) that stunting prevention can be carried out with community empowerment programs. The community is asked to support the government, namely through specific nutrition interventions. They all receive health services through the community health center in their respective working areas to be able to involve the community in specific nutrition intervention activities. Such as involving PKK and Posyandu cadres to be able to convey information to the wider community about stunting.

The results of the study (Muthia & Yantri, 2019), found that one of the important factors in community empowerment was the family, in this case the mother. Mothers play an important role in overcoming stunting prevention in their children. Mother's knowledge about additional exclusive breastfeeding, timing of complementary feeding and types of breastfeeding according to age is very important.

According to Astuti et al (2019) Education is an obligation of every human being that must be pursued to hold responsibilities and try to produce progress in knowledge and experience for the lives of every individual. Education is one of the efforts to improve the ability of human intelligence, thus he is able to improve the quality of his life (Saleh and Mujahiddin, 2020). Education and skills are the main keys in gaining social status in community life (Lubis *et al*, 2019).

Constraints or factors are still high cases of stunting at the community health center level, which are influenced by the low level of education of rural communities, community structure, education level, limited health personnel and economic status. This is supported by researchers (Supariasa & Purwaningsih, 2019) who found that the dominant factor in stunting is the family economy. Furthermore, the factor of breastfeeding, the number of families, the education level of the father and the mother, the food security of the family, the accuracy of giving weaning food, and the level of health

The government has made efforts through the relevant institutions, in this case the community health center, to improve the nutritional quality of the community by conducting socialization about the community's understanding of the value of nutrition and

nutritious food to village cadres, PKK mothers, and by conducting PMTA activities. The importance of socialization to individuals, families, and the larger community about eating a balanced diet in accordance with nutritional standards is expected to prevent childhood stunting.

This result is supported by researchers (Muthia & Yantri, 2019), who found that to support government programs in reducing stunting rates, cross-sectoral community support is needed. In addition to the health sector, to overcome the stunting problem, non-health sectors, such as the Department of Food, Population, and Family Planning, are needed. These areas must be synergized in dealing with stunting in Indonesia.

In order to find a breakthrough program that can prevent stunting, the community health center took action together with village cadres. Cadres who have more information for the community are invited to socialize as a joint action to prevent stunting. The public needs to be informed or understand that stunting is not hereditary but a health disorder caused by poor nutrition. To prevent stunting, village officials, cadres and the health center put up a pamphlet containing an invitation to be aware of nutrition.

The results of the study (Vaivada et al., 2020) proved that joint action with village officials and posyandu cadres by involving community leaders in socializing specific nutrition intervention programs was able to reduce stunting rates in community health center areas. The health and nutrition education strategy carried out by the Air Beliti health center is based on family independence. The community health center provides counseling to the community about balanced nutrition and the importance of preventing stunting from an early age by providing information to parents, namely so that parents know the importance of nutritional adequacy in children, so that it will affect the growth and development of children. A 2019 study concluded that toddlers are important in fulfilling their nutrition. Important nutrients that need to be given to toddlers are vitamin A, zinc, micronitrite, omega 3, and protein.

This supports the results of research (Supriasa & Purwaningsih, 2019) that shows the target of counseling from the community health center in the context of health and nutrition education is posyandu cadres. Counseling can increase a mother's knowledge about health and nutrition, which has an impact on stunting. The Air Beliti health center has carried out cross-sectoral stunting prevention. The community health center continues to socialize the movement for healthy living by doing a 30-minute exercise stimulus in the morning before work activities. Public awareness of health is the foundation of a healthy and strong country so that the economy becomes strong. The healthy community movement continues to be socialized to remote villages through counseling by PKK cadres and Posyandu.

The Air Beliti Community Health Center 1000 HPK movement was carried out by the community health center in collaboration with village midwives. Village midwives were given the task of monitoring pregnant women from the first trimester until the baby was 24 months old. This program is carried out in collaboration between the community health center and midwives who work with pregnant women so that the program can be targeted.

IV. Conclusion

There is a significant relationship between the characteristics of the institution structure and the performance or success of the stunting program in the Air Biliti Community Health Center, Musi Rawas Regency. There is a significant relationship between network and communication with the performance and success of the stunting

program in the Air Biliti Community Health Center area, Musi Rawas Regency. There is a significant relationship between community needs and the performance or success of the stunting program in the Air Biliti Community Health Center, Musi Rawas Regency. There is no significant relationship between organizational culture and the performance or success of the stunting program in the Air Biliti Community Health Center area, Musi Rawas Regency. There is no significant relationship between the institution's external network and the performance or success of the stunting program in the Air Biliti Community Health Center area, Musi Rawas Regency.

Suggestion

Based on the results of the research, it shows that the structure of the institution, network and communication needs of the community are significantly related to the success rate of the stunting program. For the public health institution to continue to pay attention and improve the structure of the institution, namely the composition of the stunting prevention team, so that it is in accordance with the program launched, it is necessary to change the composition of the work team to accommodate program implementation. The need for network and communication enhancement is the need to intensify the activities of meetings with cadres to discuss the stunting country program. The Air Beliti Community Health Center should improve coordination with village cadres and midwives to identify community service needs. The services provided are in accordance with the expectations of the community.

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