

The Government Policy for Stunting Countermeasure Strategy in Indonesia be preparing for Golden Generation 2045

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Abstract

Indonesia is ranked 5th in the world for the highest prevalence of stunting with a prevalence of stunting reaching 37% (nearly 9 million children under five). The Indonesian government has carried out a series of strategies to reduce the prevalence of stunting. The purpose of this scientific work is to describe the government's strategy in efforts to reduce stunting in Indonesia to prepare for the 2045 golden generation, and to describe the implementation of the National Strategy in the National Action Plan for the Acceleration of Reducing Stunting Rates in Indonesia (RAN- PASTI) to prepare for the 2045 Golden Generation. **Results:** The results of this study are (1) The stunting management strategy is also included in the 2020-2024 RPJMN planning document. In the RPJMN, the handling of stunting is included in the 3rd Development Agenda, namely Increasing Qualified and Competitive Human Resources. (2) Implementation of the National Strategy in the National Action Plan for the Acceleration of Reducing Stunting Rates in Indonesia (RAN-PASTI) to Prepare for the 2045 Golden Generation RAN-PASTI is an implementation guideline for the National Strategy, mechanism for implementing work procedures, as well as Monitoring, Evaluation, and Reporting on the implementation of Acceleration Reducing stunting to achieve the target of a stunting prevalence rate of 14% in 2024 according to the mandate of Presidential Regulation No. 72 of 2021.

Keywords: Policy, Stunting Reduction, Golden Generation 2045.

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INTRODUCTION

The Indonesian state preparing for the golden generation of 2045 is not easy. This is because stunting is still a major nutritional problem for infants and children under the age of two in Indonesia. This condition will hamper the momentum of Indonesia's golden generation in 2045 and must be resolved immediately. Stunting is a disorder of growth and development of children due to chronic malnutrition and recurrent infections, which is characterized by the length or height below the standard set by the minister administering the affairs (Regulation of the President of the Republic of Indonesia Number 72 of 2021 concerning the Acceleration of Reduction of Stunting 2021). Stunting is malnutrition in infants in the first thousand days of life that lasts a long time and causes delays in brain development and child growth and development. Due to chronic malnutrition, stunted babies grow shorter than the standard height for toddlers of their age. However, it should be noted that

stunting must be short in stature, while those with short stature are of course stunting (Hafzana Bedasari, Frinda Novita, Azmi, Roli Sambuardi, Putri Safitri, 2021).

Lack of nutritional intake during the first 1000 days of life puts children at greater risk of death from infectious diseases, as well as difficulties in recovery (Papageorghiou, A.T., Ohuma, E.O., Altman, D.G., Todros, T., Cheikh, I.L., Lambert A., *et al.*, 2014) Nearly half of all deaths in children under 5 years are caused by malnutrition in developing countries, stunting affects one third of children under 5 years of age and 14% of child deaths are caused by stunting (Alam, M. A., Mahfuz, M., Islam, M. M., Mondal, D., Ahmed, A.M.S., Haque, R., & Hossain, M. I. 2017) . Most of the risk factors for stunting have been identified in epidemiological studies. However, the contribution of risk factors to stunting in various countries is relatively low. To estimate the incidence of stunting, it can be seen in the vulnerability period, namely in the first

1,000 days of life, which is caused by several factors in various developing countries, both from maternal and child ages up to 2 years.

The link between malnutrition and infection in the first 1000 days of a child's life can lead to stunting with immediate and long-term consequences, including impaired cognitive abilities, lower academic performance and reduced school and work performance Failure to thrive (Alam, M. A., Mahfuz, M., Islam, M. M., Mondal, D., Ahmed, A.M.S., Haque, R., & Hossain, M. I. 2017). Linear occurs starting from inside the uterus (World Health Organization. 2014) has a greater effect in children under 2 years of age. Girls who are stunted are not only shorter in adulthood but are also at risk of having stunted offspring (Black, R.E., Victora, C.G., Walker, S.P., Bhutta, Z.A., Christian, P., de Onis, M., Uauy, R. 2013).

Stunting is a condition of failure to thrive in children under five (babies under five years) resulting from chronic malnutrition so that children are too short for their age. Malnutrition occurs since the baby is in the womb and in the early days after the baby is born. The new stunting condition appears after the baby is 2 years old. Stunted and severely stunted toddlers are toddlers with body length (PB/U) or height (TB/U) according to their age compared to WHO-MGRS (Multicentre Growth Reference Study) 2006 standards. More specifically, The Ministry of Health of the Republic of Indonesia categorizes toddlers as stunted when their height compared to the average height of toddlers is less than -2 standard deviations (Z Score is less than -2) and is classified as severely stunted when their height compared to the average height of toddlers is less of -3 standard deviation (Z Score less than -3).

Toddlers who experience stunting will have a level of intelligence that is not optimal, making children more susceptible to disease and in the future can be at risk of decreasing productivity levels. In the end, stunting broadly will hamper economic growth, increase poverty and widen inequality. It is estimated that stunting and other nutritional problems are expected to reduce the Gross Domestic Product (GDP) by around 3% per year.

According to the results of Basic Health Research (Riskesdas) in 2013, Indonesia is ranked 5th in the world with the highest stunting prevalence reaching 37% (nearly 9 million children under five) (Intje Picauly, Theresia M. Sri Sarinah Lendes, Ivon Patrisia Paah, dan Robertha Kartini. 2021). The Indonesian government has carried out a series of strategies to reduce the prevalence of stunting. As a result, the stunting prevalence rate in Indonesia fell to 27.67% in 2019 (results of the Indonesian Toddler Nutrition Status Study, SSGBI 2019) and to 24.4% in 2021 (Paskalia Tri Kurniati. 2021) Data from the World Bank or the World Bank said that the workforce during

their infancy experienced stunting reaching 54%. This means that as much as 54% of the current workforce is stunting survivors (Bakti Sutopo, Riza Dwi Tyas W. 2021). Based on this background, the government must pay serious attention to the problem of stunting. Beginning in 2021, the Government of Indonesia is targeting the stunting rate to drop to 14 percent in 2024 (Suriani Ginting, Adelima CR Simamora, Nova Siregar2022) In the context of realizing healthy, intelligent and productive human resources, as well as achieving sustainable development goals, an acceleration of stunting reduction is carried out which is regulated in a policy, namely a Presidential Regulation Republic of Indonesia Number 72 of 2021 concerning the Acceleration of Stunting Reduction.

Specifically, this Presidential Regulation appoints the Head of the BKKBN as the Chief Executive for the Acceleration of Stunting Reduction. This Presidential Regulation has been followed up by the Head of the BKKBN by issuing National Population and Family Planning Agency Regulation Number 12 of 2021 concerning the National Action Plan for the Acceleration of Decreasing Indonesia's Stunting Rate for 2021-2024 (RAN-PASTI). To oversee and ensure that the implementation of the Acceleration of Stunting Reduction goes according to the direction and targets that has been set, namely preparing for the golden generation of 2045. From the problems that have been described above, the formulation of the problem of this research is: (1) What is the government's strategy in efforts to reduce stunting in Indonesia to prepare for the 2045 Golden Generation? (2) What is the implementation of the National Strategy in the National Action Plan to Accelerate the Reduction of Indonesia's Stunting Rate (RAN-PASTI) to prepare for the 2045 Golden Generation?

MATERIALS AND METHODS

The research to be conducted is normative legal research, namely research conducted by analyzing problems using legal principles and legal principles. Researchers want to see the extent to which legal provisions are the basis and foundation for the issues being discussed by conducting a literature study (Library Research). The nature of this research is analytical descriptive, namely a study that aims to describe (describe) the facts and conditions or symptoms that are the object of research, after which a critical analysis is carried out, in the sense of providing explanations for these facts or symptoms, both within the framework of systematization or synchronization. , based on the juridical aspect will thus answer the problems that are the object of research.

In this study, several approaches were used, with this approach the researcher will get information from various aspects regarding the issue of the problem that is being sought for an answer. This research itself will use a normative approach or a statute approach.

This approach is carried out by examining all laws and regulations related to the problems that are the object of this research. The normative approach is intended to solve problems which are the object of the problem in research, namely to review the legal basis and principles regarding Government Policy in the Strategy for Reducing Stunting in Indonesia to Prepare for the 2045 Golden Generation.

RESULTS

1. The Government's Strategy in Efforts to Reduce Stunting in Indonesia to Prepare for the 2045 Golden Generation

The impact of stunting in the short term is the increased incidence of death and morbidity, cognitive, motoric and verbal development in children is not optimal, and an increase in the burden of health costs (Adilla Dwi Nur Yadika, Khairun Nisa Berawi, Syahrul Hamidi Nasution. 2019) The long-term impacts are body posture that is not optimal as an adult (shorter than his age), increased risk of obesity and other diseases, decreased reproductive health, school performance and children's learning capacity are not optimal, and work capacity and productivity are not optimal. The causes of stunting include a lack of nutrition in children in the first thousand days, low environmental hygiene so that children are easily infected, and poor parenting patterns due to the mother's condition being too young or the distance between pregnancies too close (Aeda Ernawati. 2020) .To prevent stunting, this can be done in a way that pregnant women are advised to take iron supplement tablets every day during pregnancy and attend classes for pregnant women at least four times during pregnancy. Furthermore, mothers can do Infant and Child Feeding (PMBA), Early Breastfeeding Initiation (IMD), Exclusive Breastfeeding, Complementary Feeding, Breastfeeding until the child is two years old. Mothers have to bring them to the Posyandu regularly once a month and all family members use healthy latrines.

The government's commitment and initiatives in overcoming the problem of stunting have started since Indonesia joined the Global Scaling up Nutrition (SUN) movement in 2011. The movement, which was launched in 2010, departs from the common view that all citizens have the right to have access to adequate food and nutritious. Furthermore, in 2013 the Government launched the National Movement to Accelerate Nutrition Improvement (Gernas PPG) which was stipulated through Presidential Regulation no. 42 of 2013 concerning Gernas PPG within the 1,000 HPK frameworks. Gernas PPG is coordinated by the Coordinating Minister for Human Development and Culture as Chair of the Task Force. The government has also included stunting prevention indicators and targets as national development goals and stated in the 2015-2019 National Medium Term Development Plan (RPJMN). In line with that, the government also issued Presidential Regulation Number 59 of 2017 concerning

Implementation of the Achievement of Sustainable Development Goals (TPB). Efforts to accelerate nutrition improvement are part of SDGs two goals, namely ending hunger, achieving food security and better nutrition and supporting sustainable agriculture. Stunting has been defined as a national priority in planning documents and SDGs.

However, various programs related to stunting prevention that had been held previously were deemed not to be effective or had not occurred on an adequate scale. Furthermore, in August 2017 the Secretariat of the Vice President together with the Coordinating Ministry for Human Development and Culture, the Ministry of Home Affairs, the Ministry of National Development Planning/Bappenas and the National Team for the Acceleration of Poverty Reduction (TNP2K) issued the National Strategy for Accelerating the Prevention of Dwarfs (Stunting) (Made Agus Sugianto dan Dewa Ayu Raka Dewi.2020). This strategy consists of five pillars which contain activities to accelerate stunting prevention, namely:

- 1) Commitment and leadership vision;
- 2) National campaign and behavior change communication;
- 3) Convergence, coordination and consolidation of central, regional and village programs;
- 4) Nutrition and food security; and
- 5) Monitoring and Evaluation. This is proof of the Government's commitment to overcoming the problem of stunting in Indonesia.

In order to increase the commitment and capacity of regions and stakeholders in planning and implementing integrated stunting reduction interventions in districts/cities, the Ministry of National Development Planning/Bappenas is holding a Stunting Summit event with the theme "Together Prevent Stunting" on March 28 2018, at the Borobudur Hotel, Jakarta (Kinanti Rahmadhita.2020) This theme was chosen because the Ministry of National Development Planning/Bappenas is of the view that the handling of the problem of stunting in Indonesia must be carried out using a multi-sector approach, involving 17 technical Ministries/Institutions (K/L) and one Coordinating Ministry, as well as working with development stakeholders, including local government, business world, civil society groups, professional and academic organizations, development partners, and the mass media. Attended by 34 governors throughout Indonesia, 100 regents/mayors of priority locations for stunting reduction, 33 regents for Community-Based Health and Nutrition Project (PKGBM) locations, as well as 100 village heads, with a total of 1,000 Stunting Summit participants (Kementerian Perencanaan Pembangunan Nasional. 2018).

The National Strategy for Accelerating the Prevention of Dwarfing Children (Stunting) was prepared based on global experience which shows that

implementing integrated nutrition interventions, including specific nutrition interventions and sensitive nutrition by targeting priority groups in priority locations is the key to success in improving nutrition, child growth and development, and preventing stunting. The general objective of the National Strategy for the Acceleration of Stunting Prevention is to accelerate stunting prevention within the framework of existing policies and institutions. These objectives will be achieved through five specific objectives as follows:

- 1) Ensuring stunting prevention is a priority for the government and society at all levels;
- 2) Increasing public awareness and changing people's behavior to prevent stunting;
- 3) Strengthening convergence through coordination and consolidation of central, regional and village programs and activities;
- 4) Increasing access to nutritious food and promoting food security; and
- 5) Improve monitoring and evaluation as a basis for ensuring quality service delivery, increasing accountability, and accelerating learning.

The stunting management strategy is also outlined in the 2020-2024 RPJMN planning document. In the RPJMN, the handling of stunting is included in the 3rd Development Agenda, namely Increasing Qualified and Competitive Human Resources. One of the policy directions of the 2020-2024 RPJMN is to improve health services towards universal health coverage, especially strengthening primary health care services by encouraging increased promotive and preventive efforts supported by innovation and the use of technology. One of the targets that must be achieved by 2024 is to reduce the prevalence of stunting in children under five years of age to 14%.

The strategy for improving health services towards universal health coverage in the 2020-2024 RPJMN planning document is through accelerating the improvement of community nutrition to prevent and overcome multiple nutritional problems, including:

- 1) Strengthening commitment, campaigning, monitoring and evaluating efforts to improve community nutrition;
- 2) Development of a nutritional guarantee system and child growth and development by providing guarantees for nutritional intake from the womb, improving family parenting patterns, and improving clean water and environmental sanitation facilities;
- 3) Accelerating the reduction of stunting by increasing the effectiveness of specific interventions, expanding and sharpening sensitive interventions in an integrated manner;
- 4) Increasing interventions that are lifesaving in nature supported by evidence (evidence-based policy) including food fortification;

- 5) Strengthening advocacy and communication of behavior change, especially encouraging the fulfillment of balanced nutrition based on food communication (food based approach);
- 6) Strengthening the nutrition surveillance system;
- 7) Increased commitment and assistance for regions in nutrition improvement interventions with strategies according to local conditions;
- 8) Quick response to improve nutrition in emergency conditions

Furthermore, on August 5, 2021 the President issued Presidential Regulation Number 72 of 2021 concerning the Acceleration of the Reduction of Stunting. The main points of the presidential regulation are as follows.

2. Goals and Targets of the National Strategy to Accelerate the Reduction of Stunting

The National Strategy to Accelerate the Reduction of Stunting aims to:

- 1) Reduce the prevalence of stunting;
- 2) Improve the quality of preparation for family life;
- 3) Ensure the fulfillment of nutritional intake;
- 4) Improve parenting;
- 5) Increasing access to and quality of health services; and
- 6) Improve access to drinking water and sanitation.

The National Strategy is also implemented to achieve the Sustainable Development Goals (TPB) target in 2030 with an intermediate target of 14% in 2024. The 2025-2030 targets will be determined based on an evaluation of the achievement of the 2024 intermediate target. The achievement of the TPB target is carried out through the implementation of 5 (five) pillars in the National Strategy for the Acceleration of Stunting Reduction, namely:

1. **Pillar 1:** Increasing leadership commitment and vision in ministries/agencies, provincial Regional Governments, district/city Regional Governments, and Village Governments;
2. **Pillar 2:** Improvement of behavior change communication and community empowerment;
3. **Pillar 3:** Increasing the convergence of Specific Interventions and Sensitive Interventions in ministries/agencies, provincial Regional Governments, Regency/City Regional Governments, and Village Governments;
4. **Pillar 4:** Improving food and nutrition security at individual, family and community levels; and
5. **Pillar 5:** Strengthening and developing systems, data, information, research and innovation.

To implement the National Strategy to Accelerate Stunting Reduction, an Action Plan is also prepared which is stipulated by the Head of the BKKBN. The Action Plan includes, among others:

- 1) Provision of data on families at risk of stunting;
- 2) Assistance to families at risk of stunting;
- 3) Accompaniment of all prospective brides/prospective Couples of Reproductive Age (PUS);
- 4) Surveillance of families at risk of stunting; and
- 5) Stunting case audit.

The National Strategy for Accelerating the Reduction of Stunting is implemented by ministries/agencies, Provincial Governments, Regency/City Governments, and Village Governments by carrying out:

- 1) Strengthening planning and budgeting;
- 2) Improving the quality of implementation;
- 3) Improving the quality of monitoring, evaluation, and reporting; and
- 4) Human resource capacity.
- 5) Coordination of the Implementation of the Accelerated Reduction of Stunting.

The aim of coordination is to increase the effectiveness of stunting prevention through

synchronization, harmonization and integration between various stunting prevention priority activities (Yurista Permanasari, *et al.*, 2020). Coordination is strengthened at every level of administration from the central level to the village level, with specific roles and functions. To coordinate the implementation of the Acceleration of Stunting Reduction, a Team for the Acceleration of Stunting Reduction was formed which has the task of coordinating, synergizing, and evaluating the implementation of the Accelerated Stunting Reduction in an effective, convergent and integrated manner by involving cross-sectors at the central and regional levels. The team consists of Directors and Implementers at the central level. Meanwhile, to coordinate regional implementation, a team for the Acceleration of Stunting Reduction was also formed at the provincial, district/city, and village/kelurahan levels.

3. Intervention Targets and Ministries/Institutions that is Responsible for the Intervention to Accelerate the Reduction of Stunting

The intermediate target in the National Strategy to Accelerate the Reduction of Stunting is the stunting prevalence rate of 14% in 2024 divided into targets for two types of interventions with twenty Target Indicators, as follows:

No.	Target Indicator	Intermediate targets	Agency Guarantor Answer
A	AVAILABILITY OF SPECIFIC INTERVENTION SERVICES		Ministry of Health
1	Percentage of pregnant women with Chronic Energy Deficiency (KEK) who receive additional nutritional intake.	90%	Ministry of Health
2	Percentage of pregnant women who consume blood supplement tablets (TTD) at least 90 tablets during pregnancy.	80%	Ministry of Health
3	Percentage of young women who consume blood supplement tablets (TTD).	58%	Ministry of Health
4	Percentage of infants aged less than 6 months receiving exclusive breast milk.	80%	Ministry of Health
5	Percentage of children aged 6-23 months who received complementary foods for breast milk (MP-ASI).	80%	Ministry of Health
6	Percentage of severely malnourished children under five years of age (toddlers) receiving malnutrition management services.	90%	Ministry of Health
7	Percentage of children under five years of age (toddlers) whose growth and development was monitored.	90%	Ministry of Health
8	Percentage of malnourished children under five years of age (toddlers) who receive additional nutritional intake.	90%	Ministry of Health
9	Percentage of children under five who received complete basic immunization.	90%	Ministry of Health
B	AVAILABILITY OF SENSITIVE INTERVENTION SERVICES		
1	Percentage of postnatal family planning (KB) services.	70%	BKKBN
2	The percentage of unwanted pregnancies.	15,50%	BKKBN
3	Coverage of prospective couples of childbearing age (PUS) who receive health checks as part of marriage services.	90%	BKKBN
4	Percentage of households that have access to proper drinking water in priority districts/cities.	100%	PUPR Ministry
5	Percentage of households that have access to proper sanitation (domestic wastewater).	90%	PUPR Ministry

No.	Target Indicator	Intermediate targets	Agency Guarantor Answer
	priority location districts/cities.		
6	Coverage of Contribution Assistance Recipients (PBI) of the National Health Insurance.	112.9 million population	Ministry of Health
7	Coverage of families at risk of stunting who receive assistance.	90%	BKKBN
8	Number of poor and vulnerable families who receive conditional cash assistance.	10,000,000 Family	Ministry of Health
9	Percentage of targets who have a good understanding of stunting in priority locations.	70%	Ministry of Health
10	Number of poor and vulnerable families receiving food social assistance.	15.600.039 Family	Ministry of Health
11	Percentage of villages/kelurahan that stop open defecation free (ODF).	90%	Ministry of Health

4. Implementation of the National Strategy in the National Action Plan for the Acceleration of Decreasing Stunting Rates in Indonesia (RAN-PASTI) to Prepare for the 2045 Golden Generation

In Presidential Regulation Number 72 of 2021 concerning accelerating the reduction of stunting, one of the priority activities contained in the National Action Plan for the Acceleration of Stunting Reduction (RAN PASTI) is the implementation of assistance for families at risk of stunting, assistance for all prospective brides/prospective couples of childbearing age (PUS) and family surveillance risk of stunting. Realizing the golden generation of 2045 is Indonesia's dream. It is hoped that at its 100th year, Indonesia will be able to take advantage of demographic bonus opportunities by providing quality human resources, namely human resources who are healthy, intelligent, creative and competitive. It can be said that the main key in realizing this dream lies in preparing the next generation of quality.

The short-term impact of stunting is the disruption of brain development, intelligence, physical growth disorders and metabolic disorders, while the long-term impact is a decrease in the cognitive development ability of the child's brain, learning difficulties, weak immunity so that they get sick easily and have a high risk of developing metabolic diseases. Even when they grow up they will have short bodies, low productivity levels and no competitiveness in the world of work. Stunting is a major threat in realizing quality Indonesian human resources. The policy direction for implementing family assistance in an effort to accelerate the reduction of stunting in villages/subdistricts refers to the 4 (four) points below, which are in line with the goals of the national strategy to accelerate stunting reduction in accordance with Presidential Regulations RI Number 72 of 2021 concerning Accelerating the Reduction of Stunting, namely (Ari Dermawan, Mahanim, Nurainun Siregar. 2022).

- 1) Reducing the prevalence of stunting;
- 2) Improving the quality of preparation for family life;
- 3) Ensuring the fulfillment of nutritional intake;
- 4) Improving parenting;

- 5) Improving access and quality of health services; and
- 6) Improving access to drinking water and sanitation.

RAN-PASTI is an implementation guideline for the National Strategy, work procedures for implementation, as well as Monitoring, Evaluation, and Reporting on the implementation of the Acceleration of Stunting Reduction to achieve the target of a stunting prevalence rate of 14% in 2024 according to the mandate of Presidential Regulation No. 72 of 2021, with the principal - principal as follows:

The National Action Plan for the Acceleration of Stunting Reduction uses three approaches (the nutrition intervention approach, the multi-sector and multi-stakeholder approach, as well as the family-based approach to stunting risk) which serve to sharpen all activities to accelerate stunt reduction carried out by the central government, regional governments and village governments towards beneficiaries and significantly reduce stunting.

The strategy for the Acceleration of Stunting Reduction is carried out through the implementation of priority activities in the national action plan for the Acceleration of Stunting Reduction which includes:

- 1) Provision of data on families at risk of stunting;
- 2) Assistance to families at risk of stunting;
- 3) Accompaniment of all prospective brides/potential couples of childbearing age;
- 4) Surveillance of families at risk of stunting;
- 5) Stunting case audit;
- 6) Planning and budgeting;
- 7) Supervising and fostering accountability for the implementation of activities for the Acceleration of Stunting Reduction;
- 8) Monitoring, Evaluation and Reporting.

The implementation of these priority activities is divided into three interrelated clusters, namely:

- 1) Precision data clusters; provision of up to date, real time and regular / routine data on the target of stunting reduction acceleration. The Family Assistance Team (which consists of midwives,

- PKK, and cadres), as well as the Data Control Center play a central role in this cluster.
- 2) Operational clusters; Based on the available data, specific intervention activities and sensitive interventions in accelerating the reduction of stunting are expected to be timeliness of services, complete (seamlessness), coordinated, easy access, and interventions adapted to circumstances. Individuals/families at risk (service tailored for individual circumstances). The Family Assistance Team plays a central role in this cluster.
 - 3) Managerial cluster. The strategies in this cluster include, among others:
 - a. Coordinate implementing institutions to accelerate stunting reduction;
 - b. Integrating planning and budgeting;
 - c. Integrate and update data and information;
 - d. Supervise and foster accountability for the implementation of integrated activities;
 - e. Conduct integrated monitoring, evaluation and reporting. TPPS plays a central role in this cluster.

In implementing the National Action Plan for the Acceleration of Stunting Reduction, ministries/agencies, provincial regional governments, district/city regional governments, and village governments make efforts within the main framework as follows:

- 1) Strengthening Planning and Budgeting.
- 2) Implementation Quality Improvement.
- 3) Improving the Quality of Monitoring, Evaluation, and Reporting.
- 4) Human Resources Capacity Building.

The framework for implementing the National Action Plan for the Acceleration of Stunting Reduction in detail can be seen in Appendix I of this guideline. Detailed action plans, priority activities, operational activities, indicators of success, goals, units, targets, persons in charge, and supporting Ministries/Institutions can be seen in the National Action Plan Matrix for the

Acceleration of Stunting Reduction (Appendix II to this guideline).

The mechanism of work procedures regulates the mechanism of work procedures for the Executor and the executive secretariat at the central level; and regional TPPS work procedures. At the central level, the Executor's work procedure mechanism is carried out through a coordination forum and assistance for Families at Risk of Stunting which includes (Priyono.2020):

- 1) National coordination meeting for the Acceleration of Stunting Reduction;
- 2) Central level TPPS coordination meeting;
- 3) TPPS executive coordination meeting at the central level;
- 4) Technical coordination meetings; and
- 5) Assistance team for Families at Risk of Stunting.

Implementation of Monitoring and Evaluation is carried out 2 (two) times in 1 (one) year or at any time if necessary with the following reporting mechanism:

- 1) The Village Head/Lurah reports the Implementation of the Acceleration of Stunting Reduction at the village/kelurahan level in their area to the Regent/Mayor.
- 2) Regents/Mayors report the Implementation of the Acceleration of Stunting Reduction at the district/city level in their territory to the Governor.
- 3) The governor reports on the Implementation of the Acceleration of Stunting Reduction at the provincial level in his territory to the Ministry of Home Affairs as deputy chairman of the field of coordinating the development and supervision of the implementation of the Regional Government.
- 4) Ministries/agencies report the Implementation of the Accelerated Reduction of Stunting to the Ministry of National Development Planning.

LEVELS	IMPLEMENTATION OF ACTIVITIES
Provincial Level	<ol style="list-style-type: none"> 1. Strengthen the legal aspects of accelerating the reduction of stunting; <ol style="list-style-type: none"> a. Form KPPS at the provincial level consisting of cross-sectoral and stakeholders; and b. Establish guidelines/technical instructions for accelerating the reduction of stunting in the province. 2. Planning and budgeting; <ol style="list-style-type: none"> a. Prioritize specifically efforts to accelerate the reduction of stunting in the Regional Government work plan; b. Tagging specific, sensitive and coordinative intervention budgets; c. Develop a database of RAN-PASTI implementation plans; and d. Synchronizing planning and budgeting between provincial offices, DPRD and stakeholders through musrenbang/stunting meetings and various funding schemes. 3. Implementation; <ol style="list-style-type: none"> a. Strengthening coordination, synergy and synchronization of the implementation of activities between agencies and Stakeholders; and b. Coordinating institutional and human resource capacity building; 4. Monitoring, evaluation and reporting;

LEVELS	IMPLEMENTATION OF ACTIVITIES
	<ul style="list-style-type: none"> a. Verify and validate data related to the acceleration of reduction in stunting; b. Evaluate the implementation of accelerated reduction of stunting periodically; and c. Preparing reports per semester, per year or if necessary in the implementation of RAN-PASTI at the provincial level.
Regency/city level	<ul style="list-style-type: none"> 1) Strengthen the legal aspects of accelerating the reduction of stunting; <ul style="list-style-type: none"> a. Form TPPS at the district/city level consisting of cross-sectoral and stakeholders; and b. Stipulate technical guidelines/instructions to accelerate the reduction of stunting at the district, city and village levels. 2) Planning and budgeting; <ul style="list-style-type: none"> a. Prioritize specifically efforts to accelerate the reduction of stunting in the Regional Government work plan; b. Tagging specific, sensitive and coordinative intervention budgets; c. Develop a database of RAN-PASTI implementation plans; and d. Synchronizing planning and budgeting between agencies, DPRD, stakeholders through musrenbang/stunting meetings and various funding schemes. 3) Implementation; <ul style="list-style-type: none"> a. Strengthening coordination, synergy and synchronization of the implementation of cross-agency activities and Stakeholders; and b. Coordinating institutional and human resource capacity building; 4) Monitoring, evaluation and reporting; <ul style="list-style-type: none"> a. Verify and validate data related to the Accelerated Reduction of Stunting; b. Periodically evaluate the implementation of the Accelerated Reduction of Stunting; and c. Prepare reports per semester, per year or if necessary in the implementation of RAN-PASTI at the district/city level.
District level	<ul style="list-style-type: none"> 1. Strengthen the legal aspects of implementing the acceleration of stunting reduction by establishing KPPS at the sub-district level which consists of cross-sectors and stakeholders. 2. Planning and budgeting; facilitating village/kelurahan planning and budgeting related to efforts to accelerate the reduction of stunting. 3. Implementation; <ul style="list-style-type: none"> a. Carry out the function of coordinating field mobilization and joint services with the village/kelurahan government regarding the implementation of activity implementation; and b. Carry out the supervisory function of the implementation of efforts to accelerate the reduction of stunting at the village/kelurahan level; 4. Monitoring, evaluation and reporting; <ul style="list-style-type: none"> a. Verify and validate data related to the Accelerated Reduction of Stunting; b. Coordinating periodic reports regarding the implementation of RAN-PASTI at the village/kelurahan level.
Village/Kelurahan level	<ul style="list-style-type: none"> 1. Strengthen the legal aspects of the Acceleration of Stunting Reduction by establishing KPPS at the village/kelurahan level consisting of village/kelurahan officials and stakeholders. 2. Planning and budgeting; <ul style="list-style-type: none"> a. Prioritize specifically efforts to accelerate the reduction of stunting in the village government work plan; b. Tagging specific, sensitive and coordinative intervention budgets; c. Develop a database of RAN-PASTI implementation plans; d. Synchronizing planning and budgeting with village community organizations, village consultative bodies, stakeholders through musrenbang/stunting meetings and various funding schemes. 3. Implementation; <ul style="list-style-type: none"> a. Coordinate family assistance; and b. To coordinate institutional and human resource capacity building; 4. Monitoring, evaluation and reporting; <ul style="list-style-type: none"> a. Record, collect data related to specific and sensitive interventions through routine data; b. Periodically evaluate the implementation of the Accelerated Reduction of Stunting; and c. Make reports per semester, per year or if needed in relation to the implementation of RAN-PASTI in the village/kelurahan.

Limitations

Formulate the forms of policies issued by the government to reduce stunting in Indonesia and the

strategies adopted by the government to prepare for the golden generation of 2045, because Indonesia is ranked 5th in the world for the highest prevalence of stunting

with a prevalence of stunting reaching 37% (nearly 9 million children under five).

CONCUSSION

The stunting management strategy is also outlined in the 2020-2024 RPJMN planning document. In the RPJMN, the handling of stunting is included in the 3rd Development Agenda, namely Increasing Qualified and Competitive Human Resources. One of the policy directions of the 2020-2024 RPJMN is to improve health services towards universal health coverage, especially strengthening primary health care services by encouraging increased promotive and preventive efforts supported by innovation and the use of technology. Furthermore, on August 5, 2021 the President issued Presidential Regulation Number 72 of 2021 concerning the Acceleration of the Reduction of Stunting. The goals and objectives of the National Strategy to Accelerate Stunting Reduction are to: reduce the prevalence of stunting; improve the quality of preparation for family life; ensure the fulfillment of nutritional intake; improve parenting; increasing access to and quality of health services; and increasing access to drinking water and sanitation. Implementation of the National Strategy in the National Action Plan for the Acceleration of Reducing Stunting Rates in Indonesia (RAN-PASTI) to Prepare for the 2045 Golden Generation RAN-PASTI is an implementation guideline for the National Strategy, mechanism for implementing work procedures, as well as Monitoring, Evaluation, and Reporting on the implementation of the Acceleration of Decline Stunting to achieve the target of a stunting prevalence rate of 14% in 2024 according to the mandate of Presidential Regulation No. 72 of 2021, with the following main points: , as well as a family-based approach to stunting risk) which serves to sharpen all activities to accelerate stunting reduction carried out by the central government, regional government and village government towards beneficiaries and have a significant impact on reducing stunting.

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REFERENCES

- Aeda, E. (2020). Gambaran Penyebab Balita Stunting di Desa Lokus Stunting Kabupaten Pati. *Jurnal Litbang: Media Informasi Penelitian, Pengembangan dan IPTEK*, 16(2), 77-94.
- Alam, M. A., Mahfuz, M., Islam, M. M., Mondal, D., Ahmed, A. M. S., Haque, R., & Hossain, M. I. (2017). Contextual factors for stunting among children of age 6 to 24 months in an underprivileged community of Dhaka, Bangladesh.

Indian Pediatrics, 54(5), 373– 376. 10.1007/s13312-017-1109-z.

- Ari Dermawan, M., & Nurainun, S. (2022). Upaya Percepatan Penurunan Stunting Di Kabupaten Asahan. *Jurnal Bangun Abdm*, 1(2), 98-104.
- Bakti, S., & Riza Dwi Tyas, W. (2021). Penyuluhan Pencegahan Stunting dan Pendampingan Parenting bagi Masyarakat Desa Ketro. *Jurnal Abdid*, 2(6), 1301-1310.
- Black, R. E., Victora, C. G., Walker, S. P., Bhutta, Z. A., Christian, P., de Onis, M., & Uauy, R. (2013). Maternal and child undernutrition and overweight in low-income and middle-income countries. *Lancet*, 282, 427 10.1016/S0140-6736(13)60937-X.
- Hafzana, B., Frinda, N., Azmi, R. S., & Putri, S. (2021). Implementasi Kebijakan Cegah Stunting Di Desa Sepedas Kelurahan Pasir Panjang Kabupaten Karimun. *Jurnal Awam*, 1(2), 45-50.
- Intje, P., Theresia, M., Sri Sarinah, L., Ivon Patrisia, P., & Robertha, K. (2021). Pendampingan 25 Indikator Percepatan Penurunan Stunting Di Kabupaten Sumba Barat Daya (Sbd) Propinsi Nusa Tenggara Timur. *Jurnal Pengabdian pada Masyarakat Kepulauan Lahan Kering*, 2(1), 1-14. e-ISSN: 2746-2234.
- Kementerian Perencanaan Pembangunan Nasional. (2018). Siaran Pers Stunting Summit : Komitmen Bersama Turunkan Prevalensi Stunting Di Indonesia.
- Made Agus, S., & Dewa Ayu, R. D. (2020). Strategi Menurunkan Angka Stunting Di Kabupaten Badung. *Jurnal Analis Kebijakan*, 4(1), 57- 68.
- Papageorghiou, A. T., Ohuma, E. O., Altman, D. G., Todros, T., Ismail, L. C., Lambert, A., ... & Villar, J. (2014). International standards for fetal growth based on serial ultrasound measurements: the Fetal Growth Longitudinal Study of the INTERGROWTH-21st Project. *The Lancet*, 384(9946), 869-879.
- Priyono, P. (2020). Strategi Percepatan Penurunan Stunting Perdesaan (Studi Kasus Pendampingan Aksi Cegah Stunting di Desa Banyumundu, Kabupaten Pandeglang). *Jurnal Good Governance* 16(2), 315-328.
- Rahmadhita, K. (2020). Permasalahan Stunting dan Pencegahannya. *Jurnal Ilmiah Kesehatan Sandi Husada*, 9(1), 225-229.
- Suriani, G., Adelima, C. R. S., & Nova, S. (2022). Pengaruh Penyuluhan Kesehatan dengan Media Audio Visual Terhadap Perubahan Pengetahuan, Sikap dan Praktik Ibu dalam Pencegahan Stunting di Kecamatan Doloksanggul Kabupaten Humbang Hasundutan Tahun 2021. *Journal of Healthcare Technology and Medicine*, 8(1), 290-299.
- Walker, S. P., Chang, S. M., Powell, C. A., & McGregor, G. S. M. (2005). Effects of early childhood psychosocial stimulation and nutritional

supplementation on cognition and education in growth-stunted Jamaican children: Prospective cohort study. *The Lancet*, 366(9499), 1804–1807.

- World Health Organization. 2014. Global nutrition targets 2025: Stunting policy brief. Retrieved November 2020 from http://www.who.int/nutrition/publications/globaltargets2025_policybrief_stunting/en/.
- Yadika, A. D. N., Berawi, K. N., & Nasution, S. H. (2019). Pengaruh stunting terhadap perkembangan kognitif dan prestasi belajar. *Jurnal Majority*, 8(2), 273-282.
- Yurista, P., Meda, P., Joko, P., Bunga, C. R., Made, D. S., Ekowati, R., Agus, T., & Rachmalina, S. P. (2020). Tantangan Implementasi Konvergensi pada Program Pencegahan Stunting di Kabupaten Prioritas. *Media Penelitian dan Pengembangan Kesehatan*, 30(4), 315-328.