




IMPLEMENTATION OF DIRECTOR GENERAL HEALTH REGULATION ON LOCAL FOOD SUPPLEMENT FOR PREGNANT WOMEN AND TODDLERS TO PREVENT STUNTING

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Abstract

Background: Stunting is a serious public health issue in Indonesia. To address this, the Directorate General of Public Health issued a technical regulation on the provision of local food-based supplementary feeding for pregnant women and toddlers. This study aims to analyze the implementation of Regulation No. HK.02.02/B/1622/2023 regarding this policy in Kediri Regency. **Method:** A qualitative case study approach was used, with purposive sampling of key informants including heads of community health centers, nutrition officers, cadres, pregnant women, and mothers of stunted toddlers. Data were collected through observations and interviews in July 2025. Ethical approval was obtained. **Result:** Findings show that the implementation of the supplementary feeding program using local foods positively contributes to stunting prevention among pregnant women and toddlers in Kediri. Program monitoring is conducted through regular recording, structured reporting, and periodic evaluation. Funding primarily comes from the Health Operational Assistance Fund (BOK), managed transparently by the health centers. **Conclusion:** the policy has been effectively implemented in several health facilities, making it a strategic effort to combat stunting in Kediri Regency, particularly through the distribution of locally based supplementary food.

Keyword : Stunting Prevention, Local Food Supplementation, Public Health Policy

INTRODUCTION

Stunting remains a significant public health challenge in Indonesia and continues to be a government priority (Ariyanti et al., 2023). This condition of chronic malnutrition negatively impacts human capital by impairing both physical and cognitive development, which consequently reduces learning capacity and future productivity (Sumartini, 2020; Lestari et al., 2024). Furthermore, stunted children face a higher likelihood of non-communicable diseases later in life, such as diabetes and hypertension (Rahman et al., 2021). Despite ongoing efforts, the

national stunting prevalence was 21.5% in 2023, with a targeted reduction to 14% by 2024 (Central Bureau of Statistics, 2023).

To address this, the government has issued strategic policies such as Presidential Regulation No. 72 of 2021, emphasizing multisectoral and coordinated interventions (Situmorang, 2023; Sahroji, Hidayat, & Nababan, 2022). A key intervention is the provision of local food-based supplementary feeding (PMT) for pregnant women and toddlers, mandated by Regulation No. HK.02.02/B/1622/2023 of 2023



(Ministry of Health, 2023). This approach optimizes local food resources to sustainably improve nutritional intake (Food Security Agency, 2020; Jayadi et al., 2024).

However, challenges remain in program implementation, including distribution inefficiencies and intersectoral coordination, especially in regions like Kediri Regency, where stunting rates, although declining, remain notable at 7.9% as of February 2024 (East Java Statistics Agency, 2023; Phitra, Lipoeto, & Yetti, 2023). Therefore, it is crucial to analyze how the supplementary feeding policy is executed in terms of planning, implementation, monitoring, and financing in this region (Maigoda, Rizal, & Suryani, 2024).

This study aims to evaluate the implementation of Regulation No. HK.02.02/B/1622/2023 regarding local food-based supplementary feeding for pregnant women and toddlers and its effectiveness in stunting reduction in Kediri. It is hypothesized that effective policy implementation positively correlates with a reduction in stunting prevalence in the area. The findings are expected to provide recommendations to enhance program targeting and impact.

METHOD

This study employs a qualitative approach with a case study design aimed at obtaining an in-depth understanding of the implementation of the Directorate General of Public

Health Regulation No. HK.02.02/B/1622/2023 concerning the provision of local food-based supplementary feeding for pregnant women and toddlers in stunting prevention efforts in Kediri Regency. According to Sugiyono (2021), the qualitative method is suitable for investigating phenomena in their natural settings, where the researcher acts as the primary instrument, data collection involves triangulation, and data analysis is inductive in nature.

The research was conducted in Kediri Regency, which includes 37 community health centers (Puskesmas) implementing the local food-based supplementary feeding program as part of the stunting reduction acceleration effort. Sampling was performed using purposive sampling, a non-random technique where informants are deliberately selected based on specific criteria to obtain representative and in-depth data (Sugiyono, 2016; Arikunto, 2006; Hasan et al., 2025).

The sample consisted of 15 key informants, comprising 3 heads of Puskesmas, 3 nutrition officers, 3 Posyandu cadres, 3 pregnant women receiving supplementary feeding, and 3 mothers of toddlers receiving supplementary feeding, chosen due to their direct involvement and strategic roles in program implementation. Data were collected through in-depth interviews guided by semi-structured protocols, participatory observations conducted onsite, and documentary

reviews of program administration records.

Data collection took place during July 2025, with periodic visits to each site. Data analysis was conducted qualitatively through three main stages: data reduction, data presentation, and thematic conclusion drawing (Sugiyono & Puspanthani, 2020). Data validity was enhanced using source and method triangulation to improve the reliability and depth of insights into the policy implementation phenomenon comprehensively.

RESULT AND DISCUSSION

This study involved 15 informants, consisting of community health

center (Puskesmas) heads, nutrition officers, health cadres, pregnant women, and mothers with toddlers who received local food-based supplementary feeding (PMT). The informants were drawn from three community health centers in Kediri Regency: Puskesmas Pare, Puskesmas Ngasem, and Puskesmas Grogol. The primary informants comprised 9 individuals involved in the implementation of the PMT program, while the triangulation informants included 6 beneficiaries of the program.

A complete list of informants is presented in Table 1 and Table 2.

Table 1. Key Research Informants

No	Position	Description
1	1 st Informant	Head of Pare Health Center (Puskesmas)
2	2 nd Informant	Head of Ngasem Health Center (Puskesmas)
3	3 rd Informant	Head of Grogol Health Center (Puskesmas)
4	4 th Informant	Nutritionist at Pare Health Center
5	5 th Informant	Nutritionist at Ngasem Health Center
6	6 th Informant	Nutritionist at Grogol Health Center
7	7 th Informant	Health Cadres Involved in the Implementation of the Local Food-Based PMT Program at the Pare Community Health Center
8	8 th Informant	Health Cadres Involved in the Implementation of the Local Food-Based PMT Program at the Ngasem Community Health Center
9	9 th Informant	Health Cadres Involved in the Implementation of the Local Food-Based PMT Program at the Grogol Community Health Center

Table 2. Research Triangulation Informants

No	Position	Description
1	10 th Informant	Mrs. A, a pregnant and a recipient of PMT based on local food ingredients at the Pare Health Center
2	11 th Informant	Mrs. Y with her toddler, recipient of local food-based PMT from the Pare Community Health Center
3	12 th Informant	Mrs. L, a pregnant recipient of PMT based on local food ingredients from the Ngasem Community Health Center
4	13 th Informant	Mrs. M with her toddler, recipient of PMT based on local food ingredients from the Ngasem Community Health Center.
5	14 th Informant	Mrs. S, a pregnant recipient of PMT based on local food ingredients from Grogol Health Center
6	15 th Informant	Mrs. R with her toddler, a recipient of local food-based PMT from the Grogol Community Health Center.

The implementation of supplementary feeding (PMT) using local food ingredients for pregnant women in Kediri Regency is carried out through data-based planning and cross-sector coordination. Local food ingredients such as sweet potatoes, cassava, mung beans, eggs, fish, and local vegetables are used because they are easily available, affordable, and nutritious. Food preparation is done with attention to hygiene and suitability to local tastes.

Supplementary feeding for toddlers is implemented through cooking activities conducted by community health volunteers (kaders) using local ingredients. This activity also involves providing counseling to parents about the importance of balanced nutrition. Active participation of midwives, kaders,

and village government is a key factor in the program's success, although challenges such as limited menu variety still exist.

Monitoring is carried out regularly through visits to integrated health posts (posyandu), recording and reporting by kaders, and nutritional status evaluation. Evaluation uses indicators such as target coverage, improvement in nutritional status, kader participation, and utilization of local food. Follow-up actions based on evaluation results include technical improvements and capacity building for kaders.

The PMT program using local food ingredients is funded through the Operational Assistance Fund (Dana BOK) and operational funds of the community health center (puskesmas) with support from the village

government. Administrative management is conducted transparently and accountably, involving financial recording, food distribution, and implementation reports by kaders and health workers.

The implementation of local food-based supplementary feeding (PMT) for pregnant women in Kediri Regency has qualitatively demonstrated a positive contribution to stunting prevention. This strategy aligns with the Directorate General of Public Health Regulation No. HK.02.02/B/1622/2023, which emphasizes PMT as an essential intervention to improve the nutritional status of pregnant women, particularly those suffering from Chronic Energy Deficiency (CED), thereby preventing stunted births.

The utilization of locally sourced foods such as sweet potatoes, tempeh, eggs, green vegetables, and freshwater fish effectively meets nutritional needs while simultaneously empowering local resources and strengthening socio-cultural acceptance of the program. Cross-sector coordination involving community health centers (puskesmas), village governments, posyandu cadres, and various community groups serves as a cornerstone of program success. This participatory, data-driven approach reflects the principles of nutrient-sensitive agriculture and incorporates traditional food processing techniques, such as tempeh fermentation, which enhances the bioavailability of iron and zinc—

critical micronutrients for pregnant women.

Supporting studies (e.g., Suarayasa and Umar, 2024; Rosmida et al., 2025; Sutrisno et al., 2023; Hurin'in et al., 2023) emphasize that multi-stakeholder engagement and cadre capacity building are crucial for effective PMT implementation. Challenges remain, including limited budgets, resistance to certain foods (e.g., moringa leaves), and limited menu diversity. Nonetheless, ongoing nutrition education and active community involvement mitigate these obstacles, ensuring the program's sustainability and adaptability.

The PMT program for toddlers in Kediri also prioritizes locally available foods such as vegetables, eggs, tempeh, and fish. Cooking activities conducted by posyandu cadres are complemented by parental nutrition education, fostering awareness of balanced diets within the community. This integrated approach not only fulfills toddlers' nutritional requirements but also promotes family empowerment and utilization of local resources.

Empirical evidence indicates significant improvements in toddlers' weight following participation in the program. However, key challenges include seasonal variability affecting local food availability, limited menu variety, and cadre capacity constraints in preparing diverse and appealing meals. Addressing these through targeted cadre training and innovative food processing is

necessary to optimize program outcomes.

Nutritionally, the selected foods support WHO-recommended dietary diversity, with tempeh fermentation enhancing iron bioavailability. Seasonality affects nutrient content, necessitating selective fortification strategies. Previous studies (e.g., Ambarwati, 2020; Meilasari and Wiku Adisasmito, 2024) corroborate that PMT based on local foods improves growth parameters significantly when integrated with education and community involvement.

Monitoring and evaluation in Kediri are implemented through a structured, tiered system involving routine recording by posyandu cadres, reporting to puskesmas, and program evaluation by the Health Office. Core indicators include coverage, nutritional status improvement, timely food distribution, and the quality and appropriateness of local food use. Despite data discrepancies and training gaps in electronic reporting systems, this monitoring framework supports continuous program refinement.

Follow-up actions based on monitoring results involve technical guidance, schedule adjustments, and capacity building for cadres to resolve challenges such as menu mismatches and low participant engagement. The high level of responsiveness and commitment from implementers is pivotal in enhancing program effectiveness and sustainability.

The PMT program's funding primarily comes from the Health Operational Assistance Fund (Dana BOK), managed by puskesmas with transparent and accountable administrative procedures. Coordination between puskesmas, village governments, and cadres ensures budget allocation aligns with program needs, from food procurement to activity execution.

Additional funds may derive from national and regional government budgets, including APBN, DAK Non-Fisik, APBD, and Village Funds, strictly avoiding budget duplication. Proper documentation including financial records, activity reports, and media documentation supports accountability.

Effective fund management fosters community trust and cross-sectoral alignment, which are vital to the program's smooth functioning and impact. Active involvement from cadres and village authorities further strengthens program ownership, ensuring responsive and targeted PMT delivery.

In summary, the local food-based PMT program in Kediri Regency demonstrates a strategic and adaptive intervention against stunting by integrating local nutrient-rich resources, participatory multisectoral coordination, and comprehensive capacity building. While challenges such as funding limitations, seasonal ingredient variability, and technical skills deficits persist, the positive outcomes in maternal and child

nutrition status highlight the program's potential as a sustainable public health model. Continuous monitoring, community engagement, and transparent financial management remain essential to enhance effectiveness and scalability.

CONCLUSION AND SUGGESTION

The findings of this study indicate that the implementation of the local food-based Supplementary Feeding Program (PMT) for pregnant women and toddlers in Kediri Regency has been effectively conducted through well-coordinated cross-sector collaboration involving health centers, village governments, and community cadres, relying on locally available nutritious ingredients such as tempeh, eggs, green vegetables, sweet potatoes, and freshwater fish. This approach has successfully improved the nutritional status of the beneficiaries and contributed positively toward reducing stunting rates. Nevertheless, challenges remain, including limited menu variation caused by inconsistent availability of local foods and restricted technical capacity among cadres in preparing diverse and culturally acceptable menus.

The program's sustainability has been supported by continuous nutrition education, rigorous monitoring and evaluation systems, and transparent financial management primarily utilizing the Health Operational Assistance Fund

(Dana BOK). To enhance program effectiveness, it is recommended to further strengthen community engagement, provide ongoing training for cadres in food preparation and nutrition, and improve supply chain stability for local ingredients. Moreover, broadening stakeholder involvement, particularly by engaging a wider range of informants and policymakers, is essential for obtaining comprehensive insights that can inform policy refinement.

Health authorities should intensify dissemination efforts of PMT policies and improve monitoring accuracy, while implementing sites need to maintain active community participation, ensure consistent food supply meeting nutritional standards, and perform systematic documentation and reporting to facilitate accountability and program evaluation. These strategic actions are necessary to optimize the program's impact and ensure its long-term sustainability as a key intervention in addressing stunting in the region.

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REFERENCE

- Ambarwati, R. (2020) 'Pengembangan makanan tambahan berbasis F100 dengan substitusi tepung labu kuning dan tepung pisang', *Journal of Nutrition College*, 9(2), pp. 121–128.
- Ariyanti, S. et al. (2023) *Buku Ajar Keperawatan Keluarga*. PT. Sonpedia Publishing Indonesia.
- Atasasih, H., Paramita, I.S. and Forwaty, E. (2023) 'Peningkatan Kapasitas Kader Posyandu Dalam Pembuatan Makanan Tambahan (Pmt) Berbahan Dasar Pangan Lokal Sebagai Upaya Pencegahan Stunting Di Desa Ranah Singkuang', *PITIMAS: Journal of Community Engagement in Health*, 2(3), pp. 90–98.
- Atmalia, K.P. et al. (2025) 'Risk Factors of Stunted Children Aged 0-23 Months at Jatibaru Public Health Center Bima, West Nusa Tenggara: A Case Control Study', *Archives of Pediatric Gastroenterology, Hepatology, and Nutrition*, 4(2), pp. 51–61. Available at: <https://doi.org/10.58427/apghn.4.2.2025.51-61>.
- Badan Ketahanan Pangan (2020) 'Indeks Ketahanan Pangan, Indeks Keterjangkauan, Indeks Pemanfaatan dan Indeks Ketahanan Pangan di Indonesia Tahun 2020', *Badan Ketahanan Pangan*, 5, p. <http://keamananpangan.bkp.pertanian.go.id/>.
- Chew, C.-C. et al. (2022) 'The challenges in managing the growth of indigenous children in Perak State, Malaysia: A qualitative study', *Plos One*, 17(3), p. e0265917.
- Corie, A.H. and Syakurah, R.A. (2024) 'Evaluation of the supplementary feeding programme targeted at malnourished toddlers in Prabumulih City, Indonesia', *Malahayati International Journal of Nursing and Health Science*, 7(4), pp. 413–424.
- Direktorat Ketersediaan Pangan Badan Pangan Nasional (2024) 'Neraca Bahan Makanan Indonesia 2022-2024'. Jakarta: Badan Pusat Statistik.
- Emilia, E., Pratiwi, C. and

- Nirmalasari, N. (2024) 'Nutritional Content Analysis of Stunting Toddler Food Menu Based on Local Food', in *International Conference On Research And Development (ICORAD)*, pp. 121–128.
- Erza, D.M. (2020) 'Meta-Analisis Determinan Stunting Pada Anak Usia Dibawah 5 Tahun di Asia', *Human Care Journal*, 5(4), pp. 993–999.
- Hasan, H. et al. (2025) *Metode penelitian kualitatif*. Yayasan Tri Edukasi Ilmiah.
- Husnul, N., Setiyono, A. and Annas, N.N. (2023) 'Pendidikan dan Pelatihan Pembuatan Makanan Tambahan Pada Ibu Balita dan Kader menuju Masyarakat Sadar Stunting di Kota Tasikmalaya', *Jurnal Abdimas Kedokteran dan Kesehatan*, 1(1), p. 27. Available at: <https://doi.org/10.24853/jaras.1.1.27-33>.
- Jayadi, Y.I., Adha, A.S. and Tahar, T.N.L. (2024) 'Evaluasi Program Pemberian Makanan Tambahan (PMT) pada Ibu Hamil dalam Mencegah Stunting di Puskesmas Pattalassang pada Covid-19', *Ghidza: Jurnal Gizi dan Kesehatan*, 8(1), pp. 101–112. Available at: <https://doi.org/10.22487/ghidza.v8i1.1146>.
- Juffrie, M., Helmyati, S. and Hakimi, M. (2020) 'Nutritional anemia in Indonesia children and adolescents: Diagnostic reliability for appropriate management', *Asia Pacific Journal of Clinical Nutrition*, 29(December), pp. 18–31. Available at: [https://doi.org/10.6133/APJCN.202012_29\(S1\).03](https://doi.org/10.6133/APJCN.202012_29(S1).03).
- Kemenkes RI (2019) 'Angka Kecukupan Gizi Masyarakat Indonesia', *Permenkes Nomor 28 Tahun 2019*, Nomor 65(879), pp. 2004–2006.
- Kemenkes RI (2022) 'Kemenkes RI no HK.01.07/MENKES/1928/2022 Tentang Pedoman Nasional Pelayanan Kedokteran Tata Laksana Stunting', *Kementerian Kesehatan Republik Indonesia*, pp. 1–52.
- Kemenkes RI (2023) 'Petunjuk Teknis Makanan Tambahan Balita dan Ibu Hamil', *Jakarta: Direktorat Gizi Masyarakat Kementerian Kesehatan Republik Indonesia*, 6(August), pp. 78–81. Available at: https://kesmas.kemkes.go.id/assets/uploads/contents/others/20230516_Juknis_Tatalaksana_Gizi_V18.pdf.
- Kementerian Kesehatan RI (2022) 'Keluarga Bebas Stunting', *165*, p. 1.
- Kementerian Kesehatan RI (2023) 'HK.02.02/B/1622/2023

- tentang Petunjuk Teknis Pemberian Makanan Tambahan Berbahan Pangan Lokal bagi Ibu Hamil dan Balita Petunjuk Teknis PMT Lokal', *Kemenkes RI*, pp. 1–23.
- Kesha, C.N. et al. (2024) 'Diseminasi Kebijakan Pemerintah dalam Upaya Penurunan Prevalensi Stunting melalui Pendekatan Health Communication Model di Kabupaten Aceh Barat', *Jurnal Manajemen dan Ilmu Administrasi Publik (JMIAPI)*, 6(2), pp. 262–272.
- Kimani, I.W. (2018) 'Evaluation of the supplementary feeding programme targeted at moderately malnourished children aged 6 to 59 months in Baringo County, Kenya'. Stellenbosch: Stellenbosch University.
- Laili, U. and Andriani, R.A.D. (2019) 'Pemberdayaan Masyarakat dalam Pencegahan Stunting', *Jurnal Pengabdian Kepada Masyarakat Ipteks*, 5(1), pp. 8–12. Available at: <https://doi.org/10.36596/jpkmi.v4i1.552>.
- Lestari, E. et al. (2024) 'Stunting and its association with education and cognitive outcomes in adulthood: A longitudinal study in Indonesia', *PLOS ONE*. Edited by S. Horton, 19(5), p. e0295380. Available at: <https://doi.org/10.1371/journal.pone.0295380>.
- Longgupa, L.W., Entoh, C. and Kuswanti, F. (2024) 'Peningkatan Pengetahuan Ibu tentang Pentingnya Pemberian Makanan Tambahan Berbahan Pangan Lokal melalui Penyuluhan', *Jurnal Masyarakat Mandiri*, 8(5), pp. 4242–4250.
- Maigoda, T.C., Rizal, A. and Suryani, D. (2024) *Buku Ajar Perencanaan Program Gizi*. Penerbit NEM.
- Mauyah, N. and Fazira, F. (2024) 'STUNTING PREVENTION THROUGH THE PROVISION OF SUPPLEMENTARY FOOD BASED ON LOCAL KNOWLEDGE', in *International Conference on Education, Science, Technology and Health (ICONESTH)*, pp. 49–56.
- Maziyah, H. I. N., Miftahul, M., Puji, U. A., & Sholafatul, U. (2023). The Correlation between Posyandu Compliance and Feeding Patterns with Stunting Incidence in The Working Area of Puskesmas Kerek Tuban East Java, Indonesia. *Journal of health research and technology*, 1(1), 29-35.
- Meilasari, N. and Wiku Adisasmito (2024) 'Upaya Percepatan Penurunan Stunting Melalui Pemberian Makanan

- Tambahan (PMT) Pangan Lokal : Systematic Review’, *Media Publikasi Promosi Kesehatan Indonesia (MPPKI)*, 7(3), pp. 630–636. Available at: <https://doi.org/10.56338/mpki.v7i3.4924>.
- Menant, L., Gilibert, D. and Sauvezon, C. (2021) ‘The Application of Acceptance Models to Human Resource Information Systems: A Literature Review’, *Frontiers in Psychology*, 12. Available at: <https://doi.org/10.3389/fpsyg.2021.659421>.
- Menteri Kesehatan Republik Indonesia (2020) ‘Peraturan Menteri Kesehatan Republik Indonesia Nomor 2 Tahun 2020 Tentang Standar Antropometri Anak’, *Kementerian Kesehatan Republik Indonesia*, 1(1), pp. 1–9.
- Notoatmodjo, S. (2014) *Promosi Kesehatan dan Perilaku Kesehatan. Edisi revisi*. Revisi. Jakarta: Rineka Cipta.
- Nurjanah, S., Astuti, R. and Meikawati, W. (2024) ‘Evaluasi pelaksanaan program pemberian makanan tambahan pada balita stunting di Posyandu (Studi kasus di Desa X, Kabupaten Ngawi)’, in *Prosiding Seminar Nasional Unimus*.
- Nurva, L. and Maharani, C. (2023) ‘Analisis Pelaksanaan Kebijakan Penanggulangan Stunting: Studi Kasus di Kabupaten Brebes’, *Jurnal Kebijakan Kesehatan Indonesia: JKKI*, 12(2), pp. 74–83.
- Palupi, F.D. et al. (2022) ‘Study of readiness for implementation of integrated stunting reduction interventions in Klojen District, Malang City’, *Media Gizi Indonesia*, 17(1SP), pp. 230–238.
- Permatasari, R. (2024) *Implementasi Dana BOK melalui Mekanisme DAK Non Fisik Kegiatan UKM Puskesmas*. Penerbit NEM.
- Permatasari, T.A.E. et al. (2021) ‘The effect of nutrition and reproductive health education of pregnant women in Indonesia using quasi experimental study’, *BMC Pregnancy and Childbirth*, 21(1), p. 180. Available at: <https://doi.org/10.1186/s12884-021-03676-x>.
- Pertiwi, L. and Winarti, E. (2024) ‘Penyuluhan Program Pemberian Makanan Tambahan Lokal sebagai Penanggulangan Stunting di Kota Kediri’, *Jurnal Medika: Medika*, 3(2), pp. 181–187.
- Phitra, F.A., Lipoeto, N.I. and Yetti, H. (2023) ‘Evaluasi

- pelaksanaan program pencegahan dan penurunan stunting di Desa Lokus Stunting Kabupaten Merangin tahun 2022', *Jurnal Kebijakan Kesehatan Indonesia: JKKI*, 12(3), pp. 127–141.
- Pibriyanti, K. et al. (2024) 'Pemberian Makanan Tambahan (PMT) Modifikasi pada Balita Gizi Kurang dan Peningkatan Pengetahuan Ibu', *BERNAS: Jurnal Pengabdian Kepada Masyarakat*, 5(1), pp. 678–689. Available at: <https://doi.org/10.31949/jb.v5i1.7956>.
- Presiden Republik Indonesia (2021) 'Peraturan Presiden Nomor 72 Tahun 2021 tentang Percepatan Penurunan Stunting', Jakarta: Kementerian Sekretariat Negara [Preprint].
- Putri, R.A., Sulastri, S. and Apsari, N.C. (2023) 'Pemanfaatan potensi lokal dalam upaya pencegahan stunting', *IJD: International Journal of Demos*, 5(1), pp. 16–28.
- Rahman, M.M., Kiyu, A. and Seling, N.R. (2021) 'Prevalence and factors associated with undernutrition among Dayak children in rural areas of Sarawak, Malaysia.', *Malaysian Journal of Nutrition*, 27(3).
- Rahman, Z. et al. (2021) 'Analisis Kebijakan Pencegahan Stunting Dan Relevansi Penerapan Di Masyarakat', *Karta Rahardja: Jurnal Pembangunan dan Inovasi*, 3(1), pp. 27–33.
- Raiten, D.J. and Bremer, A.A. (2020) 'Exploring the nutritional ecology of stunting: new approaches to an old problem', *Nutrients*, 12(2), p. 371.
- Raniwati, L. et al. (2022) 'Faktor-Faktor yang Mempengaruhi Kinerja Kader dalam Pelaksanaan Kegiatan Posyandu di Wilayah Kerja Puskesmas Anak Air Kota Padang', *Jurnal Indonesia Kebidanan*, 6(2), pp. 106–117.
- Riantoni, C. (2021) *Metode penelitian campuran: Konsep, prosedur dan contoh penerapan*. Penerbit Nem.
- Rosmida et al. (2025) 'FOOD PACKAGES AND NUTRITION EDUCATION IMPROVED PREGNANCY WEIGHT GAIN IN JAGAKARSA SUBDISTRICT, JAKARTA, INDONESIA: A PILOT STUDY.', *African Journal of Food, Agriculture, Nutrition & Development*, 25(1).
- Sahroji, Q.N., Hidayat, R. and Nababan, R. (2022) 'Implementasi Kebijakan Dinas Kesehatan Dalam Penanganan Stunting Di

- Kabupaten Karawang’, *Jurnal Pemerintahan Dan Politik*, 7(1).
- Salam, A. (2023) *Metode penelitian kualitatif*. CV. Azka Pustaka.
- Salsabila, A. et al. (2023) ‘Implementasi Pemberian Makanan Tambahan (PMT) dan kegiatan penyuluhan gizi sebagai penunjang pencegahan stunting Desa Pabean’, *Jurnal Pengabdian kepada Masyarakat Nusantara*, 4(3), pp. 1865–1872.
- Sarosa, S. (2021) *Analisis data penelitian kualitatif*. Pt Kanisius.
- Setianingsih et al. (2020) ‘Impact of Stunting on Development of Children Aged 12–60 Months’, *Advances in Health Science Research*, 27(ICoSHEET 2019), pp. 186–189. Available at: <https://doi.org/10.2991/ahsr.k.200723.047>.
- Situmorang, L.S. (2023) ‘Implementasi Peraturan Presiden Nomor 72 Tahun 2021 tentang Percepatan Penurunan Stunting (Studi Kasus di Kelurahan Sicanang Kecamatan Medan Belawan)’. Universitas Medan Area.
- Soliman, A. et al. (2021) ‘Early and long-term consequences of nutritional stunting: From childhood to adulthood’, *Acta Biomedica*, 92(1), pp. 1–12. Available at: <https://doi.org/10.23750/abm.v92i1.11346>.
- Suarayasa, K. and Umar, M. (2024) ‘Evaluation of Local Supplementary Food Provision Program (PMT) For Pregnant Women with KEK in Palu City’, *Current Clinical and Medical Education*, 2(12), pp. 4–12.
- Subratha, H.F.A. and Peratiwi, N.M.I. (2020) ‘Determinan Kejadian Stunting Pada Balita Di Kabupaten Gianyar Bali’, *Jurnal Ilmu Kesehatan MAKIA*, 10(2), pp. 99–106.
- Sufri, S. et al. (2023) ‘Child stunting reduction in Aceh Province: challenges and a way ahead’, *Maternal and Child Health Journal*, 27(5), pp. 888–901.
- Sugiono and Mitha Erlisya Puspandhani (2020) *Metode penelitian kesehatan*. 1st edn. Edited by M.K. Dr. Yani Kamasturyani, SKM. Bandung: Alfabeta.
- Sugiyono (2021) ‘Metode penelitian kuantitatif, kualitatif, dan R&D / Sugiyono’, in. Bandung: Alfabeta, pp. xix, 444 halaman : ilustrasi ; 24 cm.
- Sumartini, E. (2020) ‘Studi literatur: Dampak stunting terhadap kemampuan kognitif anak’, in *Jurnal Seminar Nasional*, pp. 127–134.
- Susanto, D. and Jailani, M.S. (2023) ‘Teknik pemeriksaan

- keabsahan data dalam penelitian ilmiah’, *QOSIM: Jurnal Pendidikan Sosial & Humaniora*, 1(1), pp. 53–61.
- Sutrisno, E. et al. (2023) *Diversifikasi Pangan Lokal untuk Ketahanan Pangan: Perspektif Ekonomi, Sosial, dan Budaya*. Available at: <https://doi.org/10.55981/brin.918>.
- Tasya, Z. et al. (2024) ‘Poltekita: Jurnal Pengabdian Masyarakat Pencegahan dan Pengendalian Stunting Pada Balita Melalui Pemberian Makanan Tambahan Berbahan Dasar Produk Pangan Lokal’, *Poltekita: Jurnal Pengabdian Masyarakat*, 5(2), pp. 219–229. Available at: <https://doi.org/10.33860/pjpm.v5i2.4055>.
- The World Bank (2021) ‘Melangkah Maju : Inisiatif Lokal Dalam Menurunkan Stnting Di Indonesia’, *The World Bank*, p. 162. Available at: www.worldbank.org Buku.
- Wager, K.A., Lee, F.W. and Glaser, J.P. (2021) *Health care information systems: a practical approach for health care management*. John Wiley & Sons.
- Widowati, S. and Nurfitriani, R.A. (2023) *Diversifikasi pangan lokal untuk ketahanan pangan: perspektif ekonomi, sosial, dan budaya*. Penerbit BRIN.
- Wulandari, D.T. et al. (2025) ‘Community-based insights on maternal nutrition knowledge and its role in preventing stunting and wasting in rural Indonesian children’, *Journal of Current Health Sciences*, 5(3), pp. 145–154.
- Xu, J. and Lu, W. (2022) ‘Developing a human-organization-technology fit model for information technology adoption in organizations’, *Technology in Society*, 70, p. 102010.
- Yunida, H. and Tjalla, A. (2025) ‘Evaluation of The Combined CIPP and Goal-Oriented Model Program on Acceleration of Stunting Reduction with Specific Interventions’, *ICAL 2024*, p. 152