

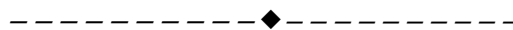
Multi-Stakeholder Partnership in the Implementation of Stunting Reduction Acceleration Policies: A Synthesis of Systematic Literature Review

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Abstract

Stunting remains a complex public health problem in many developing countries, including Indonesia, requiring integrated policy approaches involving multiple sectors and actors. This study aims to synthesize existing literature on the implementation of stunting reduction policies through a multi-stakeholder partnership approach using a Systematic Literature Review (SLR). The study follows the PRISMA framework to ensure a systematic, transparent, and replicable selection process. Literature was retrieved from Scopus, Web of Science, and other indexed databases using predefined search strings related to stunting, government policy, policy implementation, and collaborative governance. A total of 1,690 records were initially identified, of which 52 studies met the inclusion criteria after screening, eligibility assessment, and full-text review. The selected studies were analyzed using thematic synthesis and bibliometric mapping using VOSviewer to identify key themes and research trends. The synthesis results indicate that stunting reduction policies are predominantly implemented through integrated health and nutrition interventions. However, their effectiveness is strongly influenced by policy implementation capacity, cross-sector coordination, and governance structures. The multi-stakeholder partnership approach plays an important role in facilitating collaboration among government institutions, health workers, non-governmental organizations, academics, the private sector, and communities. Despite this, implementation challenges remain, including fragmented governance, limited resources, and disparities in institutional capacity across regions. Bibliometric analysis also shows that governance-related concepts are less dominant compared to health-oriented studies. This study concludes that stunting should be understood not only as a health issue but also as a policy implementation and governance challenge requiring stronger multi-actor collaboration. The study contributes to the literature by synthesizing fragmented evidence on policy implementation and multi-stakeholder partnerships in stunting reduction.

Keywords: *Stunting, Acceleration, Government, Multi-Stakeholder, Partnership, Public Policy.*



A. INTRODUCTION

Stunting remains one of the major public health challenges receiving significant attention across many developing countries, including Indonesia (Siswati et al., 2022; Syafrawati et al., 2023). This issue is not merely associated with chronic malnutrition among children, but is also influenced by social, economic, sanitation, educational, healthcare access, and public policy governance factors (Paikah et al., 2024; Sriatmi et al., 2021). The long-term impacts of stunting make it a critical concern within the development agenda, as it affects human resource quality, productivity, and future social development (Afandi et al., 2023; Balqis et al., 2024).

The Indonesian government has positioned stunting reduction acceleration as a national priority through various cross-sectoral policies and programs (Siswati et al., 2022; Sariatmi et al., 2021). Through Presidential Regulation Number 72 of 2021 concerning the Acceleration of Stunting Reduction, the government integrates interventions in health, education, sanitation, social protection, and community empowerment. This condition indicates that stunting management requires cross-sectoral coordination and the involvement of multiple actors in policy implementation processes (Paikah et al., 2024; Suarayasa et al., 2024).

The multi-stakeholder partnership (MSP) approach has increasingly been adopted in stunting reduction initiatives because it strengthens collaboration among governments, the private sector, civil society organizations, academics, healthcare professionals, and local communities (Paikah et al., 2024; Suarayasa et al., 2024). This approach supports the effectiveness of policy implementation, program integration, and the strengthening of regional institutional capacities (Renzaho et al., 2017; Shekar et al., 2017; Paikah et al., 2024). Several studies have demonstrated that the success of stunting reduction programs is strongly influenced by inter-actor coordination, resource capacity, institutional commitment, and the ability of local governments to establish sustainable collaborative governance mechanisms (Afandi et al., 2023; Balqis et al., 2024; Napirah et al., 2024).

However, the implementation of stunting reduction acceleration policies continues to face various challenges (Rahman et al., 2024). Cross-sectoral coordination has not yet functioned optimally due to bureaucratic fragmentation, differences in institutional interests, limited resources, and disparities in regional implementation capacities (Napirah et al., 2024; Siswati et al., 2022). Furthermore, inter-actor relationships remain largely administrative in nature, resulting in collaborative mechanisms that have not effectively generated integrated program implementation. This condition indicates that multi-stakeholder involvement has not fully succeeded in establishing optimal collaborative governance in stunting management efforts (Paikah et al., 2024; Suarayasa et al., 2024).

The Province of East Nusa Tenggara (NTT) continues to exhibit a relatively high prevalence of stunting compared to the national average (Afandi et al., 2023; Balqis et al., 2024). This condition demonstrates that the acceleration of stunting reduction in NTT still encounters obstacles related to policy implementation, cross-sectoral coordination, and regional institutional capacity. Therefore, policy implementation and multi-stakeholder partnership approaches are important to examine in order to understand the effectiveness of integrated stunting management strategies.

Previous studies have examined stunting primarily from the perspectives of health, nutrition, and program interventions (Siswati et al., 2022; Syafrawati et al., 2023). However, most studies remain focused on technical health aspects, while the dimensions of policy implementation and collaborative governance have not been extensively explored in depth (Paikah et al., 2024; Sariatmi et al., 2021). In addition, studies concerning multi-stakeholder partnerships in accelerating stunting reduction

remain fragmented and have not comprehensively integrated aspects of policy implementation, cross-sectoral coordination, and collaborative governance within a unified literature synthesis. Thus, a research gap remains regarding the relationship between policy implementation and multi-stakeholder partnership approaches in accelerating stunting reduction efforts.

Based on these conditions, this study aims to conduct a literature synthesis concerning policy implementation and multi-stakeholder partnership approaches in accelerating stunting reduction through a Systematic Literature Review (SLR) approach. This study focuses on policy implementation, cross-sectoral coordination, institutional capacity, resource allocation, and patterns of collaboration among actors involved in stunting reduction programs. Furthermore, this study integrates the perspectives of policy implementation and collaborative governance through literature synthesis and bibliometric mapping approaches.

B. METHOD

This study employed a Systematic Literature Review (SLR) method by referring to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) framework (Onyango et al., 2019; Altobelli et al., 2020; Aryeetey & Coomson, 2022). This method was utilized to examine and synthesize studies related to policy implementation and multi-stakeholder partnerships in accelerating stunting reduction efforts (Besada et al., 2016; Zuhri et al., 2024).

The literature search was conducted using the Scopus, Web of Science (WoS), and other supporting databases. The article search process employed an iterative keyword approach using keywords associated with stunting, policy implementation, and collaborative governance. Initial keywords such as stunting, acceleration, and government were further expanded into policy implementation, multi-stakeholder partnership, collaborative governance, and public policy. The search process was conducted using Boolean operators (AND and OR) to improve the relevance and precision of the search results (Ipa et al., 2023; Sunarya, 2023; Sirajuddin et al., 2022).

The search strategy was conducted using the following search string combination: ("stunting" OR "acceleration") AND ("government" OR "public policy" OR "policy implementation") AND ("multi-stakeholder partnership" OR "collaborative governance").

The selected articles consisted of English-language journal articles published between 2010 and 2025 that discussed the implementation of stunting reduction policies, cross-sectoral coordination, collaborative governance, and stakeholder involvement in stunting management programs (Andreinie et al., 2024; Arini & Peranto, 2023; Riyadi et al., 2021). Meanwhile, articles that were not relevant to the research focus, unavailable in full-text form, or did not meet the substantive research criteria were excluded from the selection process.

Table 1. Inclusion and Exclusion Criteria

Criteria	Inclusion Criteria	Exclusion Criteria
Publication Year	Articles published between 2010–2025	Articles published before 2010
Language	English-language articles	Non-English articles
Document Type	Scientific journal articles	Conference proceedings, books, undergraduate theses, dissertations, and reports
Database Sources	Scopus, Web of Science, and other supporting indexed databases	Non-indexed databases
Research Topic	Articles discussing stunting, policy implementation, collaborative governance, public policy, multi-stakeholder partnership, and cross-sectoral coordination	Articles irrelevant to stunting policy and stakeholder collaboration
Article Accessibility	Full-text articles available	Articles unavailable in full-text
Substantive Relevance	Articles discussing policy implementation, governance, and actor involvement in accelerating stunting reduction	Articles focusing solely on clinical or biomedical aspects without discussing policy and governance

Based on the overall selection process, a total of 52 articles met the inclusion criteria and were used as the primary materials for analysis. Data analysis was conducted using thematic analysis to identify patterns of policy implementation, cross-sectoral coordination, collaborative governance, and forms of multi-stakeholder partnerships in accelerating stunting reduction efforts (Ryveka et al., 2023; Ahoya et al., 2019; Rah et al., 2020). The analytical process involved coding, theme categorization, and interpretation of the patterns emerging from each analyzed article.

In addition, this study utilized the VOSviewer software to conduct bibliometric analysis based on keyword co-occurrence in order to map thematic relationships, conceptual collaboration patterns, and research trends within the analyzed literature (Andrestian et al., 2025; Renzaho et al., 2017; Shekar et al., 2017).

Stage 1: Conducting the Review

The article selection process referred to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) framework, which consists of the stages of identification, screening, eligibility assessment, and article inclusion

(Onyango et al., 2019; Altobelli et al., 2020; Aryeetey & Coomson, 2022). During the identification stage, a total of 1,690 articles were retrieved, consisting of 494 articles from the Scopus database, 353 articles from Web of Science, and 843 articles from registers and supporting sources. Following the duplicate removal process using Zotero, the total number of articles was reduced to 1,309 articles (Andreinie et al., 2024; Riyadi et al., 2021).

The screening stage was conducted through title and abstract reviews, resulting in the exclusion of 847 articles that were not aligned with the research focus (Arini & Peranto, 2023; Sirajuddin et al., 2022). Subsequently, 462 articles were assessed during the full-text review stage. At this stage, 410 articles were excluded because they did not satisfy the inclusion criteria (Ipa et al., 2023; Sunarya, 2023).

Based on the entire selection process, a total of 52 articles fulfilled the eligibility criteria and were included as the primary materials for research analysis (Ryveka et al., 2023; Ahoya et al., 2019; Rah et al., 2020).

Stage 2: Reporting and Analysis

During the analysis stage, the articles that fulfilled the inclusion criteria were examined using a thematic analysis approach to identify patterns related to policy implementation, cross-sectoral coordination, collaborative governance, institutional capacity, and multi-stakeholder partnership practices in accelerating stunting reduction efforts (Besada et al., 2016; Zuhri et al., 2024). The analytical process was conducted through data coding, theme categorization, and interpretation of findings derived from each analyzed article (Afandi et al., 2023; Balqis et al., 2024).

Furthermore, this study utilized the VOSviewer software to map the relationships among themes and research trends within the analyzed literature (Andrestian et al., 2025; Renzaho et al., 2017; Shekar et al., 2017). The findings were subsequently synthesized to provide a more comprehensive explanation of the relationship between policy implementation and multi-stakeholder partnerships in accelerating stunting reduction efforts (Napirah et al., 2024; Suarayasa et al., 2024). The article selection process is presented in Figure 2.

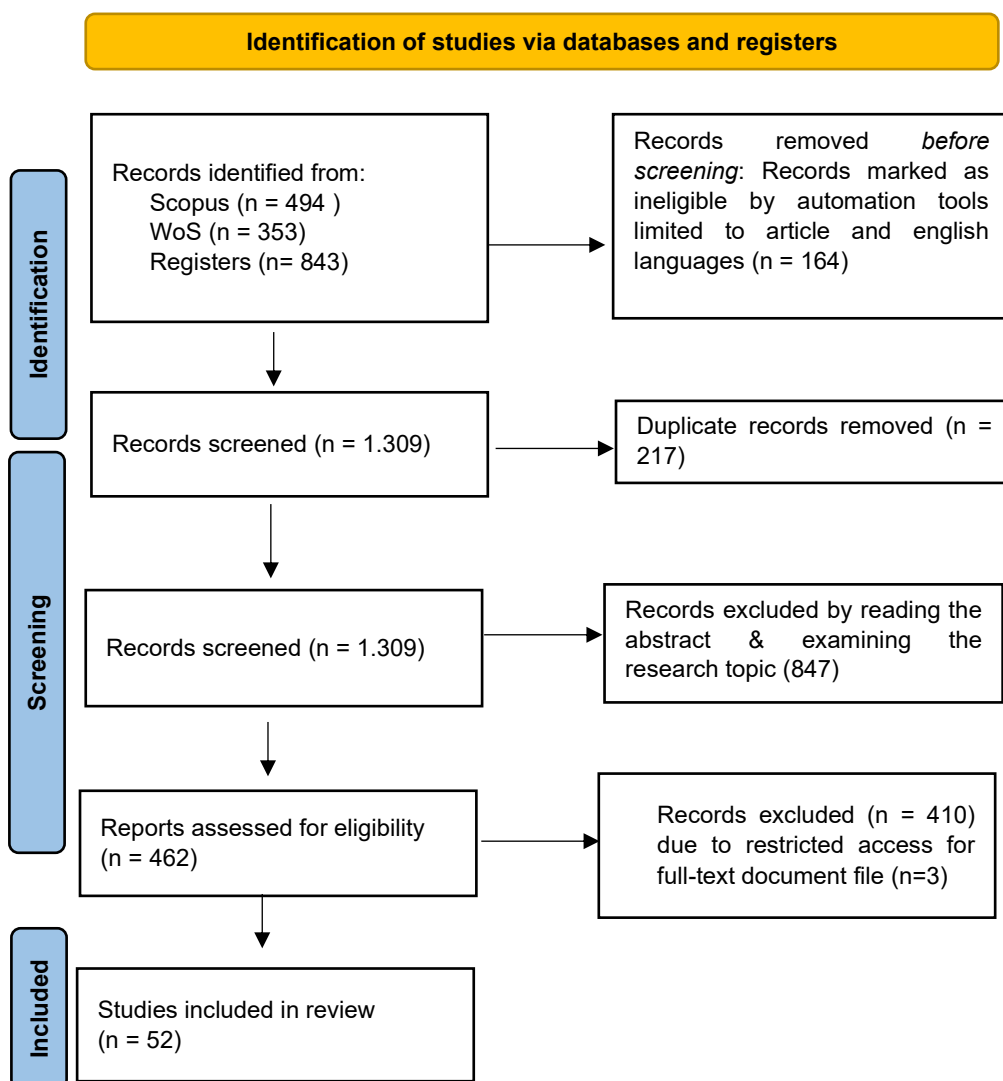


Figure 1. PRISMA Flow Diagram of Article Selection

The following table presents the parameters used in the literature search process of this study, including the databases, keywords, and article selection criteria.

Table 2. Literature Review Parameters

No	Parameter	Description
1	Search database	Scopus and Web of Science
2	Search field	Title, abstract, and keywords
3	Search keywords	“Stunting” AND (“policy” OR “government”) AND (“multi-stakeholder” OR “partnership” OR “collaboration”)
4	Language	English
5	Document types	Peer-reviewed Journal articles
6	Time span	2010-2025 The time span was limited to recent publications to ensure relevance to current policy developments.
7	Analysis Tools	Zotero and VOSviewer

Source: Author’s Elaboration

Table 3. Search Results of the Database

No	Stage	Results
1	Identification	1,690 articles identified from Scopus (494), Web of Science (353), and Registers (843)
2	Duplicate removal and automatic filtering	381 articles removed based on document type, language, and duplication
3	Screening	1,309 articles screened through title and abstract review
4	Eligibility	847 articles excluded due to irrelevance with research focus
5	Full-text assessment	462 articles assessed for eligibility
6	Included studies	52 articles met the inclusion criteria and were included in the final analysis

Source: Author's Elaboration

The literature search parameters were focused on English-language articles discussing stunting policy implementation and multi-stakeholder partnerships. The limitation of the publication period was applied to ensure the relevance of the studies to recent policy developments.

Stage 3: Disseminate the Review

At this stage, the selected articles were analyzed using a thematic analysis approach to identify patterns, themes, and interrelationships among concepts associated with the implementation of stunting reduction policies through multi-stakeholder partnerships (Adongo et al., 2024; Hasan et al., 2023). The analysis was conducted comprehensively by examining the contents of each article to identify stakeholder roles, forms of cross-sectoral collaboration, and factors influencing the success of policy implementation (Noviansyah et al., 2022; Prianto et al., 2025). The findings were subsequently synthesized to generate a structured understanding of research trends and the dynamics of stunting reduction policy implementation (Putri et al., 2024; Kania et al., 2025).

C. RESULT AND DISCUSSION

A total of 52 articles that fulfilled the inclusion criteria were analyzed in this study. The analyzed articles were published between 2010 and 2025, with a predominance of publications appearing after 2020. This condition indicates the increasing attention given to stunting issues within the contexts of public health and public policy (Verma et al., 2021; Conway et al., 2020). Most of the articles employed quantitative approaches, while qualitative and mixed-methods approaches were used to a more limited extent (Crookston et al., 2018; Briaux et al., 2020).

From the perspective of research focus, the literature was predominantly centered on health interventions, nutrition, and stunting risk factors. However, several studies have begun to examine aspects of policy implementation, cross-

sectoral coordination, and collaborative governance in stunting reduction acceleration programs (Iruhiriye et al., 2024; Pickering et al., 2015). These findings indicate a shift in research orientation from a purely health-based approach toward a more integrative governance-oriented perspective (Adi et al., 2019; Jinabhai et al., 2001).

The thematic analysis identified three major themes within the stunting literature, namely policy implementation, multi-stakeholder partnerships, and implementation challenges (Gunnal et al., 2024; Fabusoro et al., 2004).

Most studies discussed the implementation of stunting policies through the integration of specific and sensitive interventions. The implementation focus included maternal and child healthcare services, nutritional improvement, sanitation, family education, and food security (Cotta et al., 2011; Yusriadi et al., 2024). The literature indicates that program implementation involves cross-sectoral coordination among health institutions, local governments, and other supporting agencies (Adongo et al., 2024; Hasan et al., 2023).

Several studies identified disparities in implementation capacity across regions, particularly regarding resource availability, program coordination, and policy integration (Prianto et al., 2025; Putri et al., 2024). In the Indonesian context, such findings remain evident in regions with high stunting prevalence, including East Nusa Tenggara (Noviansyah et al., 2022; Kania et al., 2025).

The literature synthesis findings indicate that the acceleration of stunting reduction is implemented through the involvement of various cross-sectoral actors, including government institutions, healthcare professionals, non-governmental organizations, academics, the private sector, and local communities. Collaborative governance and multi-stakeholder partnership approaches are utilized to strengthen coordination, policy integration, and the expansion of stunting intervention coverage (Zuhri et al., 2024; Balqis et al., 2024; Afandi et al., 2023).

The findings demonstrate that local governments, through regional development planning agencies (Bappeda), Health Offices, Social Affairs Offices, Community and Village Empowerment Offices (DPMD), village governments, and healthcare facilities, play important roles in implementing specific and sensitive nutrition interventions, cross-sectoral coordination, budget allocation, and the strengthening of community-based stunting programs. At the local level, community health centers (puskesmas), village midwives, integrated health service post (posyandu) cadres, and early childhood education teachers contribute to maternal and child healthcare services, health education, child growth monitoring, and the implementation of community-based stunting prevention programs.

In addition to government actors, the involvement of non-governmental organizations, international organizations, academics, social organizations, Family Welfare Empowerment organizations (PKK), and local communities also strengthens program implementation through health education, nutritional intervention enhancement, increased community participation, and the development of cross-sectoral cooperation (Suarayasa et al., 2024; Hasan et al., 2023; Yusriadi et al., 2024). Global studies further indicate that cross-sectoral partnership approaches can

improve the effectiveness of nutritional interventions through the strengthening of social systems and integrated policy support (Renzaho et al., 2017; Shekar et al., 2017; Brar et al., 2020; Conway et al., 2020).

Several studies demonstrate that the effectiveness of collaboration is strongly influenced by the quality of inter-institutional coordination, clear role distribution, and institutional capacity at the local level (Sriatmi et al., 2021; Ipa et al., 2023; Napirah et al., 2024). These findings indicate that the success of accelerating stunting reduction is determined not only by health interventions, but also by the capacity of collaborative governance systems to integrate diverse actors and program resources.

Most of the literature identifies various challenges in the implementation of stunting reduction policies, particularly those related to weak cross-sectoral coordination, limited resources, and disparities in regional capacity (Rahman et al., 2024; Siswati et al., 2022; Noviansyah et al., 2022). These challenges indicate that stunting reduction programs continue to encounter structural and institutional barriers in policy implementation at the regional level.

The findings reveal that policy fragmentation among institutions remains a major obstacle to program integration, resulting in suboptimal implementation of stunting reduction programs (Sriatmi et al., 2021; Paikah et al., 2024). Furthermore, local governments, regional development planning agencies (Bappeda), Health Offices, healthcare professionals, and posyandu cadres continue to face limitations in resources, program implementation capacity, and institutional support in carrying out stunting interventions.

Several studies also highlight limited access to healthcare services, weak monitoring and evaluation systems, and low levels of community participation in the implementation of local stunting programs (Putri et al., 2024; Prianto et al., 2025; Iruhiriye et al., 2024). Within the context of cross-sectoral implementation, program integration among local governments, community organizations, health-focused NGOs, and other stakeholders has also not functioned optimally due to differences in institutional capacity and inter-actor coordination.

From a global perspective, socioeconomic factors such as poverty, education, and sanitation significantly contribute to both the success and failure of stunting reduction program implementation (Pickering et al., 2015; Adongo et al., 2024; Adi et al., 2019). These findings indicate that stunting management requires an integrated policy approach through the strengthening of cross-sectoral coordination, institutional capacity, and sustainable community participation.

The bibliometric mapping results indicate that the most dominant keywords in the stunting literature are child, nutrition, and health intervention, suggesting that research in this field continues to be largely dominated by health and nutrition-oriented approaches (Briaux et al., 2020; Crookston et al., 2018; Verma et al., 2021).

In addition, the emergence of keywords such as governance, policy, poverty, and sanitation reflects a shift in research focus toward governance dimensions and social determinants in stunting management (Altobelli et al., 2020; Rah et al., 2020; Aryeetey & Coomson, 2022).

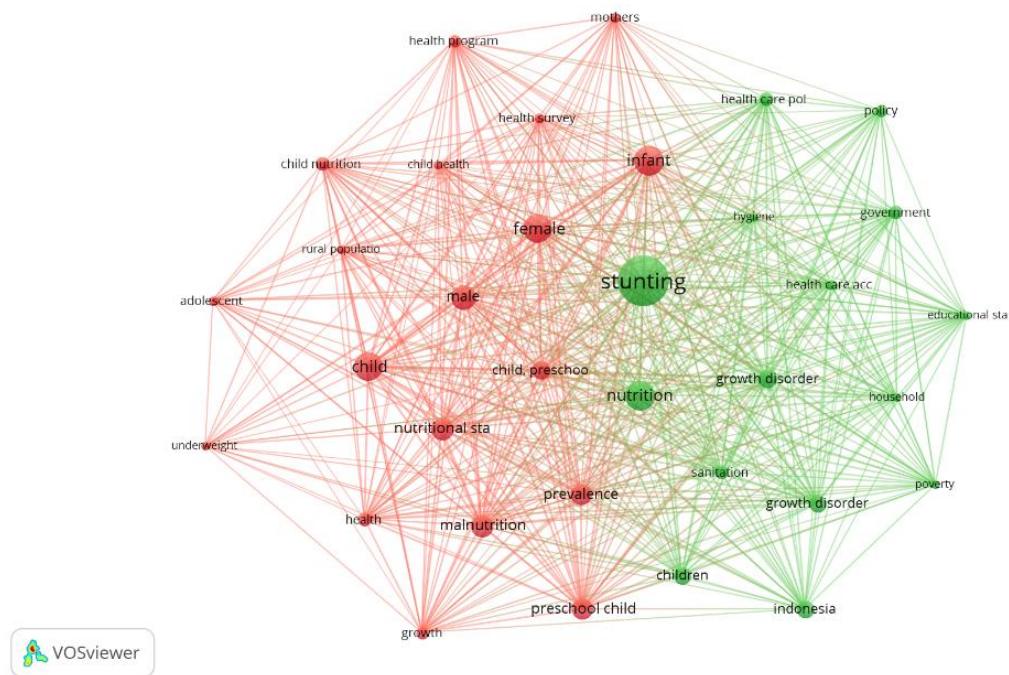


Figure 2. Bibliometric Mapping Results

The bibliometric visualization using VOSviewer demonstrates the existence of two major clusters. The first cluster is dominated by health- and nutrition-related keywords such as *child*, *infant*, *malnutrition*, and *nutritional status* (Cotta et al., 2011; Gunnal et al., 2024). The second cluster includes keywords such as *policy*, *government*, *poverty*, and *sanitation*, which are associated with policy implementation and social determinants (Fabusoro et al., 2004; Gwelo et al., 2023; Kulkarni et al., 2019).

The keyword *stunting* occupies a central position connecting the two clusters, indicating the interrelationship between health-based and governance-oriented approaches. However, keywords such as *collaborative governance* and *multi-stakeholder partnership* have not yet emerged prominently, suggesting that studies concerning inter-actor collaboration in the implementation of stunting policies remain relatively limited (Shekar et al., 2017; Renzaho et al., 2017; Brar et al., 2020).

The literature synthesis findings indicate that stunting research continues to be predominantly dominated by health- and nutrition-oriented approaches focusing on technical interventions and maternal and child health risk factors (Verma et al., 2021; Crookston et al., 2018; Briaux et al., 2020). This dominance is reflected in the strong interconnection among keywords such as *child*, *nutrition*, *malnutrition*, and *health intervention* within the bibliometric mapping (Brar et al., 2020; Gunnal et al., 2024; Conway et al., 2020). However, developments in the literature after 2020 demonstrate increasing attention toward the dimensions of policy implementation, cross-sectoral coordination, and collaborative governance in stunting management (Afandi et al., 2023; Balqis et al., 2024; Zuhri et al., 2024).

These findings suggest that stunting is increasingly understood as a governance issue involving multiple sectors and actors simultaneously (Sriatmi et al., 2021; Napirah et al., 2024; Paikah et al., 2024). The literature indicates that the effectiveness of program implementation is determined not only by health

interventions, but also by institutional capacity, program integration, and inter-agency coordination (Ipa et al., 2023; Iruhiriye et al., 2024; Putri et al., 2024). This condition highlights the limitations of sectoral approaches in explaining the complexity of stunting policy implementation at the regional level.

Furthermore, the synthesis findings demonstrate that multi-stakeholder partnerships are increasingly being adopted in stunting policy implementation through the involvement of governments, healthcare professionals, NGOs, academics, the private sector, and local communities (Hasan et al., 2023; Suarayasa et al., 2024; Yusriadi et al., 2024). Nevertheless, most studies identify that multi-actor involvement has not yet fully resulted in effective coordination due to institutional fragmentation, weak program integration, and disparities in regional implementation capacity (Rahman et al., 2024; Siswati et al., 2022; Noviansyah et al., 2022).

In the Indonesian context, these challenges remain evident in regions with high stunting prevalence, including East Nusa Tenggara. Several studies indicate that limitations in resources, healthcare access, institutional capacity, and geographical conditions significantly influence the effectiveness of program implementation at the local level (Prianto et al., 2025; Putri et al., 2024; Rahman et al., 2024). These findings suggest that accelerating stunting reduction requires strengthening collaborative governance and cross-sectoral policy integration within program implementation processes (Zuhri et al., 2024; Afandi et al., 2023).

D. CONCLUSION

This study demonstrates that the stunting literature continues to be dominated by health- and nutrition-oriented approaches (Crookston et al., 2018; Verma et al., 2021). However, developments in the literature after 2020 reveal a shift toward policy implementation and collaborative governance approaches (Afandi et al., 2023; Balqis et al., 2024; Shekar et al., 2017). This shift indicates that stunting is no longer understood solely as a health issue, but also as a policy implementation challenge involving cross-sectoral coordination and multi-actor engagement (Sriatmi et al., 2021; Napirah et al., 2024).

The synthesis findings indicate that stunting reduction programs involve multiple actors, including governments, healthcare professionals, NGOs, academics, the private sector, and local communities (Hasan et al., 2023; Yusriadi et al., 2024; Suarayasa et al., 2024). Nevertheless, the involvement of multiple stakeholders has not yet fully resulted in integrated implementation. Most studies continue to identify weak cross-sectoral coordination, program fragmentation, and disparities in regional implementation capacity as the major obstacles in the implementation of stunting programs (Rahman et al., 2024; Siswati et al., 2022; Noviansyah et al., 2022).

The findings of this study emphasize that the effectiveness of stunting reduction is determined not only by health interventions, but also by governance capacity in integrating actors, programs, and policy implementation through collaborative mechanisms (Zuhri et al., 2024; Balqis et al., 2024; Iruhiriye et al., 2024). In the Indonesian context, these challenges remain evident in regions with high

stunting prevalence, including East Nusa Tenggara (Putri et al., 2024; Prianto et al., 2025). Furthermore, studies concerning collaborative governance and multi-stakeholder partnerships in the implementation of stunting policies remain relatively limited compared to studies focusing on health intervention approaches (Pickering et al., 2015; Conway et al., 2020). Therefore, future research should strengthen investigations related to collaborative implementation, institutional coordination, and cross-sectoral integration in stunting reduction programs.

This study is limited to articles indexed in selected databases and the selection criteria applied within the systematic literature review process (Onyango et al., 2019; Altobelli et al., 2020). In addition, this study focuses on the synthesis of literature concerning policy implementation and multi-stakeholder partnerships without conducting direct empirical validation in the field (Besada et al., 2016; Zuhri et al., 2024). Therefore, future studies may develop more empirical investigations regarding collaborative implementation, cross-sectoral coordination, and the dynamics of inter-actor relationships within stunting reduction programs in specific regional contexts (Afandi et al., 2023; Balqis et al., 2024; Napirah et al., 2024).

REFERENCES

1. Adi, A. C., Diana, R., Devy, S. R., Bagus Qomaruddin, M., Damayanti, N. A., & Putri, N. K. (2019). The Correlation Between Regulation Understanding by Inter-Professional First 1000 Days of Life Health Workers and the Acceleration of Toddler Stunting Prevention. *Indian Journal of Public Health Research and Development*, 10(3), 911–916. <https://doi.org/10.5958/0976-5506.2019.00618.1>
2. Adongo, A. O., Matofari, J. W., & Mbuthia, E. (2024). Dietary Diversity Among Children Aged 6–59 Months from Settled Pastoral Communities in Marsabit County, Kenya. *African Journal of Food, Agriculture, Nutrition and Development*, 24(6), 26554–26582. <https://doi.org/10.18697/ajfand.131.24175>
3. Afandi, M. N., Tri Anomsari, E., Novira, A., & Sudartini, S. (2023). Collaborative Governance in a Mandated Setting: Shifting Collaboration in Stunting Interventions at Local Level. *Development Studies Research*, 10(1). <https://doi.org/10.1080/21665095.2023.2212868>
4. Ahoya, B., Kavle, J. A., Straubinger, S., & Gathi, C. M. (2019). Accelerating Progress for Complementary Feeding in Kenya: Key Government Actions and The Way Forward. *Maternal and Child Nutrition*, 15. [HTTPS://DOI.ORG/10.1111/MCN.12723](https://doi.org/10.1111/MCN.12723)
5. Altobelli, L. C., Cabrejos-Pita, J., Penny, M., & Becker, S. (2020). Understanding Differential Reductions in Undernutrition Among Districts in Rwanda Through the Perspectives of Mid-Level and Community Actors on Policy Commitment and Policy Coherence. *Global Health-Science and Practice*, 8(4), 732–758. <https://doi.org/10.9745/ghsp-d-19-00332>
6. Andreinie, R., Sekartini, R., Chandra, D. N., & Mudjihartini, N. (2024). Factors Affecting Stunting in Children Aged 6–23 Months in South Sumatra Province, Indonesia. *Malaysian Journal of Nutrition*, 30(2), 129–142. <https://doi.org/10.31246/mjn-2023-0101>

7. Andrestian, M. D., Hariati, N. W., & Mau, E. A. J. C. (2025). Analysis Of Nutrition Intervention Policies in the Prevalence of Stunting in Indonesia. *Universal Journal of Public Health*, 13(1), 210–222. <https://doi.org/10.13189/ujph.2025.130121>
8. Arini, H. R. B., & Peranto, S. (2023). Social Analysis of Childhood Stunting in Indonesia. *Southeast Asian Journal of Tropical Medicine and Public Health*, 54, 21–38.
9. Aryeetey, R., & Coomson, J. B. (2022). Rapid Review of Key Policies and Programs Linked with Nutrition and Health in Ghana. *African Journal of Food, Agriculture, Nutrition and Development*, 22(2), 19727–19777. <https://doi.org/10.18697/ajfand.107.21825>
10. Balqis, B., Rahmadani, S., Abadi, M. Y., Rosmanely, S., Anwar, A., Trisasmita, L., Sulianderi, N. M. V, Fahmi, F., Arsin, A., Arfandi, M. A., Hamka, N. A., & Amaliah Amriani, A. S. (2024). Development Of Cross-Sector Collaboration Indicators for Accelerating the Reduction of Stunting in South Sulawesi, Indonesia. *Journal of Public Health and Pharmacy*, 4(3), 225–237. <https://doi.org/10.56338/jphp.v4i3.5924>
11. Besada, D., Kerber, K., Leon, N., Sanders, D., Daviaud, E., Rohde, S., Rohde, J., Van Damme, W., Kinney, M., Manda, S., Oliphant, N. P., Hachimou, F., Ouedraogo, A., Ghali, A. Y., & Doherty, T. (2016). Niger’s Child Survival Success, Contributing Factors and Challenges to Sustainability: A Retrospective Analysis. *Plos One*, 11(1). <https://doi.org/10.1371/journal.pone.0146945>
12. Brar, S., Akseer, N., Sall, M., Conway, K., Diouf, I., Everett, K., Islam, M., Séne, P. I. S., Tasic, H., Wigle, J., & Bhutta, Z. (2020). Drivers Of Stunting Reduction in Senegal: A Country Case Study. *American Journal of Clinical Nutrition*, 112, 860s–874s. <https://doi.org/10.1093/ajcn/nqaa151>
13. Briaux, J., Martin-Prevel, Y., Carles, S., Fortin, S., Kameli, Y., Adubra, L., Renk, A., Agboka, Y., Romedenne, M., Mukantambara, F., Van Dyck, J., Boko, J., Becquet, R., & Savy, M. (2020). Evaluation of an Unconditional Cash Transfer Program Targeting Children’s First-1,000-Days Linear Growth in Rural Togo: A Cluster-Randomized Controlled Trial. *Plos Medicine*, 17(11). <https://doi.org/10.1371/journal.pmed.1003388>
14. Conway, K., Akseer, N., Subedi, R. K., Brar, S., Bhattarai, B., Dhungana, R. R., Islam, M., Mainali, A., Pradhan, N., Tasic, H., Thakur, D. N., Wigle, J., Maskey, M., & Bhutta, Z. A. (2020). Drivers Of Stunting Reduction in Nepal: A Country Case Study. *American Journal of Clinical Nutrition*, 112, 844s–859s. <https://doi.org/10.1093/ajcn/nqaa218>
15. Cotta, R. M. M., Oliveira, F. D. C., Magalhaes, K. A., Ribeiro, A. Q., Sant’ana, L. F. D., Priore, S. E., & Franceschini, S. D. C. (2011). Social And Biological Determinants of Iron Deficiency Anemia. *Cadernos De Saude Publica*, 27, S309–S320. <https://doi.org/10.1590/s0102-311x2011001400017>
16. Crookston, B. T., Bennett, C., Hall, P. C., Hasan, M., Linehan, M., Syafiq, A., Torres, S., West, J. H., & Dearden, K. A. (2018). Increased Maternal Education and Knowledge of Nutrition and Reductions In Poverty Are Associated with Dietary Diversity and Meal Frequency in an Observational Study of Indonesian Children.

- International Journal of Child Health and Nutrition*, 7(4), 132–138.
<https://doi.org/10.6000/1929-4247.2018.07.04.1>
17. Fabusoro, E., Afolabi, W. A. O., & Adenekan, L. A. (2004). Effect of Rural Women's Workload on Care Practices and Children's Growth - The Case of Yewa South Local Government, Ogun State, Nigeria. *Outlook On Agriculture*, 33(2), 125–132.
<https://doi.org/10.5367/000000004773973109>
 18. Gross, R., & Schultink, W. (1997). Micronutrient Deficiency in Urban Indonesia. *Archivos Latinoamericanos De Nutricion*, 47(2), 50–53.
 19. Gunnal, G., Bagaria, D., & Roy, S. (2024). Regional Patterns in Minimum Diet Diversity Failure and Associated Factors Among Children Aged 6-23 Months in India. *National Medical Journal of India*, 37(4), 181–190.
https://doi.org/10.25259/nmji_241_2023
 20. Gwelo, N. B., Sumankuuro, J., Akintola, O., & Brieger, W. R. (2023). Factors Associated with Underweight, Overweight, Stunting and Wasting Among Primary School-Going Children Participating in a School Health Initiative In South Africa. *Bmc Nutrition*, 9(1). <https://doi.org/10.1186/s40795-023-00778-x>
 21. Hadi, A. J. (2020). Analysis Of Balanced Nutrition Program Implementation Against Stunting in Toddlers. *Unnes Journal of Public Health*, 9(2), 148–159.
<https://doi.org/10.15294/ujph.v0i0.34141>
 22. Hasan, S., Utami, T. N., Batubara, C., Azizah, N., Muhammad, I. P. N., Muhammad, S. A. N., Sari, S. M., & Harahap, R. H. (2023). Strengthening Communication: A Strategy to Increase Community Satisfaction in Stunting Services in Indonesia. *Open Public Health Journal*, 16(1).
<https://doi.org/10.2174/18749445-v16-2306070-2022-184>
 23. Herawati, D. M. D., & Sunjaya, D. K. (2022). Implementation Outcomes of National Convergence Action Policy to Accelerate Stunting Prevention and Reduction at the Local Level in Indonesia: A Qualitative Study. *International Journal of Environmental Research and Public Health*, 19(20).
<https://doi.org/10.3390/ijerph192013591>
 24. Ipa, M., Yuliasih, Y., Astuti, E. P., Laksono, A. D., & Ridwan, W. (2023). Stakeholders' Role in the Implementation of Stunting Management Policies in Garut Regency. *Indonesian Journal of Health Administration*, 11(1), 26–35.
<https://doi.org/10.20473/ijha.v11i1.2023.26-35>
 25. Iruhiriye, E., Frongillo, E. A., Olney, D. K., Niyongira, E., Nanama, S., Blake, C. E., Rwibasira, E., & Mbonyi, P. (2024). Understanding Differential Reductions in Undernutrition Among Districts in Rwanda Through the Perspectives of Mid-Level and Community Actors on Policy Commitment and Policy Coherence. *Maternal And Child Nutrition*, 20(3). <https://doi.org/10.1111/mcn.13640>
 26. Jinabhai, C. C., Taylor, M., Coutsooudis, A., Coovadia, H. M., Tomkins, A. M., & Sullivan, K. R. (2001). Epidemiology Of Helminth Infections: Implications for Parasite Control Programmes, A South African Perspective. *Public Health Nutrition*, 4(6), 1211–1219. <https://doi.org/10.1079/phn2001180>

27. Kania, I., Karmila, M., Rismayanti, E., Ardiyanti, H., Tarigan, H., & Supriliyani, N. W. (2025). Strategic Model for Reducing Stunting Rates Through Parenting Improvement in Indonesia: Supporting Sdg 3 To Promote Good Health and Well-Being. *Journal of Lifestyle and Sdg's Review*, 5(2). <https://doi.org/10.47172/2965-730x.sdgsreview.v5.n02.pe02942>
28. Kulkarni, R., Surve, S., Patil, S., Sankhe, L., Gupta, P., & Toteja, G. (2019). Nutritional Status of Adolescent Girls in Tribal Blocks of Maharashtra. *Indian Journal of Community Medicine*, 44(3), 281–284. <https://doi.org/10.4103/ijcm.ijcm.369.18>
29. Napirah, M. R., Vidyanto, V., Rahman, N., Ningrum, A. S., Asmawati, A., & Veruswati, M. (2024). Implementation Of National Movement for the Acceleration of Nutrition Improvement Policy for the First 1,000 Days of Life in Indonesia. *Kesmas-National Public Health Journal*, 19(1). <https://doi.org/10.21109/kesmas.v19i1.8045>
30. Noviansyah, N., Romli, K., Mukmin, H., & Wijayanto, R. (2022). Strategy For Accelerating Stunting Prevention Through Religious Approach to Generate Qualified Generation. *International Journal of Public Health Science*, 11(3), 1058–1066. <https://doi.org/10.11591/ijphs.v11i3.21383>
31. Onyango, A. W., Jean-Baptiste, J., Samburu, B., & Mahlangu, T. L. M. (2019). Regional Overview on the Double Burden of Malnutrition and Examples of Program and Policy Responses: African Region. *Annals of Nutrition and Metabolism*, 75(2), 127–130. <https://doi.org/10.1159/000503671>
32. Paikah, N., Yamin, M., & Hafni, N. (2024). Analysis Of Policies and Strategies to Lower Childhood Stunting in South Sulawesi, Indonesia. *El-Ussrah*, 7(1), 19–41. <https://doi.org/10.22373/ujhk.v7i1.22310>
33. Pickering, A. J., Djebbari, H., Lopez, C., Coulibaly, M., & Alzua, M. L. (2015). Effect of a Community-Led Sanitation Intervention on Child Diarrhoea and Child Growth in Rural Mali: A Cluster-Randomised Controlled Trial. *Lancet Global Health*, 3(11), E701–E711. [https://doi.org/10.1016/s2214-109x\(15\)00144-8](https://doi.org/10.1016/s2214-109x(15)00144-8)
34. Prianto, B., Molyo, P. D., Widayati, S., Setiyaningsih, L. A., & Nuswantari, S. A. (2025). Reducing Stigma Toward Mothers in Stunting Incidence by Increasing Fathers' Participation in Raising Children. *Journal of Population and Social Studies*, 33, 159–174. <https://doi.org/10.25133/jpssv332025.0009>
35. Prieto, P. A. C., Ramírez, K. M. T., Moreno, S., Holguín, J. S., Pineda, D. M., Tomasi, S., & Varela, A. R. (2021). Reduction of Chronic Malnutrition for Infants in Bogota, Colombia. *Bmc Public Health*, 21(1). <https://doi.org/10.1186/s12889-021-10620-3>
36. Putri, P. M., Shafira, A. S., & Mahardhika, G. S. (2024). Stunting Reduction Strategy in Indonesia: Maternal Knowledge Aspects. *Indonesian Journal of Public Health*, 19(2), 329–343. <https://doi.org/10.20473/ijph.v19i2.2024.329-343>
37. Rah, J. H., Sukotjo, S., Badgaiyan, N., Cronin, A. A., & Torlesse, H. (2020). Improved Sanitation Is Associated with Reduced Child Stunting Amongst Indonesian Children Under 3 Years of Age. *Maternal And Child Nutrition*, 16. <https://doi.org/10.1111/mcn.12741>

38. Rahman, F., Setiawan, M. I., Arifin, S., Jannah, R., Ahdani, N., Ardiansyah, M., Wati, R. M., & Thalib, A. (2024). Multisector Policy to Accelerate Stunting Reduction in South Kalimantan. *Pakistan Journal of Life and Social Sciences*, 22(2), 4529–4536. <https://doi.org/10.57239/pjlss-2024-22.2.00336>
39. Renzaho, A. M. N., Chitekwe, S., Chen, W., Rijal, S., Dhakal, T., & Dahal, P. (2017). The Synergetic Effect of Cash Transfers for Families, Child Sensitive Social Protection Programs, And Capacity Building for Effective Social Protection on Children's Nutritional Status in Nepal. *International Journal of Environmental Research and Public Health*, 14(12). <https://doi.org/10.3390/ijerph14121502>
40. Riyadi, H., Rosidi, A., Margawati, A., Dewi, R. K., & Khomsan, A. (2021). Nutrient Intakes and Nutritional Status of Children of Samin Indigenous People in Indonesia. *African Journal of Food, Agriculture, Nutrition and Development*, 21(3), 17696–17710. <https://doi.org/10.18697/ajfand.98.20185>
41. Ryveka, A., Lestari, L. A., Pratiwi, D., & Sundjaya, T. (2023). The Development of Multivitamin Mineral Jelly Candy “Previmin” For Stunting Prevention. *Amerta Nutrition*, 7(3sp), 10–19. <https://doi.org/10.20473/amnt.v7i3sp.2023.10-19>
42. Shekar, M., Kakietek, J., D'alimonte, M. R., Rogers, H. E., Eberwein, J. D., Akuoku, J. K., Pereira, A., Soe-Lin, S., & Hecht, R. (2017). Reaching The Global Target to Reduce Stunting: An Investment Framework. *Health Policy And Planning*, 32(5), 657–668. <https://doi.org/10.1093/heapol/czw184>
43. Sirajuddin, Sirajuddin, S., Thaha, R., Razak, A., Ansariadi, Taha, R. M., Junadi, P., & Ali, P. B. (2022). The Evaluation of Effect Gammarana Intervention to Reducing Stunting During the Covid-19 Pandemic: Protocol Evaluation of Stunting Intervention in Enrekang District. *Journal of Public Health Research*, 11(1). <https://doi.org/10.4081/jphr.2021.2393>
44. Siswati, T., Iskandar, S., Pramestuti, N., Raharjo, J., Rubaya, A. K., & Wiratama, B. S. (2022). Drivers Of Stunting Reduction in Yogyakarta, Indonesia: A Case Study. *International Journal of Environmental Research and Public Health*, 19(24). <https://doi.org/10.3390/ijerph192416497>
45. Sriatmi, A., Patriajati, S., Suryoputro, A., & Fatmasari, E. Y. (2021). Stakeholder Mapping Analysis on the Scaling-Up Nutrition Movement During The 1000 Days of Life Between the Urban and Rural Government Areas. *Unnes Journal of Public Health*, 10(1), 68–77. <https://doi.org/10.15294/ujph.v10i1.38029>
46. Suarayasa, K., Tiara, A. E. A. N., & Kalebbi, A. (2024). Empowering Posyandu Cadres in Stunting Prevention. *Media Publikasi Promosi Kesehatan Indonesia*, 7(5), 1351–1358. <https://doi.org/10.56338/mppki.v7i5.5346>
47. Sufri, S., Iskandar, I., Nurhasanah, N., Bakri, S., Jannah, M., Rajuddin, R., Nainggolan, S. I., Sirasa, F., & Lassa, J. A. (2024). Implementation Outcomes of Convergence Action Policy to Accelerate Stunting Reduction in Pidie District, Aceh Province, Indonesia: A Qualitative Study. *Bmj Open*, 14(11). <https://doi.org/10.1136/bmjopen-2024-087432>

48. Sunarya, A. (2023). Stunting Reduction in Indonesia: Challenges and Opportunities. *International Journal of Sustainable Development and Planning*, 18(7), 2223–2231. <https://doi.org/10.18280/ijstdp.180727>
49. Syafrawati, S., Lipoeto, N. I., Masrul, M., Novianti, N., Gusnedi, G., Susilowati, A., Nurdin, A., Purnakarya, I., Andrafikar, A., & Umar, H. B. (2023). Factors Driving and Inhibiting Stunting Reduction Acceleration Programs at District Level: A Qualitative Study in West Sumatra. *Plos One*, 18(3). <https://doi.org/10.1371/journal.pone.0283739>
50. Verma, M., Sharma, P., Khanna, P., Srivastava, R., & Sahoo, S. S. (2021). Nutrition Status of School Children in Punjab, India: Findings from School Health Surveys. *Journal Of Tropical Pediatrics*, 67(1). <https://doi.org/10.1093/tropej/fmaa068>
51. Yusriadi, Y., Sugiharti, S., Ginting, Y. M., Sandra, G., & Zarina, A. (2024). Preventing Stunting in Rural Indonesia: A Community-Based Perspective. *African Journal of Food, Agriculture, Nutrition and Development*, 24(9), 24470–24491. <https://doi.org/10.18697/ajfand.134.24820>
52. Zuhri, S., Pramitasari, A., & Rozikin, I. (2024). The Role of Actors in Accelerating Stunting Reduction in Indonesia: A Pentahelix Perspective. *Revista De Gestao Social E Ambiental*, 18(4). <https://doi.org/10.24857/rgsa.v18n4-069>
53. World Health Organization, UNICEF, & World Bank. (2024). *Levels and trends in child malnutrition: Key findings of the 2024 edition*. <https://www.who.int/>
54. Kementerian Kesehatan Republik Indonesia. (2025). *Survei Status Gizi Indonesia (SSGI) 2024 dalam angka*. Badan Kebijakan Pembangunan Kesehatan.