



## Social Services in Handling Stunting at the Abeli Community Health Center, Abeli District, Kendari City

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### ABSTRACT

The purpose of this study is to find out the factors that cause stunting conditions at the Abeli Community Health Center, Abeli District, Kendari City and to find out the forms of social services in handling stunting at the Abeli Community Health Center, Abeli District, Kendari City. This type of research uses a qualitative descriptive approach with 12 informants selected by purposive sampling technique. The data in this study was obtained through interviews, observations and documentation studies, the data obtained was then analyzed qualitatively with an interactive model consisting of data reduction, data presentation and conclusion drawn. The results of this study show that the factors that cause stunting conditions in the Abeli Community Health Center, Abeli District, Kendari City are insufficient nutritional intake, insufficient or insufficient nutrition, lack of access to clean water facilities, wrong parenting, lack of knowledge and education of mothers, non-fulfillment of Toilet Washing, non-fulfillment of exclusive breastfeeding and economic factors. And forms of social services in handling stunting at the Abeli Community Health Center, Abeli Kendari District, include social services for healing, protection and rehabilitation, nutrition services and counseling, nutrition, clean water sanitation improvement, and growth monitoring.

**Keyword:** Social Services, Stunting, Abeli Community Health Center

### INTRODUCTION

Stunting is one of the serious nutritional problems in Indonesia, especially for children, and can have a significant impact on the quality of human resources (HR). Stunting occurs due to chronic malnutrition that continues from the womb to the first 1,000 days of a child's life, which causes physical and cognitive growth to be stunted. According to the World Health Organization (WHO), stunting is the most relevant indicator of chronic malnutrition because it is directly related to cognitive ability and productivity in adulthood (WHO, 2018). Research from Dewey and Begum (2019) shows that children who are stunted tend to have lower academic achievement, poor cognitive skills, and an increased risk of chronic diseases such as diabetes and hypertension later in life.

The problem of stunting in Indonesia is closely related to the socio-economic conditions of the community, access to health services, and suboptimal parenting. UNICEF

(2017) stated that a multisectoral approach involving increased access to nutrition, clean water, sanitation, maternal education, and better social support is the key to reducing stunting rates. In addition, efforts to utilize the potential of local resources such as providing nutritious food from local ingredients are also very important. Programs like this can help reduce the prevalence of stunting while empowering communities to improve the health of their children.

Continuous and coordinated efforts are urgently needed to overcome the problem of stunting in Indonesia. This requires synergy between the government, the private sector, and the community to ensure every child gets his or her right to adequate nutrition and optimal growth. Stunted children are at risk of diabetes, obesity, heart and blood vessel disease. Stunting can reduce the quality of human resources, productivity, and even cause high economic losses. The adverse impact caused by stunting is increasing morbidity and risk in adulthood which eventually leads to a decrease in human resource productivity (Aryastami & Tarigan, 2017).

The causes of stunting are due to low access to nutritious food, low intake of vitamins and minerals, and poor food diversity and animal protein sources. Maternal factors and poor parenting, especially in the behavior and practice of feeding children, are also the causes of stunting if mothers do not provide adequate and good nutritional intake. Mothers whose adolescence is malnourished, even during pregnancy and lactation will greatly affect the growth of the child's body and brain.

In addition, poor parenting, especially in the behavior and practice of feeding children, is also a cause of stunting children if the mother does not provide adequate and good nutritional intake. Mothers whose adolescence is undernourished, even during pregnancy and lactation will greatly affect the growth of the child's body and brain. The government seeks to deal with the problem of stunting with various policies and rules that have been contained in Article 9 paragraph 1 of Law Number 36 of 2009 concerning Health which states that everyone is obliged to participate in realizing, maintaining, and improving the highest degree of public health.

In addition to Law Number 36 of 2009, in order to accelerate nutrition improvement, the government has also issued Presidential Regulation Number 42 of 2013 concerning the National Movement for the Acceleration of Nutrition Improvement article 1 (1) which states

that the National Movement for the Acceleration of Nutrition Improvement is a joint effort between the government and the community through the mobilization of participation and stakeholder concern in a planned and coordinated manner to accelerate the improvement of nutrition of priority communities in a thousand days Presidential Regulation of the Republic of Indonesia Number 83 of 2017 concerning Strategic Food and Nutrition Policy, then Regulation of the Minister of Health of the Republic of Indonesia Number 23 of 2014 concerning Efforts to Improve Nutrition, Regulation of the Minister of Health of the Republic of Indonesia Number 29 of 2019 concerning Overcoming Nutrition Problems for Children Due to Diseases.

Stunting reduction acceleration teams were also formed at the provincial, district/city and village or sub-district levels. The handling carried out by the Abeli Community Health Center such as cross-cutting nutrition programs for children under five and this program includes monitoring child growth, nutritional supplements for children identified as stunted, and providing additional food or nutritional supplements to children who are identified as stunted. Food supplementation program, this program provides food supplements such as nutritious supplements to children in need. Access to clean flow and sanitation, improve children's access to clean flow and safe sanitary facilities to prevent disease and infection.

Based on the results of initial observations at the Abeli Health Center located on Jalan Sewangi No. 2, Abeli District, Kendari City, and from the data obtained at the Abeli Health Center, the number of stunting in Abeli District is 10 children under five who are included in the malnutrition or stunting data. Seeing the number of stunted children, the Abeli Community Health Center handles with social service programs and stunting handling, which is expected to reduce the stunting rate in Abeli District.

Considering that the research is not the same as the research process, the researchers are determined to conduct more research with the title "Social services in handling stunting at the Abeli Community Health Center, Abeli District, Kendari City".

## **METHODS**

This research was carried out at the Abeli Community Health Center, Abeli District, Kendari City, this location was chosen with the consideration that in the Abeli Health Center, Abeli District, Kendari City, there are children who have stunting diseases or malnutrition causes. This is evidenced by the existence of toddlers who have differences in weight, height

with the age that should be at the time of the examination process at the Abeli Community Health Center, Abeli District, Kendari City. This study used a qualitative approach with 12 informants, consisting of 10 parents of toddlers, the Head of the Community Health Center and 1 Nutrition Programmer of the Abali Community Health Center who was selected using the purposive sampling technique. The data in this study were obtained through interviews, observations and documentation studies. The data obtained was then analyzed qualitatively with an interactive model consisting of data reduction, data presentation and conclusion drawn.

## **RESULTS AND DISCUSSION**

### **Factors Causing Stunting at Abeli Community Health Center, Abeli District, Kendari City**

Based on the results of the research carried out, it was shown that the factors that affect the causes of stunting at the Abeli Community Health Center, Abeli District, Kendari City are;

#### **1. Poor Nutritional Intake**

Stunting is a serious health problem, especially in early childhood, and is caused by a lack of adequate nutritional intake. As mentioned in the research by Kristiawan et al. (2021), the first 1,000 days of life, starting from pregnancy to 2 years old, is a critical period that determines the optimal growth and development of children. Lack of nutritional intake during this period can result in children being born with low birth weight and susceptible to diseases, which then has an impact on stunting and decreased intelligence (IQ). Therefore, attention to a balanced and adequate nutrition pattern must be carried out from the time of pregnancy. As a pregnant woman, nutritional needs increase to meet the needs of her own body and the fetus she is carrying. Fulfilling nutritional needs which include six main food groups, such as protein, carbohydrates, vitamins, and minerals, is very important to prevent stunting and ensure healthy growth in children (Sulistyoningsih, 2011).

Recent research supports the importance of early nutrition interventions, which suggests that proper nutrition in early life can prevent more serious nutritional problems later in life, including stunting (Sholikhah, 2019). In addition, WHO (2020) emphasizes that stunting not only has an impact on physical health, but also on children's cognitive abilities, which has the potential to affect academic achievement and productivity in adulthood. Therefore, stunting prevention efforts must involve various parties, including the government and health workers, to ensure that targeted nutrition interventions can be provided to vulnerable groups.

## **2. Insufficient Nutrition**

Stunting in toddlers, which is characterized by height that is not appropriate for age, is a serious health problem caused by various factors, including nutritional deficiencies from pregnancy to the first two years of a child's life. According to Retnal and Reni (2022), inadequate feeding patterns during infancy, especially before the age of six months, can lead to nutritional deficiencies that negatively impact the child's growth and development. Babies who do not get exclusive breastfeeding for the first six months are at risk of stunting because the necessary nutrients are not optimally met. In addition, mistakes in nutrition in infancy, such as giving additional food too early or in amounts that are not in accordance with the child's needs, also contribute to an increased risk of stunting (Semba & Bloem, 2015).

Furthermore, the nutritional needs of mothers during pregnancy vary greatly and are influenced by their nutritional status before pregnancy and previous medical history. Factors such as chronic diseases, repeated pregnancies, and too close a gap between pregnancies can also interfere with the fulfillment of maternal nutritional needs, which ultimately affects fetal health and the risk of stunting in children. It is important for pregnant women to ensure adequate and balanced nutritional intake in order to support optimal fetal growth. The first trimester of pregnancy, although its nutrient requirements are relatively low, are essential for early fetal development, while the latter trimester requires greater nutrient intake to support faster growth (Semba & Bloem, 2015).

## **3. Lack of Access to Clean Water Facilities**

Stunting is one of the significant health problems in Indonesia, including at the Abeli Community Health Centre, Abeli District, Kendari City. Stunting occurs due to chronic malnutrition that lasts for a long time, especially in the first 1,000 days of life, which covers the gestation period until the child is two years old. One of the main factors that causes stunting is the lack of access to clean water facilities. The availability of clean water is crucial to prevent various infectious diseases that can worsen children's nutritional status, such as diarrhea. This disease causes impaired nutrient absorption that contributes to stunting (Prüss-Ustün et al., 2019).

In addition, an unbalanced diet and low access to nutritious food also affect the occurrence of stunting. Children who do not get adequate nutritional intake, especially in terms of protein and micronutrients such as iron, vitamin A, and zinc, are at high risk of

developing growth disorders (Black et al., 2013). Poor sanitation environment and low public awareness of the importance of clean and healthy living behaviors further exacerbate this condition (Spears, 2018).

Therefore, interventions to overcome stunting must include improving access to clean water, increasing nutritional awareness, and improving the sanitary environment. This holistic approach is expected to reduce the prevalence of stunting in the region, so that children can grow and develop optimally.

#### **4. Wrong Parenting**

Wrong parenting style is one of the main factors causing stunting at the Abeli Community Health Centre, Abeli District, Kendari City. Inappropriate parenting is often caused by parents' low knowledge of the nutrients that children need during the growth period. According to research conducted by Nisa et al. (2018), parents who do not have a good understanding of children's nutrition tend to provide unbalanced food intake, which ultimately affects the physical and cognitive growth of children. In Abeli District, the low level of education and socialization on the importance of a balanced diet has also exacerbated this situation.

In addition, bad habits such as not giving exclusive breastfeeding for the first six months, as well as the introduction of complementary foods (MP-ASI) too early or late, also contribute to the high stunting rate. In line with a study conducted by Sari and Putri (2017), it is explained that parenting styles that do not pay attention to the timing of MP-breastfeeding can result in malnutrition in children. In the Abeli Community Health Centre, this is exacerbated by limited access to optimal health services, as well as a lack of ongoing education for pregnant and lactating women.

Overall, comprehensive interventions are needed through educational programs and awareness raising about proper parenting. This can be done through cooperation between the government, health workers, and local communities. Research from Utami *et al.* (2020) also showed that community-based interventions involving families in stunting prevention efforts can provide significant results in reducing stunting rates in the region.

#### **5. Lack of Knowledge and Education of Mothers**

One of the main factors that causes the high stunting rate in this region is the lack of knowledge and education of mothers related to nutrition and child health. According to

research conducted by Rahayu and Suryani (2018), mothers' knowledge about nutrition has a great influence on children's nutritional status. Mothers who have low knowledge tend not to understand the importance of balanced nutrition for the growth and development of children, so that the child's nutritional intake is not enough, which ultimately leads to stunting.

Lack of education is also the main cause. A study conducted by Permatasari et al. (2020) shows that suboptimal nutrition education programs at Community Health Centers can affect maternal knowledge, which has an impact on children's diet and nutrition. At the Abeli Community Health Centre, the health education program that has not been maximized causes mothers to not get enough information about the importance of exclusive breastfeeding, proper complementary breastfeeding, and comprehensive child health care.

In addition, the book "Public Health Nutrition: Principles and Practice in Community and Global Health" by Elizabeth A. et al. (2017) also emphasizes that the approach to education and maternal empowerment is the key to preventing stunting. With good education, mothers can better understand the importance of nutrition, proper parenting, and optimal health care for their children, which will ultimately reduce stunting rates in the region. Therefore, increasing maternal knowledge and education at the Abeli Community Health Centre must be a priority in the stunting prevention program.

## **6. Unfulfilled Toilet Bath**

Stunting is a complex and multifactorial health problem, especially in areas with limited access to adequate sanitation. One of the factors causing stunting at the Abeli Community Health Center, Abeli District, Kendari City is the non-fulfillment of Toilet Washing. Poor toilets are closely related to low access to clean water and adequate sanitation, which leads to a high risk of gastrointestinal infections such as diarrhea. These infections significantly interfere with the absorption of essential nutrients during the child's growth period, which in turn contributes to the occurrence of stunting (UNICEF, 2018).

In addition, an environment with poor sanitation also facilitates the spread of various pathogens, such as intestinal worms, which can worsen malnutrition conditions in children. Research by Prüss-Ustün *et al.* (2019) showed that increased access to clean water and sanitation facilities can reduce the prevalence of diarrhea and other related diseases, which are direct risk factors for stunting. In the context of the Abeli Community Health Centre, the lack of public awareness about the importance of good hygiene practices is also an obstacle in

efforts to reduce stunting rates. Education about the importance of proper toilets and their role in preventing stunting needs to be improved to break the chain of disease transmission and malnutrition.

Improving sanitation infrastructure and community-based intervention programs that emphasize the importance of good hygiene practices can be effective strategies in reducing stunting rates. These interventions must be integrated into broader health policies, which aim to improve the quality of life of the people in Abeli District as a whole.

#### **7. Exclusive breastfeeding is not fulfilled**

One of the main factors causing stunting at the Abeli Community Health Centre, Abeli District, Kendari City is the lack of exclusive breast milk. Exclusive breastfeeding is the provision of breast milk alone without additional food or other drinks to the baby during the first six months of life. According to research conducted by Rollins et al. (2016), exclusive breastfeeding has an important role in supporting optimal child growth and development. Breast milk contains all the nutrients a baby needs to grow healthy, as well as providing protection against infectious diseases that can interfere with the growth process.

The lack of exclusive breastfeeding is often caused by various factors such as lack of maternal knowledge about the importance of exclusive breastfeeding, low social support from the family and environment, and lack of access to health information and services. According to Black et al. (2016), the low level of exclusive breastfeeding is closely related to the increased risk of stunting in children. This shows that interventions that aim to increase awareness and practice of exclusive breastfeeding are very important to prevent stunting.

This research is in line with the findings of UNICEF (2019) which confirms that community-based interventions involving nutrition education and breastfeeding support can help reduce the prevalence of stunting. Therefore, efforts to increase maternal understanding and support from the surrounding environment are urgently needed to ensure the fulfillment of exclusive breastfeeding and prevent stunting in this region.

#### **8. Economic Factors**

At the Abeli Community Health Centre, Abeli District, Kendari City, one of the main factors that cause stunting is the economic factor. According to the latest research, poverty or economic limitations greatly affect the nutritional intake pattern in families. When family



incomes are low, access to nutritious food and adequate health services is limited, increasing the risk of stunting in children (Prendergast & Humphrey, 2014).

A study by Darmawati et al. (2019) shows that children from families with low economic status tend to experience higher stunting compared to children from families with better economic status. In addition, low-income families often live in poor sanitation environments, which can lead to recurrent infections in children, thereby inhibiting nutrient absorption and worsening stunting conditions (Black et al., 2013).

Furthermore, the literature shows that economic interventions through social assistance programs and nutrition education for mothers can significantly reduce stunting rates. Programs like this allow families to access nutritious food and better health services, which ultimately contributes to a reduction in stunting rates (Smith & Haddad, 2015). Thus, interventions that focus on improving the economic condition of families at the Abeli Community Health Centre are essential to reduce the prevalence of stunting in the region.

#### **Types of Social Services at Abeli Community Health Center, Abeli District, Kendari City**

Social services are an important component in efforts to improve people's welfare. At the local level, Community Health Centres play a crucial role in providing various forms of social services that are accessible to local communities. Abeli Community Health Centre, located in Abeli District, Kendari City, is an example of a health facility that implements various forms of social services as part of social policies that aim to improve the quality of life of the community.

In this context, it is important to examine the forms of social services implemented at the Abeli Community Health Centre, as well as how they contribute to the well-being of the people in the region. An analysis of these forms of social services can provide an overview of the efforts that have been made to reach different levels of society and meet their needs in the health and social fields. In addition, a deep understanding of existing forms of social services can help in evaluating the effectiveness of the programs that have been implemented, as well as identifying areas that still need further improvement or development. Thus, this study is expected to provide valuable insights for stakeholders in formulating better policies and strategies to improve the quality of social services at Community Health Centre Abeli and its surrounding areas.

## **1. Social Services For Healing, Protection and Rehabilitation**

Based on the research conducted, it shows that social services at Community Health Centre Abeli include three main aspects: healing, protection, and rehabilitation. Healing focuses on providing physical and mental health services, including disease management, psychological counseling, and health education. This is in line with the concept of primary health services that function as the front line in healing the community (Sujatmiko, 2019). Protection includes preventive and curative efforts to protect the public from health risks, such as immunizations, routine health checks, and health awareness campaigns. The protection program at the Community Health Center is an implementation of the national health policy that aims to improve access and quality of health services (Wulandari, 2018). Rehabilitation focuses on the recovery of individuals post-illness or trauma, including physiotherapy services, psychosocial support, and ongoing mentoring. This is important to restore the quality of life of patients, as well as reduce the social and economic burden (Utami, 2020).

The social services at the Community Health Centre not only focus on curative, but also preventive and rehabilitative aspects, in line with a holistic and sustainable approach to public health.

## **2. Nutrition Services and Counseling**

Nutrition services and counseling at the Abeli Community Health Centre, Abeli District, Kendari City are an important part of efforts to prevent and control nutritional problems in the community. This service focuses on providing information, education, and nutritional interventions that are appropriate to the health conditions of individuals or groups. Based on the theory of primary health services, nutrition services are one of the main pillars in improving the quality of life of the community through the prevention of nutrition-related diseases and the promotion of healthy diets (Zuraida et al., 2019). Nutrition counseling at Community Health Centers involves a holistic approach, where counselors not only provide information regarding balanced nutritional intake, but also assist individuals in understanding and overcoming psychological, social, and cultural barriers that may affect eating behavior (Notoatmodjo, 2017).

In addition, the implementation of nutrition counselling in Community Health Centres should be supported by community involvement and coordination with other sectors, such as education and agriculture, to ensure comprehensive and sustainable interventions

(Nasrul et al., 2018). Research shows that nutrition interventions carried out consistently and community-based can significantly improve the nutritional status of the community, especially in vulnerable groups such as pregnant women, children, and the elderly (Rosidah et al., 2020). Thus, nutritional services and counseling at the Abeli Community Health Centre are a strategic step in realizing optimal public health.

### **3. Nutrition Provision**

Social services in Community Health Centres, particularly in the context of nutrition, play an important role in improving public health. One form of social service provided by the Abeli Community Health Centre in Abeli District, Kendari City, is a nutrition program to vulnerable groups such as pregnant women, toddlers, and children. This program aims to reduce the risk of malnutrition that can cause various health problems, such as stunting in children. The concept of Community-Based Health Care (CBHC) is very relevant in this context. CBHC emphasizes the importance of active community participation in supporting health programs organized by primary health care facilities such as Community Health Centres. This community participation can be in the form of nutrition counseling, support for healthy eating, and monitoring children's growth. A study conducted by Putri et al. (2017) showed that nutrition interventions carried out at the community level, with the support and active participation of the community, were effective in improving the nutritional status of children in the area. Community Health Centres, as the spearhead of health services at the community level, must continue to strengthen this role to achieve better public health goals.

### **4. Clean Water Sanitation Improvement**

Social services at Community Health Centres, such as improving clean water sanitation, are important forms of public health interventions to improve people's quality of life. Good clean water sanitation can prevent various infectious diseases, such as diarrhea, which are often caused by poor water quality. Improving clean water sanitation at the Abeli Community Health Center, Abeli District, Kendari City, is a preventive effort that is in line with the concept of *health promotion*. This health promotion not only focuses on the treatment of diseases, but also on disease prevention through behavioral changes and a healthier living environment.

According to Green and Kreuter (2005), health promotion involves developing public policies that support health, create a healthy physical and social environment, and empower

people to participate in activities that support their own health. With the improvement of clean water sanitation, the Community Health Centre plays an active role in creating a healthier environment and supporting a clean and healthy lifestyle (PHBS) in the community.

Research conducted by Susanna and Fitria (2018) also shows that sanitation interventions, such as the provision of clean water and adequate sanitation facilities, can significantly reduce the incidence of infectious diseases in the community. Thus, improving clean water sanitation at the Abeli Community Health Centre is a strategic step in an effort to improve overall public health.

## 5. Growth Monitoring

Monitoring the growth of babies at the Abeli Community Health Center, Abeli District, Kendari City, is an important form of social service in maintaining public health. This monitoring aims to identify and prevent growth problems in babies from an early age. A relevant concept in this context is *primary health care*, which emphasizes the importance of health services that are close to the community and easily accessible to the community. Primary health services function as the front line in promotive, preventive, curative, and rehabilitative efforts against various health problems.

In the context of monitoring baby growth, this service includes measuring weight, height, and evaluating the baby's motor and sensory development. Community Health Center as a first-level health facility has a vital role in educating parents about the importance of balanced nutrition, immunization, and parenting that supports optimal growth and development. Research conducted by Mahmudah (2017) emphasizes the importance of the role of Community Health Centers in monitoring infant growth and development, especially in areas with limited access to advanced health services.

## CONCLUSION

Based on the results and discussion above, the conclusion that can be drawn in this study is that stunting in the Abeli Community Health Centre, Abeli District, Kendari City is influenced by various interrelated factors, including lack of nutritional intake, limited access to clean water and sanitation, and inappropriate knowledge and parenting. Low economic factors also play a role in limiting access to nutritious food and health services. Therefore, stunting prevention efforts must be carried out comprehensively through nutritional interventions, improving health education, improving access to sanitation, and economic

support for families. This holistic approach is expected to reduce stunting rates and improve overall child health. Then social services at the Abeli Community Health Centre, Abeli District, Kendari City include various important aspects that focus on healing, protection, rehabilitation, nutrition services, clean water sanitation improvement, and monitoring baby growth. These programs aim to improve the welfare of the community through a holistic approach that includes preventive, curative, and rehabilitative aspects. Through community-based interventions and supported by active community participation, the Abeli Community Health Centre plays a vital role in maintaining and improving the quality of public health in the region, making it an important example in the implementation of local health policies.

## REFERENCES

- Aryastami, N., & Tarigan, I. 2017. Kaljian Kebijakan Dan Penanggulangan Masalah Gizi Stunting Di Indonesia Policy Analysis On Stunting Prevention In Indonesian. *Buletin Penelitian Kesehatan*, 45 (4), 233-240.
- Black, R. E., Victora, C. G., Walker, S. P., Bhutta, Z. A., Christian, P., de Onis, M., ... & Maternal and Child Nutrition Study Group. (2016). Maternal and child undernutrition and overweight in low-income and middle-income countries. *The Lancet*, 382(9890), 427-451.
- Black, R. E., Victora, C. G., Walker, S. P., et al. (2013). Maternal and child undernutrition and overweight in low-income and middle-income countries. *The Lancet*, 382(9890), 427-451.
- Darmawati, D., Arisanti, R., & Firmansyah, F. (2019). Faktor-faktor yang berhubungan dengan kejadian stunting pada balita di Wilayah Kerja Community Health Centre Kendari Barat. *Jurnal Kesehatan Masyarakat Indonesia*, 14(2), 76-82.
- Dewey, K. G., & Begum, K. (2019). Long-Term Consequences Of Stunting In Early Life. *Maternal & Child Nutrition*, 7(Suppl 3), 5-18.
- Elizabeth, A., Jones, A., & Bartlett, S. (2017). *Public Health Nutrition: Principles and Practice in Community and Global Health*. Burlington: Jones & Bartlett Learning.
- Green, L. W., & Kreuter, M. W. (2005). *Health program planning: An educational and ecological approach*. McGraw-Hill.
- Kristiawan, dkk. (2021). " Stunting di Indonesia." *Jurnal Kesehatan*. 3 (2). 111-121.
- Mahmudah, N. (2017). Peran Community Health Centre dalam Pemantauan Tumbuh Kembang Anak di Daerah Terpencil. *Jurnal Kesehatan Masyarakat*, 12(2), 45-53.
- Nasrul, Z., et al. (2018). "Peran Sektor Kesehatan dalam Peningkatan Status Gizi Masyarakat." *Jurnal Gizi Indonesia*, 12(2), 156-164.
- Nisa, A., Rahmawati, E., & Subekti, N. (2018). Hubungan Pengetahuan Ibu dengan Status Gizi Balita di Kecamatan X. *Jurnal Gizi dan Kesehatan*, 10(1), 25-32.
- Notoatmodjo, S. (2017). *Promosi Kesehatan dan Perilaku Kesehatan*. Jakarta: Rineka Cipta.

- Permatasari, D., Anggraini, F., & Sari, M. (2020). Evaluasi Program Edukasi Gizi di Community Health Centre Terhadap Penurunan Angka Stunting. *Jurnal Kesehatan Masyarakat*, 12(4), 451-457.
- Prendergast, A. J., & Humphrey, J. H. (2014). The stunting syndrome in developing countries. *Paediatrics and International Child Health*, 34(4), 250-265.
- Prüss-Ustün, A., Wolf, J., Bartram, J., Clasen, T., Cumming, O., Freeman, M. C., ... & Cairncross, S. (2019). Burden of disease from inadequate water, sanitation, and hygiene for selected adverse health outcomes: An updated analysis with a focus on low- and middle-income countries. *International Journal of Hygiene and Environmental Health*, 222(5), 765-777.
- Prüss-Ustün, A., Wolf, J., Bartram, J., et al. (2019). Burden of disease from inadequate water, sanitation and hygiene for selected adverse health outcomes: An updated analysis with a focus on low- and middle-income countries. *International Journal of Hygiene and Environmental Health*, 222(5), 765-777.
- Putri, N. A., Wijayanti, P. P., & Hartini, S. (2017). Peran Pemberian Makanan Tambahan Terhadap Status Gizi Balita di Wilayah Kerja Community Health Centre. *Jurnal Kesehatan Masyarakat*, 12(2), 89-95.
- Rahayu, D. & Suryani, I. (2018). Pengaruh Pengetahuan Gizi Ibu Terhadap Status Gizi Anak. *Jurnal Gizi Indonesia*, 6(3), 123-129.
- Retnal, R., & Reni. (2022). Faktor-faktor penyebab stunting di Indonesia. Jakarta: Erlangga.
- Rollins, N. C., Bhandari, N., Hajeerhoy, N., Horton, S., Lutter, C. K., Martines, J. C., ... & Victora, C. G. (2016). Why invest, and what it will take to improve breastfeeding practices? *The Lancet*, 387(10017), 491-504.
- Rosidah, R., et al. (2020). "Efektivitas Konseling Gizi dalam Perbaikan Status Gizi Balita." *Jurnal Kesehatan Masyarakat*, 15(3), 45-55.
- Sari, R., & Putri, D. (2017). Pengaruh Pemberian MP-ASI Dini terhadap Risiko Stunting pada Anak Usia 2-5 Tahun. *Jurnal Kesehatan Masyarakat*, 12(2), 45-50.
- Semba, R. D., & Bloem, M. W. (2015). Nutrition and health in developing countries. 2nd Edition. Humana Press.
- Sholikhah, D. (2019). "Intervensi Gizi dalam Pencegahan Stunting." *Jurnal Gizi dan Pangan*.
- Smith, L. C., & Haddad, L. (2015). Reducing child undernutrition: Past drivers and priorities for the post-MDG era. *World Development*, 68, 180-204.
- Spears, D. (2018). Exposure to open defecation can account for stunting in rural India. *Proceedings of the National Academy of Sciences*, 115(44), 10629-10631.
- Sujatmiko. (2019). *Pelayanan Kesehatan Primer di Indonesia: Konsep dan Implementasi*. Jakarta: Pustaka Kesehatan.
- Sulistyoningsih, H. (2011). *Gizi untuk Kesehatan Ibu dan Anak*. Jakarta: EGC.
- Susanna, D., & Fitria, L. (2018). The effectiveness of water, sanitation and hygiene (WASH) program in preventing diarrhea among children under five in Indonesia. *Journal of Health Research*, 32(2), 144-153.
- UNICEF. (2017). *UNICEF Annual Report 2017*. United Nations Children's Fund.

- UNICEF. (2018). *Water, sanitation and hygiene (WASH) and the nutritional status of children: Evidence from 47 countries*. UNICEF.
- UNICEF. (2019). *UNICEF programming guidance for early childhood development*. UNICEF.
- Utami, R., Syafitri, W., & Nugroho, D. (2020). Intervensi Berbasis Komunitas untuk Pencegahan Stunting di Daerah Endemik. *Jurnal Kesehatan Lingkungan*, 14(3), 134-140.
- Utami, S. (2020). *Rehabilitasi Pasca Trauma di Fasilitas Kesehatan Primer*. Yogyakarta: Andi Offset.
- WHO. (2020). *Stunting in a Nutshell*. World Health Organization.
- World Health Organization (WHO). (2018). *Reducing Stunting in Children: Equity Considerations for Achieving the Global Nutrition Targets 2025*. Geneva: WHO.
- Wulandari, R. (2018). *Kebijakan Kesehatan Nasional dan Pelaksanaannya di Daerah*. Surabaya: Erlangga.
- Zuraida, A., et al. (2019). Pendekatan Holistik dalam Konseling Gizi di Pelayanan Kesehatan Primer. *Jurnal Kesehatan*, 14(1), 89-97.