

IMPLEMENTATION OF SEMARANG CITY GOVERNMENT POLICIES IN ACCELERATING STUNTING REDUCTION (A STUDY IN THE WORKING AREA OF BANDARHARJO HEALTH CENTER, NORTH SEMARANG DISTRICT)

Anita Widi Hastuti^{*1}, Bonaventura Ngarawula², Kridawati Sadhana³

^{1,2,3}Doctoral Program Social Science, University of Merdeka Malang, Indonesia

anitawidi@gmail.com¹,
bonaventurangarawulab@gmail.com²,
kridawati@unmer.ac.id³

Corresponding Author:anitawidi@gmail.com³

ABSTRACT

Health development in Indonesia aligns with the objectives of the SDGs 2030, particularly in reducing stunting as part of achieving the goal of healthy and prosperous living. Stunting is a chronic nutritional issue that poses risks to the physical and mental growth of children, with long-term impacts such as cognitive impairments, low productivity, and an increased risk of chronic diseases. The Semarang City Government has adopted eight convergence actions to strengthen cross-sectoral intervention efforts, including empowering family health posts (*posyandu*), the Healthy Kitchen to Overcome Stunting (DASHAT) program, utilizing nutrition gardens, and training stunting cadres. Collaboration between government sectors, academia, and the community has been key to significantly reducing the stunting prevalence rate from 1.66% in 2022 to 1.16% in 2023. Despite the decline, challenges remain, particularly in areas such as North Semarang District, which has the highest stunting rates. Socioeconomic factors, limited infrastructure, and the suboptimal implementation of programs, such as stunting daycare and nutritional aid, are major obstacles. Strategic efforts include strengthening research, data, and information for program evaluation and increasing community engagement, particularly among youth, to promote preventive behavioral changes. Local regulations, such as Perwali No. 45 of 2023, provide clear policy directions to integrate various stunting management programs, supporting the achievement of the RPJMN 2020-2024 target of a 14% stunting prevalence rate by 2024.

KEYWORDS: *Stunting, health policies, nutritional interventions, cross-sectoral convergence, prevalence reduction*

1) **Introduction:**

Health development in Indonesia, which refers to the SDGs 2030, aims to achieve sustainable development based on human rights principles [1],[2]. The SDGs are founded on universal, inclusive, and integrated principles and consist of four main pillars: social development for equitable community welfare, environmental development for sustainable resource management, economic development for inclusive growth, and legal development for transparent governance [3]. The SDGs comprise 17 goals, including ending poverty, improving health, and providing quality education. In the health sector, the focus is on ensuring healthy lives and well-being, which includes reducing maternal mortality, controlling diseases, and improving access to reproductive health [4]. Stunting is one of the major health issues faced by Indonesia. This condition is characterized by children having a height below the standard for their age due to chronic malnutrition from the prenatal stage to the first two years of life [5],[6]. The impacts include impaired physical growth, brain development, reduced productivity in adulthood, and increased risk of chronic diseases [7],[8]. Stunting also indicates a poor caregiving environment and can affect the quality of future generations. The WHO reported a global stunting prevalence of 22.3% in 2022 [9], while Indonesia has set a target to reduce the prevalence of stunting to 14% by 2024, as outlined in the RPJMN 2020-2024 and Presidential Regulation No. 72 of 2021 [10],[11].

In Indonesia, the stunting prevalence rate has decreased over the last five years, from 27.7% in 2019 to 21.6% in 2022. In East Java, the stunting prevalence was reported at 19.2% [12]. Semarang City also showed a decline in stunting rates, from 1.66% in December 2022 to 1.16% in September 2023 [13]. Despite the overall decline, certain areas continue to show high prevalence rates, such as North Semarang District (169 children), West Semarang (94 children), and Ngaliyan (81 children). The Tugu District had the lowest prevalence, with only 19 children. To support the acceleration of stunting reduction, Central Java Province enacted Governor Regulation No. 34 of 2019 on accelerating stunting prevention. This regulation serves as a guideline for districts and cities, including Semarang City. As a follow-up, the Mayor of Semarang issued Perwali No. 45 of 2023, which regulates policies and strategies for stunting management, involving civil servants (ASN) and various community components in an integrated approach to prevent and address stunting.

2) Methodology

This study employs the Descriptive Qualitative Empirical Legal Research method. It is designed to investigate issues that require in-depth study. The research aims to provide an overview of the strategies for accelerating the reduction of stunting in the working area of the Bandarharjo Health Center, North Semarang District, Semarang City. Based on the data collected, this study falls into the category of empirical/sociological research. *Approach is a way of dealing with something (as a problem)*. An approach is essential in research. According to Budiono, an approach in research represents the focus or perspective of the researcher in addressing the issues or problems being studied. Peter Mahmud Marzuki (as cited in the text) emphasizes that there are five approaches in legal research: the statutory approach, the case approach, the historical approach, the comparative approach, and the conceptual approach. Meanwhile, Johnny Ibrahim (as cited in Budiono) adds two more types of approaches: the analytical approach and the philosophical approach. This study employs the statutory approach [14].

Moreover, the data sources used in this research are primary and secondary data. The primary data in this study were obtained through interviews conducted with informants, both through direct interviews and questionnaires. The informants included families with stunted children and the head of the Bandarharjo Community Health Center in North Semarang District. Secondary data was obtained from primary legal materials, secondary legal materials, and tertiary legal materials. Primary legal materials were acquired through laws and regulations governing maternal health and stunting. Secondary legal materials were sourced from textbooks written by influential legal experts, law journals, jurisprudence, minutes of legal seminars, and the results of legal research related to this study [15]. Meanwhile, tertiary legal materials were obtained from dictionaries, encyclopedias, and other similar sources. The data collection method employed purposive sampling, while primary data was gathered through interviews. Interviews were conducted with two families affected by stunting, the Head of the Semarang City Health Office, and the Head of the Bandarharjo Health Center in North Semarang District. The secondary data collection method involved obtaining data from the Bandarharjo Health Center in North Semarang District, Semarang City, as well as data from the Semarang City Health Office. For secondary data or legal materials, the procedure was carried out through a literature study, which involved first collecting legal materials, then reviewing and processing them to select those that are interrelated. These materials were subsequently organized and systematically discussed, with separation based on the subject matter of each chapter. This systematic approach facilitated the resolution of existing

issues and provided conclusions that could be used to address the problems explored in this research.

(e) Data Analysis Method

This study employs qualitative descriptive analysis, meaning that once all the data is collected, it is described using systematically structured sentences. The data is then analyzed using applicable laws and regulations, their derivatives, and relevant theories. This approach aims to provide a concise understanding of the issues based on legal materials related to the discussed problems, such as Presidential Regulation of the Republic of Indonesia No. 72 of 2021 on Accelerating Stunting Reduction, Minister of Health Regulation No. HK.01.07/MENKES/1928/2022 on the National Guidelines for Medical Services in Managing Stunting [11], and Governor Regulation of Central Java No. 34 of 2019 on Accelerating Stunting Prevention in Central Java Province. The study also employs a deductive legal material analysis method, which is a research method based on general concepts or theories applied to explain a set of legal facts. These facts are then examined and analyzed using the legal materials collected [16]–[18].

3) Result

(a) Policies Related to Stunting

A study of a policy requires an adequate theoretical foundation to analyze the issues. The theoretical foundation in this research includes the **Theory of Legal Effectiveness**, the **Concept of Public Policy, Policy Analysis, Policy Implementation**, and the **Concept of Stunting**.

(1) Theory of Legal Effectiveness

Legal effectiveness refers to the ability of the law to achieve its objectives, namely justice, certainty, and utility. In the **Kamus Besar Bahasa Indonesia** (Indonesian Dictionary), effectiveness is defined as the success of an effort in producing specific results or impacts. Law is considered effective if it can change societal behavior in accordance with established norms, although its implementation often faces challenges, such as public beliefs in myths that contradict legal rules. According to **Soerjono Soekanto**, the effectiveness of the law can be measured by the extent to which it generates positive impacts and directs human behavior to align with legal norms [19]. Similarly, **Hans Kelsen** associates legal effectiveness with its validity, emphasizing the degree to which legal norms bind and are obeyed by society [20]. The effectiveness of the law is evident in its ability to regulate and compel society to comply with existing regulations. A law is deemed effective when societal behavior conforms to its provisions, thereby achieving its intended purpose. Factors influencing legal effectiveness, such as norms, coercive threats, and judicial processes, must operate optimally to ensure the proper implementation of the law.

(2) Policy Definition

In the **Kamus Besar Bahasa Indonesia** (Indonesian Dictionary), policy is defined as a set of concepts, principles, and guidelines that serve as the basis for carrying out tasks, leadership, or actions, particularly in government and organizations. **Carl J. Frederick** (as cited in Widodo) defines policy as a series of actions proposed by individuals, groups, or governments within a specific environment to achieve objectives, despite facing obstacles or opportunities. Policies must reflect what is actually implemented, rather than merely proposals for action on an issue [21].

According to **Winarno**, policy can refer to a broad context, such as foreign policy, or a more specific context, such as deregulation policy. Policy differs from wisdom, as policy involves formal rules, while wisdom requires deep consideration. **James E. Anderson** states that policy is a series of actions aimed at solving problems, with its focus on practical implementation. Anderson's approach is considered more precise because it distinguishes policy from decisions, which involve choosing among alternatives [22].

(3) Definition of Public Policy

The scope of public policy studies is very broad, encompassing various fields and sectors such as economics, politics, society, culture, law, and more. Additionally, public policy can be viewed hierarchically and may operate at national, regional, or local levels, including laws, government regulations, presidential regulations, ministerial regulations, provincial/regional government regulations, governor decrees, district/city regulations, and regent/mayor decrees.

Pressman and Widavsky (as cited in Winarno) define public policy as a hypothesis containing initial conditions and predictable outcomes. Public policy must be distinguished from other forms of policy, such as private policies [22].

(4) Public policy urgency

Public policy studies involve describing public policy efforts, assessing the impact of environmental forces on the content of public policy, analyzing the effects of institutional statements and political processes on public policy, and conducting in-depth research on the consequences of various political policies on society. These consequences may include both expected (planned) and unexpected impacts of public policies on the community.

(5) Stages of Public Policy Making

The process of creating public policy is complex, as it involves numerous processes and variables that must be analyzed. Dividing the process into stages helps simplify the study of public policy. The stages include: **1. Agenda Setting, 2. Policy Formulation, 3. Policy Adoption, 4. Policy Implementation, 5. Policy Evaluation.**

(6) Policy Systems and Components

According to **Dunn (1994; as cited in Widodo)**, the policy system involves reciprocal relationships among three key elements: **public policy, policy actors, and the policy environment**. The interaction between these three components forms the core of the policy system, illustrating how they influence and are influenced by each other. This reciprocal relationship is typically represented visually in diagrams to provide a clearer understanding of the dynamics within the policy system [21] :

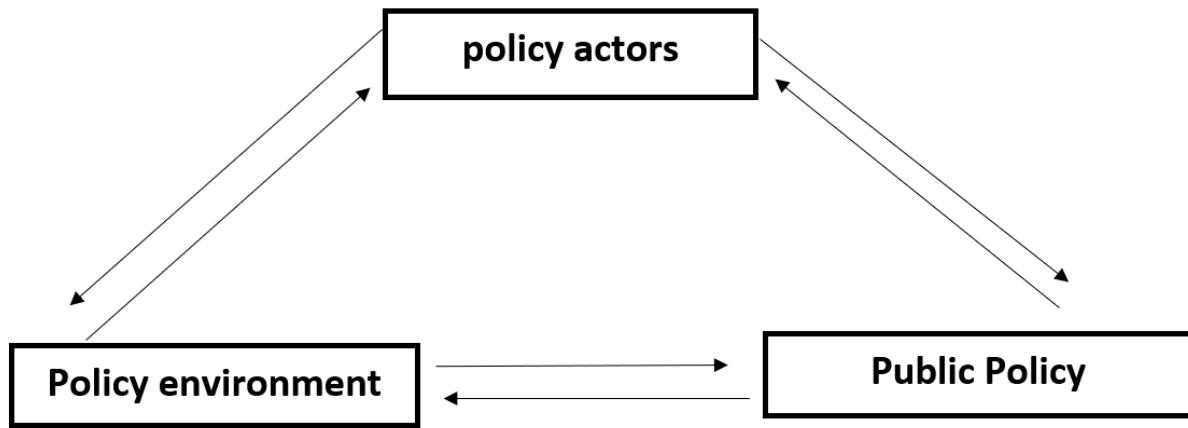


Figure 1. Component Relationships in the Policy System.

From the diagram above, it can be explained that as a system, policy is a series of interconnected components rather than independent elements. The policy system triangle illustrates the existence of policy actors who both influence and are influenced by public policy. All of these are also shaped by the policy environment, which refers to the institutional framework that facilitates public policy implementation while accommodating technical, socio-political, and interactive aspects among the policy elements.

(7) Concept of Policy Analysis

According to **Dunn** (as cited in Ayuningtyas, 2013), policy analysis is an applied social science discipline that combines methods from various fields to produce relevant information for the formulation and evaluation of public policies. This analysis involves exploring the causes, effects, and performance of policies and presenting them to decision-makers to enhance policy processes and outcomes [23]. Policy analysis encompasses two main aspects: Policy determination focuses on the rationale behind the policy, the timing of its implementation, and the target audience or stakeholders it addresses. Policy content includes the description and evaluation of the policy in relation to its development or critiques based on a theoretical value framework.

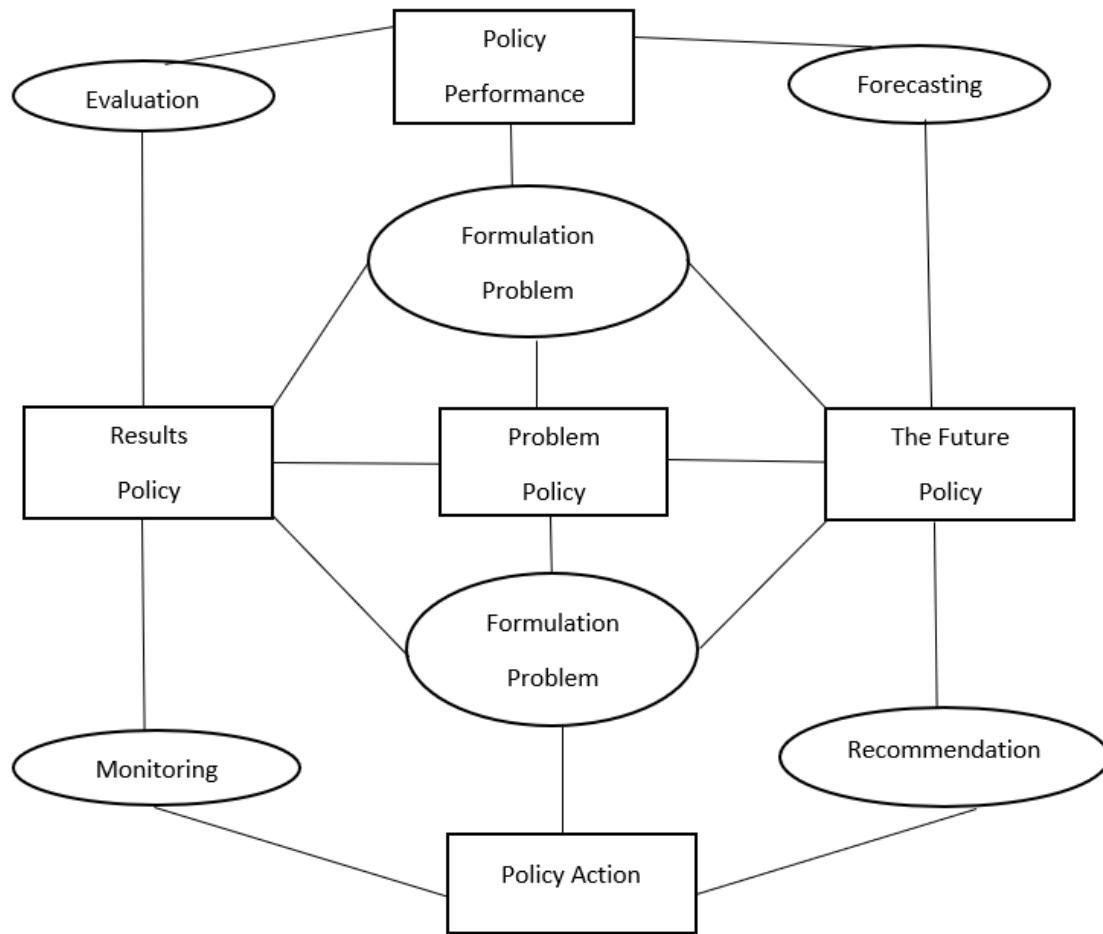


Figure 2: Problem-Oriented Policy Analysis

Analyzing a policy involves a series of systematic and structured processes or stages. This process aims to ensure that the resulting policy aligns with the needs and is effective in its implementation. With the right approach, policy analysis can provide a solid foundation for decision-making.

(8) Policy Implementation Concept

Policy implementation is an activity that distributes policy outputs, carried out by implementers to target groups in order to achieve the policy's objectives. Policy implementation also refers to actions taken by individuals or groups, whether from the government or the private sector, to realize the goals established in policy decisions [23].

Experts have developed various methods and models to analyze policy implementation. Among these are the **Grindle Method**, the **Edward III Method**, and others.

(9) Concept of Stunting

Stunting is a condition of impaired growth resulting from chronic malnutrition, particularly during the first 1,000 days of life (HPK). It is characterized by an individual's height being shorter than the average height of others of the same age. **Stunted growth (short stature)** or low height-for-

age is used as an indicator of chronic malnutrition, reflecting a long-term history of inadequate nutrition. Height-for-age is an anthropometric measurement that indicates skeletal growth status [24]. Stunting reflects growth disturbances as a result of poor nutritional and health status. The **UNICEF framework** (United Nations Children's Fund) identifies two direct causes of stunting: diseases and inadequate nutrient intake.

In 2021, the poverty rate in Semarang City was recorded at 4.56%, with 84,450 people living below the poverty line. This condition limits community access to balanced nutritious food, affecting the health of pregnant women and young children. Although the distribution of iron supplements (*Tablet Tambah Darah*) has reached 100%, many pregnant women do not adhere to consuming the tablets, resulting in an anemia prevalence rate of 15.4% among pregnant women. Additionally, the proportion of pregnant women experiencing Chronic Energy Deficiency (CED) is 10.43%, and the anemia prevalence among adolescent girls remains notably high.

Other health issues include the lack of maternal knowledge about nutrition and health, which affects caregiving practices and the provision of complementary feeding for infants. Proper handwashing practices have also not been fully adopted by the community. The attendance rate of young children at **posyandu** (integrated health posts) remains low, at only 44%. This results in many children not having their growth and development monitored regularly. Additionally, mothers or caregivers miss out on receiving counseling regarding proper caregiving practices and dietary patterns for infants and young children.

(b) Implementation of Semarang City Government Policies in Accelerating Stunting Reduction to Achieve the Stunting Prevalence Target in North Semarang District, Semarang City

Based on Article 28H, Paragraph 1 of the 1945 Constitution, Law No. 39 of 1999, Law No. 36 of 2009, Law No. 17 of 2023 on Health, Article 4, Presidential Regulation No. 72 of 2021 on Accelerating Stunting Reduction, and Minister of Health Regulation No. 13 of 2022 on Amendments to Minister of Health Regulation No. 21 of 2020 concerning the Strategic Plan of the Ministry of Health for 2020–2024, the Governor of Central Java issued Governor Regulation No. 34 of 2019, further refined through Semarang Mayor Regulation No. 45 of 2023, which amends Mayor Regulation No. 27 of 2022 on Accelerating Stunting Reduction in Semarang City and Stunting Prevention in Central Java Province.

The Governor Regulation of Central Java Province establishes guidelines for implementing actions to accelerate stunting prevention at the regional level, aiming to reduce the stunting prevalence among children under two years old (baduta) and under five years old (balita) to below 20% by 2023. This is achieved through the implementation of eight convergence actions focused on stunting prevention as outlined in the regulation.

The policy issued by the Governor of Central Java serves as the foundation for every administrative region in Central Java to create derivative policies and operational regulations for implementing stunting prevention and management activities.

(4) Discussion

The Semarang City Government has implemented eight (8) convergence actions aimed at strengthening the effectiveness of interventions, starting from planning, execution, monitoring,

and evaluation. The cross-sectoral programs undertaken by the Semarang City Government include population control and family planning, public housing and settlement areas, mandatory health center (Puskesmas) activities to examine children with nutritional problems, launching the TPK (Family Assistance Team) program targeting families at risk of stunting, improving food security and nutrition, strengthening and developing systems, data, information, research, and innovation, among others.

Challenges in Accelerating Stunting Reduction. In 2023, the Minimum Wage of Semarang City (UMK) increased by 7.3%, from IDR 2,835,021 to IDR 3,060,000, as stated in the Decree of the Governor of Central Java Number: 561/57 of 2023. The highest UMK in Semarang City is set at IDR 3,243,969 and will take effect on January 1, 2024. However, families with low incomes, such as those with stunting children where the father works as a casual laborer earning IDR 800,000 per month and the mother is unemployed, face a significant gap between their income and basic family needs. This includes the insufficient fulfillment of nutritional needs for children with stunting. Additionally, the cost of renting a house, which reaches IDR 600,000 per year, and the cost of clean water at IDR 50,000 per month, further exacerbate these socio-economic barriers, worsening stunting conditions. Moreover, the lack of optimal health education activities for pre-marriage teenagers regarding stunting remains an area that requires significant improvement.

Analysis of Challenges in Accelerating Stunting Reduction in Semarang Utara District, Semarang City

The Semarang City Government, through Semarang Mayor Regulation Number 45 of 2023, has set a target to reduce the prevalence of stunting by 4% by 2024. This target is outlined in the regulation, aiming to lower the stunting prevalence among children under five years old from 8.2% in 2023 to 4% in 2024. The Semarang City Health Office, which plays a key role in nutritional intervention, has incorporated this stunting reduction target as part of its Key Performance Indicators in the 2021-2026 Strategic Plan.

However, the implementation of this stunting reduction acceleration faces several challenges:

- 1. Budgetary and Human Resource Constraints.** Limited funding and inadequate human resources significantly hinder the ability to fully implement stunting prevention programs. These limitations affect the coverage and effectiveness of interventions aimed at addressing the nutritional needs of children at risk of stunting.
- 2. Inter-Sectoral Coordination.** Although the health sector is at the forefront of stunting prevention, achieving the program's objectives requires strong coordination with other sectors, such as education and economic empowerment. Without this holistic and integrated approach, addressing the root causes of stunting becomes more challenging.

Key Insights for Improvement

To meet the target reduction of stunting prevalence, it is crucial for the government to:

- Allocate additional funding to ensure adequate resources for health programs.
- Strengthen partnerships between the health sector and other sectors like education and economic development to implement a multi-faceted strategy.
- Focus on community-based interventions and educational campaigns to raise awareness and prevent stunting from a broader perspective.

By addressing these challenges, the Semarang City Government can enhance the effectiveness of its efforts to combat stunting and improve the health outcomes of children under five in Semarang Utara District.

(5) Conclusion

Based on the research conducted, the efforts of the Semarang City Government in addressing stunting demonstrate a strong commitment by involving various sectors and related institutions. The implementation of stunting reduction policies in Semarang City has been progressing well through cross-sectoral programs such as family empowerment, strengthening *posyandu* (integrated health service posts), community education, and specific daycare programs (*TPA*) for children experiencing stunting. The target to reduce stunting prevalence by 4% in 2024 serves as the primary benchmark for these efforts.

Challenges in Policy Implementation

Despite these efforts, several obstacles affect the implementation of stunting reduction policies:

1. **Low Socioeconomic Status.** Many families face economic hardships, limiting their access to adequate nutrition for children at risk of stunting.
2. **Limited Access to Adequate Nutrition.** Some families struggle to provide sufficient and nutritious food, exacerbating stunting cases.
3. **Coordination Across Sectors.** Achieving better convergence between related sectors remains challenging, hindering a more holistic approach to combating stunting.
4. **Suboptimal Role of Communities and Stunting Cadres.** The insufficient engagement of communities and cadres in changing behaviors and improving understanding about stunting creates additional hurdles.

Recommendations

To ensure the success of stunting reduction efforts in Semarang City, the following measures are essential:

- **Strengthen Data Systems and Research.** Improve the collection, management, and analysis of data related to stunting to enhance targeted interventions.
- **Expand Assistance to At-Risk Families.** Provide more comprehensive support, including financial aid, nutritional supplements, and access to healthcare.
- **Increase Community Participation.** Encourage greater involvement from communities in stunting prevention programs through education, training, and awareness campaigns.

By addressing these challenges and strengthening these strategies, Semarang City can achieve its stunting reduction targets and improve the overall well-being of children in the community.

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