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THE MODEL OF POLICY IMPLEMENTATION STUNTING PREVENTION IN INDONESIA: A CASE STUDY IN WEST JAVA PROVINCE

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Abstract
West Java Province is one among the priority provinces that are 12 in number with the mostprevalence of being stunting in Indonesia in 2022, at 24.5%. In addition, the disparity between districts/cities is also wide, in which there is a sharp difference between two regions where the stunting prevalence rate is below 14% but also are four regions reaches 30%.This study targets to understand the factors of policy implementation on stunting reduction in West Java Province using a public policy implementation theory approach from Smith in Quade (1977)based on factors: Idealized policy, resources, target groups, and environmental factors.Implementation of the explanatory survey method with data collection sources for literature studies and field studies which includesinterviews, observations andquestionnaires. The method of sampling used is "Simple Random Sampling". 127 people was selected as the sample size. The data analysismethodused in this study is path analysis.The outcomes highlighted that policy implementation has a major impact on the effectiveness of stunting prevention programs. Policy implementation is able to work more effectively through idealized policies, quality target groups, responsible implementing agencies, and environmental factors that support policy implementation.

Key word: Stunting, SDGs, factor factorImplementasi Kebijakan.

A. INTRODUCTION

In Indonesia, health programs strive to enhanceliving, desire and capacity for healthy understanding for all, meant to understand the highest extent of health as a portrayal of general welfare as mentioned in the constitution ("Andrianto Nursikuwagus, 2017; Ulumiyah, 2018; Djasri, 2016"). Therefore, all actors in the implementation of development of health, namely the community and the government (central, provincial, district/city) must synergize to provide planned, sustainable and integrated health services to obtain the highest extent of health ("Suprianto & Mutiarin, 2017; Mujiati &Yuniar, 2016; Christasani & Satibi, 2016").Health development is very important because it has a positive nature of relation with enhancing the human resourcesquality. High degrees of nutritional status andhealth will enhance productivity which will boost people'swelfare or income (Adrianto & Ningrum, 2010; Utami, 2012; Ramadhanti, 2020).

One of the problems faced in health development today is the high rate of stunting. A bad result is shown by stunting, caused due to absence of proper nutrition for a long period of time or frequent illness since the child is in the womb and at an early age so the child who is short as compared to his age. Children suffering from stunting may not be able to reach optimal height and the cognitive potential of their brains may never fully expand. Globally, around "144.0 million" children under five suffer from stunting with the possibility that these children start their lives with difficulties: they face difficulties of learning in school, earn poor as adults, and face

limitations in participation in their respective communities (Unicef, 2020). Stunting is a major problem since it is related with a maximized risk of illness and death, suboptimal brain development so that motor development is delayed and mental growth is inhibited ("Lewit, 1997; Kusharisupeni, 2002; Unicef, 2013"). Multiple studies display the risk caused due to stunting, like decreased achievementacademically (Picauly Toy, 2013), increased risk of obesity (2000; Timaeus, 2012), more susceptibility to "non-communicable diseases" (Unicef Indonesia, 2013), and boosted risk of degenerative diseases ("Picauly Toy, 2013, WHO, 2013, Crookston et al 2013").

The problem that Indonesia faces of stunting has become the government's concern in the last 10 years with the issuance of several regulations that are Presidential, including "Presidential Regulation number 42 of 2013""Presidential Regulation of the Republic of Indonesia Number 42 of 2013" concerning the "National Movement for the Acceleration of Nutrition Improvement" and Presidential Regulation of the Republic of Indonesia Number 83 of 2017 concerning "Strategic Policy on Food and Nutrition" and finally Presidential Regulation of the "Republic of Indonesia Number 72 of 2021" concerning Regulations President on Accelerating Stunting Reduction.Putting an effort to accelerate stunting reduction in Indonesia, since 2017, the government of the Republic of Indonesia has established a "National Strategy for the Acceleration of Stunting Reduction"via "Five Pillars of Stunting Prevention", consisting of 1) Commitment and vision to leadership; 2) Policies of national campaigns and behavior change; 3) Coordination, convergence, and consolidation of regional, central and village programs; 4) Nutrition and food security; and 5) Monitoring and evaluation.

Multiple studies that have been conducted exhibit that the cause of stunting is influenced by several factors, both internal and external. Internally, stunting is influenced by factors that are directly related to the development and growth of infants or toddlers, such as parenting, exclusive breastfeeding, breastfeeding, complete immunization, adequacy of protein and minerals, infectious diseases, and genetics. Externally influenced by family socioeconomic factors, such as the mother's employment status, , mother's level of education and family income (Aridiyah, Rohmawati dan Ririanty 2015; Ni'mah dan Nadhiroh 2015). Thus, it can be concluded that holistic handling of stunting is not enough only in the health sector but must also touch socio-economic aspects. Handling stunting requires coordination across sectors and involving various stakeholders, namely the government, the business world, the community, and others. Countermeasures are conducted by the government through interventions of specific nature, carried out by the "Ministry of Health", Provincial Offices, and Districts/Municipalities; and sensitive interventions related to environmental health, reduction of povertyand empowermentamong women(Rosha et al. 2016).

Table 1
Prevalence of Stunting Rate in West Java Province

No	Category	District/City	Percentage
1	High/Red	DistrictGarut	35.2
		District Cianjur	33
		District Bandung	31.1
		Cirebon City	30.6

2	Medium/Yellow	District Bandung Barat	29.6
		Tasikmalaya City	14.58
		District Bogor	12.96
		District Cirebon	12.94
		Bandung City	26.4
		District Tasikmalaya	23.8
		Sukabumi City	8.68
		Banjar City	22.3
		District Majalengka	23
		District Pangandaran	24.3
		District Sumedang	22
		District Bekasi	21.5
		District Purwakarta	20.6
		District Karawang	20.6
3	Low/Green	Cimahi City	19.9
		Sukabumi City	8.8
		District Kuningan	7.52
		District Subang	3.55
		Bogor City	11.78
		District Ciamis	5.12
		District Indramayu	21.1
		Bekasi City	8.43
		Depok City	12.3

Source: West Java Provincial Health Office, 2024.

On the basis of data from the 2021 “Indonesian Nutritional Status Study” (SSGI), urban areas in West Java Province have high stunting rates. The prevalence found for stunting in West Java in 2021 was 24.5%, this figure decreased significantly compared to 2018, which was 31.5% (Ramdhani, 2023). There are 5 districts or cities in West Java with "blue" status with a prevalence below 10%. From the data above, it can be seen that there are 4 districts/cities in West Java with "red" status with stunting rates above 30%, 11 districts and cities with 'yellow' status with a prevalence of 20 to 30%, and 6 districts/cities with "green" status or prevalence rates reaching 10-20%.

Referring to the description above, it can be seen that the problem and prevalence of stunting that exceeds the WHO limit is above 32% (Riskesdas 2018), shows that the handling carried out in Indonesia, especially West Java Province, has not had a significant impact on stunting prevention.

Policy implementation as part of a series of public policies receives special attention from experts in public policy and public administration (Edwards, 1980: 3). This shows how important implementation is in a series of public policies. One such policy expert who concentrates more on the policy implementation model is Adam Smith. According to Smith (Hollander, 1973) policy implementation is observed as a flow or process.Smith's model assumes the process of policy implementation from the policy process viewpoint of political and social change, where policies created by the government aim for making improvements or changes in society as an entire target group.Therefore, the author is interested in researching further considering that issues related to stunting are currently becoming Indonesia's national priority so it is very important to be researched and further expected to contribute to reducing stunting.

B. LITERATURE REVIEWS

a. Policy Implementation Model

The implementation of public policy will be made easier to understand if it uses a certain model or frame of mind. A model will provide us with a complete picture of an situation, object or process. What components are contained in the object, situation or process? How are the correlations existent between the components for each other? The components of the public policy implementation system model consist of (Tachjan, 2006): (1) programs (policies) implemented; (2) target groups, i.e. community groups that are being targeted at, and expected to benefit from, change or improve; (3) implementors, either individuals ororganizations, who are responsible for managing, implementing and supervising the implementation process; and (4) environmental factors (physical, political, cultural andsocial).There is not only one model of public policy implementation, but there are also various kinds according to the frame of mind of the modeler. One of the models is the one put forward by Adam Smith. Smith (Hollander, 1973) proposed a Process Model or Flow that views the policy process based on the perspective of political and social change. According to Smith (Hollander, 1973) policy implementation is observed as a process or flow.Smith's model observes the process of policy implementation from the perspective of political and social change, where policies crafted by the government target to make changes or improvements in society being a target group (Faedulloh, 2002).

According to Smith (Hollander, 1973), in the implementation process there are four variables that require attention. These four variables are not stand alone in nature but are a unity that are responsible for influencing each other and interacting reciprocally, therefore there are already tensions that can lead to causing protests, physical harm, which requires the establishment of institutions that are new to understand the policy goals. The tension can also lead to alterations in line institutions.So the patterns of interaction of these four variables in policy implementation generates discrepancies, pressures and tensions. These patterns of interaction give outcomes in the creation of certain institutions, as well as being used as feedback fordecreasing tensions and returned to the “matrix of transaction” and institutional patterns. The four variables in the incorporation of public policy, namely: (1) Idealised policy, namely the ideal patterns of interaction that they have explained in the policy they try to introduce;(2) target groups, i.e. those (people) who are most directly affected by the policy and who should adopt the patterns of interaction expected by the policy framer; (3) implementing organizations, such as implementing government bureaucratic units oragencies responsible for implementation of policy; (4) Environmental factors, namely elements in the environment that are responsible for affecting or are influenced by implementation of policy, such as aspects of society,culture, economyand politics.

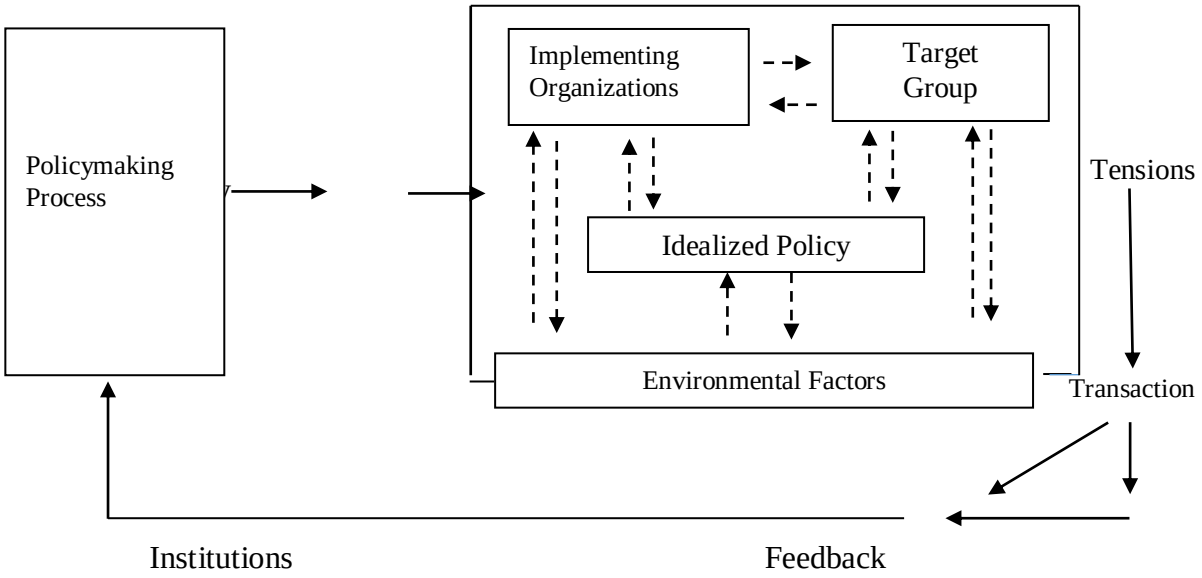

Figure 1: A Model of theProcess of Policy Implementation (Smith, in Quade, 1977:261)

Policies are prepared by the government with the aim of makingchanges or improvements to the community as its target (target groups). The ideal policy concerns the interactionpatterns expected by the parties involved in policy implementation; The target group is those who will adopt the policy, i.e. the people who are most directly affected and must change according to the objectives of the policy; Policy implementers, namely government bureaucracies responsible for implementation of policy;Factors of environment, like elements of environmental elements that impact and are influenced by the policies implemented. The surrounding environment of the general public and interest groups is included.

The process model proposed by Smith gives a high score on realization and ability in its implementation. In this regard, policy implementation does not take place in a mechanistic or linear manner but opens up opportunities for transactions in the form of a negotiation process that results in compromises with the dimensions of target groups. With regard to environmental factors, Smith explained that this is a corridor that must be passed to force the implementation of a policy.In this context, policy implementation is determined by political, social, cultural and economic factors. The interaction between the components of implementation of policy will produce tension of problems that will provoke a response (transaction) which will ultimately become feedback for the policy-making process.

Idealized policy is a way that is responsible for building a commonality of policies that are considered to be relevant to the facedproblems. On the contrary, within an organization, the communicationeffectivenesscoming from a leader has a direct impact on the employee performance or employees under that individual (Vadeveloo et al., 2017). In the case ofexpectedor ideal policy aspect, it has the main function, namely policy adjustment to objectives and the fundamentals of the results to be achieved. An

ideal policy in combating stunting is going to have aimpact directly on the model and designing of government institutions. Government institutions designingbecomes a factor of determination in formulation ofmultiple types of policies in organizations.This kind of institutional design aims to determine the extent of the openness of an institutionto various information and inputs that are used as references in handling of issues.

In this study associated with implementation of public policy, of course, its separation is not possible from the target group aspect, this will promote policy success efforts. Target groups are those who are the recipient of policies and then draw advantage from policies implemented both short-term,long-term and medium-term. This research states that competence is certainly one of the determining factors for the success of a policy implementation.Competence in itself is understood as an ability already present by a person to complete a task correctly and has benefits on the basis ofmultiple things in relation to knowledge, expertise, and attitudes (Emron et al., 2018). In association with implementation, the target group is a subject but also a party that is also able to influence policy implementation.

The organizational model that integrates policies must be able to play a role in developing approaches that are of relevant nature and can be understood by each target group, this is so that the success rate of policies can be implemented properly by all parties, both implementers and program recipients. In the context of implementation of policy, the purpose of the implementing organization is very crucial, which should be able to translate policies in-depth and explore multiple alternatives for achieving the interest of public. Research by Mamuri et al. (2022) states that the strategy of policy implementation and organizational management is the basis for the conclusion of this study. From a perspective of policy, parties or what are also known as actors come from multipleinstitutions that are involved in the political superstructure and infrastructure.This, of course, cannot be separated from issues related to policy. The interaction made in power in the direction of policy highlights the direction in which a decision will be conducted. This suggests that authoritative policies are the result of a series of decisions made systematically and made by influentialor powerful actors for achievement of a particular goal.

Environmental aspects are factors and determinants of policies that will be incorporatedsince policy-implementing organizations cannot implement policies without having full support from the environment that is existing for achievement of policy success. The environment in a policy perspective is one among the efforts that should be developed with a social andcultural approach to the community so that the policies incorporated do not conflict andstill pay enough attention to the community's condition. This is due to the integration of policies of reduction of stunting that cannot be separated from environmental, economic and social factors.

b. Stunting

Malnutrition can occur since the baby is inside the womb and in early days after the birth of the baby. Usually, stunting conditions only appear after the baby is 2 years of age. Toddlers are categorized as very short (severely stunted)and short (stunted) if the body length index or height according to their age has a "z-score" value of less than –"2SD / standard deviation" (stunted) and lower than –"3SD" (severely stunted) compared to the "WHO-MGRS" standard ("Multicentre Growth Reference Study, 2006; Regulation of the Minister of Health of the Republic of Indonesia Number 2 of 2020").

Factors that have an impact on stunting are divided into two kinds of factors, like direct and indirect factors. Direct factors consist of infectious diseases,food intake, low weight at birth and genetics. Indirect factors associated are knowledge regarding nutrition, education of parents, socioeconomics, food distribution,parenting and family size/number of family members (Lainua, 2016). Many studies reveal that the prevalence of stunting is mostly found in toddlers from families with low socioeconomic status, infectious diseases, low education, number of family members, maternal work, and environmental sanitation (Fikadu in Lainua, 2016)

Several studies that have been conducted have shown that the incidence of stunting is impacted by many factors, both internal and external. Internally, stunting is influenced by factors that are directly related to the development and growth of infants or toddlers, such as parenting, exclusive breastfeeding, breastfeeding, complete immunization, adequacy of protein and minerals, infectious diseases, and genetics. Externally influenced by family socioeconomic factors, like the education level of mother, the employment status of mother and family income ("Aridiyah, Rohmawati, and Ririanty 2015; Ni'mah and Nadhiroh 2015").

Based on this, it can be concluded that holistic handling of stunting is not enough only in the health sector but must also touch socio-economic aspects. Handling stunting requires coordination across sectors and involving many stakeholders, like the government, the world of business, the community, and others. Countermeasures are facilitated by the government through particular interventions, conducted by the Ministry of Health, Provincial Offices, and Districts/Municipalities; and sensitive interventions associated with environmental health, reduction of poverty and empowerment among women(Rosha, et al. 2016).

C. Methods

This study makes useof the "explanatory survey method" which is carried out by relating causality between the variables studied and understanding the causes of phenomena that occur in universal and general, as stated by Singarimbun (2008). The data belonging to this study were taken from 2 (two) sources, like obtainment of primary sources from direct research in the field, and secondary data sources received from laws and regulations, documents, reports of health service program and results of previous research relevant to object research. The data collection technique refers to Neuman's (2007) opinion, namely: observation, in-depth interviews, and questionnaires.

The study population is all employees of the "West Java Provincial Health Office" who are on duty either directly or indirectly in stunting prevention services. The considered population element is 429 people (N = 329). The procedure of sampling used is random sampling. The sample size of the study was 217 people (n = 217). Data validity was examined by means of total item correlation techniques and with Cronbach's internal alpha consistency alpha (Kerlinger, 1986). The outcomes of the study were analyzed by factor analysis using the SPSS application.

D. RESULTS

1. Test Validity and Reliability of Questionnaire

Testing of research instruments was done through using a pilot survey by taking a sample of 30 respondents. The outcomes of testing research instruments using a sample of 30 respondents showed that all items had a validity index greater than 0.300 and the

reliability coefficient of each factor was larger than 0.700 so that it could be concluded that the questionnaire used to quantify policy implementation was valid and reliable.

2. The Impact of Policy Implementation on the Effectiveness of Stunting Prevention

To answer the aim of the study to determine the magnitude of the influence of policy implementation on stunting prevention, the author uses statistical analysis techniques, namely path analysis. Calculation of the path analysis of author using the help of "SPSS 25 software". The stages of analysis are explained as follows:

a. Calculating the Correlation Coefficient Between Variables

There are five variables involved in this study in accordance with the hypothesis proposed, namely four exogenous variables including Idealized policy (X1), implementing organizations (X2), target groups (X3), and the environmental (X4), and one endogenous variable namely effectiveness (Y). The calculation of the correlation coefficient using SPSS 25 is obtained as follows:

Table 4: Correlation Matrix Between Research Variables

	X1	X2	X3	X4	Y
X1	1	0.500	0.361	0.450	0.554
X2	0.500	1	0.240	0.456	0.423
X3	0.361	0.240	1	0.407	0.355
X4	0.450	0.456	0.407	1	0.423
Y	0.554	0.423	0.355	0.423	1

Source : Data Processing Results 2024

The calculation of the correlation coefficient between variables of research shows a positive and correlation coefficient of significant nature, meaning that there is a positive and significant relationship between each variable of the research. As seen from the table above, the idealized policy variable has a positive and significant relationship with the variables implementing organizations, target groups, and environmental factors. This means that improvements in implementation of policy related to idealized policy aspects will be followed by improvements in Target groups,Implementing Organizations and environmental factors and vice versa.The Implementing Organizations variable also appears to have a positive and significant relationship with the Target groups variable and the environmental factor variable. The relationship that occurs can be categorized as a medium relationship as per "Guilford's criteria". These results showcase that improvements in policy implementation related to implementing organizations are in line with improvements in Target groups and environmental factors.

b. Estimating Path Parameters

The second stage in path analysis is to estimate or calculate the path coefficients between variables according to the relationship structure in the research model. The calculation of the path coefficient with SPSS is done through regression analysis by taking standardized coefficient regression as the path coefficient. The outcomes of calculating the path coefficient using SPSS are described as follows:

Table 5: Summary of Partial Path Coefficients and Significance Tests

Source: Analysis Result,2024

Effect	Path coefficient	p^2_{xy}	t-count	t-table	Conclusion
Idealized policy → effectivity	0,375	0.381	5.931	1.645	Significant
Implementing organizations → effectivity	0.141	0.095	2.061	1.645	Significant
Target groups → effectivity	0.129	0.058	1.907	1.645	Significant
Environmental factors →effectivity	0.137	0.136	2.028	1.645	Significant
Multiple Correlation Coefficients (R) : 0.925 Coefficient of Determination (R^2) : 0.3185 F_{count} : 31.621F_{table} : 2.41					

The outcomes of the calculation of the path coefficient show that there is a positive influence of policy implementation variables which include, Implementing Organizations, environmental factors, Idealized policy andTarget groups and on stunting prevention. The path coefficient shows the direct impact of each exogenous variable on the endogenous variable. The direct impact of the idealized policy variable on effectiveness was 0.375 one standard deviation, from the implementing organization variable of 0.141 one standard deviation, from the target groups variable of 0.129, and from the environmental factor variable of 0.137 one standard deviation.The square of the pathway coefficient itself explains the variance or diversity of stunting prevention which can be directly explained by implementation variables.

The outcomes of the path coefficient can be represented in the figure below:

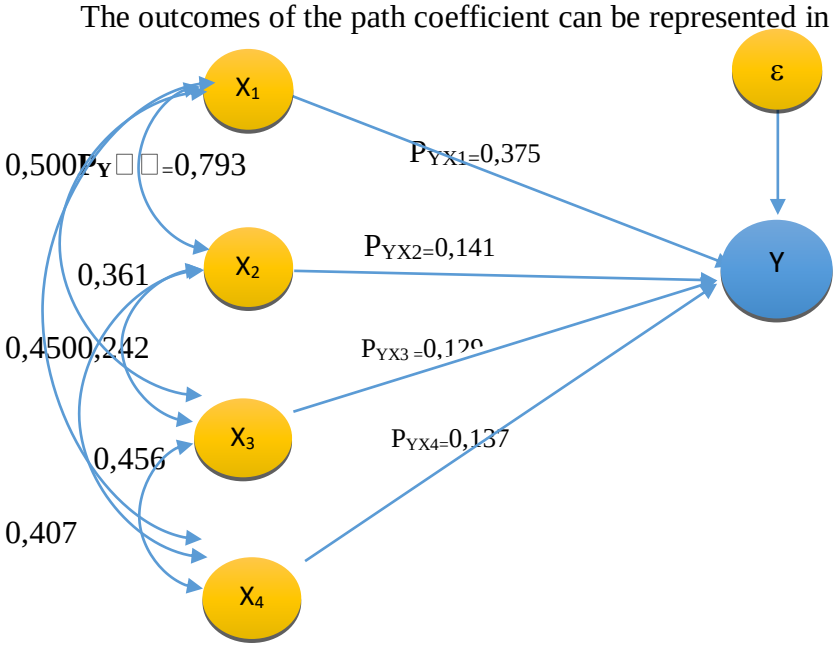

Figure 4. Research Path Diagram with Standardized Coefficient

or written in the model as follows:

$$\hat{y} = 0.375X_1 + 0.141X_2 + 0.129X_3 + 0.137X_4$$

This value is sometimes explained as the magnitude of the direct influence in percentage of the exogenous variable on the endogenous variable. It can be seen that the Idealized policy variable explains 19.70% of the diversity of the effectiveness variable, the Implementing Organizations variable explains 5.61% of the diversity of effectiveness variables, the Target groups variable explains 4.31% of the diversity of effectiveness variables and the environmental factors variable explains 1.81% of the diversity of stunting prevention variables through linear relationships between variables. The proportion of variance of stunting prevention variables that can be understood simultaneously by implementation ofpolicy variables is 0.3149 or 31.49%. So it can be stated that 31.49% of the diversity of stunting prevention variables can be explained by the variable of implementation of policy which includes aspects of Target groups, Idealized policy, Implementing Organizations and environmental factors.

3. Testing the Significance of the Path Coefficient

After assessing the parameters or path coefficients, the next stage tests the significance of the path coefficients either partially or simultaneously. The test is carried out as follows:

- **Simultaneous Formulation**

Simultaneous hypothesis testing is carried out to test whether together the policy implementation variables which include id ε d policy, implementing organization, target groups, and environmental factors ha gnificant effect on prevention.

The model can simultaneously be described as follows:

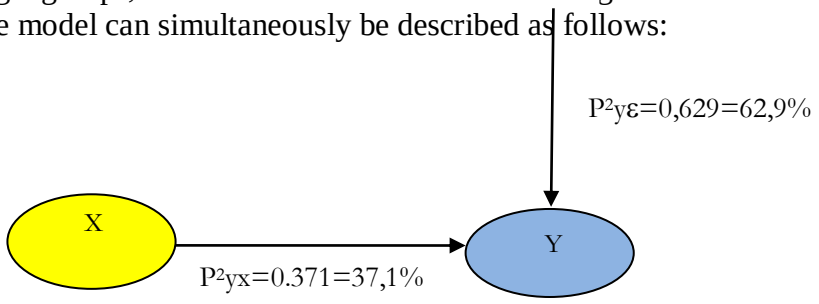

Figure 4 Magnitude of Simultaneous Influence of Variables X to Y

Hypothesis Formulation

H_0 : $P_{YX}=0$ There is no effect of simultaneous policy implementation on stunting prevention

H_1 : $P_{YX}\neq 0$ There is an effect of simultaneous policy implementation on stunting prevention

Statistical analysis

For testing the hypothesisabove, F-test statistics were used with the calculation results obtained a calculated F value of "129.166" with a table F value of "2.476". The calculated F value is greater than the F value of the table so it can be concluded that the null hypothesis is rejected and accepted by hypothesis one, meaning that there is an impact of simultaneousimplementation of policy on stunting prevention. The simultaneous influence of policy implementation on effectiveness is 0.371 or 37.1%.

b. Partial Testing

Partial testing of hypothesis is conducted to test if each aspect of policy implementation which includes aspects of Idealized policy (X1), aspects of implementing organization (X2), target group (X3), and aspects of environmental factors (X4) has a significant effect on the effectiveness of stunting prevention.

1. Idealized policy variables

Hypothesis Formulation

$H_0 : P_{YX1}=0$ There is no effect of idealized policy implementation on stunting prevention

$H_1 : P_{YX1}\neq 0$ There is an effect of idealized policy implementation on stunting prevention

Statistical analysis

The test statistics used to test the above hypothesis are using student t-test statistics. The results of calculating the statistical value of the student t-test using SPSS software obtained a calculated t value of 3.181 larger than the table t value of 1.988 so it can be summarized that the null hypothesis is discarded which means that there is an influence of Idealized policy variables on stunting prevention. The direct influence of the Idealized policy aspect on stunting prevention is 19.7%.

2. Implementing organization variables

Hypothesis Formulation

$H_0 : P_{YX2}=0$ There is no effect of implementing organization variables on stunting prevention

$H_1 : P_{YX2}\neq 0$ There is an effect of implementing organization variables on stunting prevention

Statistical analysis

The test statistics used to test the above hypothesis are using student t-test statistics. The results of calculating the statistical value of the student t-test using SPSS software obtained a value of 2.906 greater than the table t value of 1.988 so it can be summarized that the null hypothesis is discarded which means that there is an influence of implementing organization variables on stunting prevention. The direct influence of implementing organizational aspects on stunting prevention is 5.61%.

3. Target group variable

Hypothesis formulation

$H_0 : P_{YX3}=0$ There is no effect of target group variables on stunting prevention

$H_1 : P_{YX3}\neq 0$ There is an effect of target group variables on stunting prevention

Statistical analysis

The test statistics used to test the above hypothesis are using student t-test statistics. The results of calculating the statistical value of the student t-test using SPSS software

obtained a value of 2.906 larger than the table t value of 1.988 so it can be finalized that the null hypothesis is not accepted which means that there is influencing of the target group variable on stunting prevention by 4.31%.

4. Environmental factors variable

Hypothesis formulation:

$H_0 : P_{YX3}=0$ There is no effect of environmental factors variables on stunting prevention

$H_1 : P_{YX3}\neq 0$ There is an effect of environmental factors variables on stunting prevention

Statistical analysis

The test statistics used to test the above hypothesis are using student t-test statistics. The results of calculating the statistical value of the student t-test using SPSS software obtained a value of 3.181 greater than the table t value of 1.988 so it can be conclusively said that the null hypothesis is rejected, suggesting that there is an effect of environmental factors variables on stunting prevention. The direct influence of environmental factors on stunting prevention is 8.7%.

4. Large Counter of Influence

After hypothesistesting and proving that both simultaneously and partially there is a major influence of policy implementation which includes aspects of implementing organizations, idealized policy,target groups and environmental factors on stunting prevention, a large calculation of influence is carried out both simultaneously and partially and directly or indirectly.

a. Simultaneous effect

The simultaneous influence of policy implementation variables on stunting prevention is the "coefficient of multiple determination", namely R2 = 0.31.49 or 31.49%. This means that 31.4% of changes simultaneously in the effectiveness of stunting prevention are impacted by variables of policy implementation which include aspects of idealized policy, implementing organizations, target groups, and aspects of environmental factors. While the remaining 68.51% was affected by other variables that were not studied in this particular study.

b. Partial effect

Partial influence is the influence of individual exogenous variables on endogenous variables through other exogenous variables.

Table7:The Effect of Implementation of Policy Variables to the Effectiveness of Stunting Prevention

Variable	Direct	Indirect	Total
Idealized policy	0.1406	0.0565	0.1971
implementing organizations	0.0198	0.0363	0.0561
target groups	0.0166	0.0265	0.0431
environmental factors	0.136	0.182	0.317
Policy implementation = 0.371			

Source : Analysis Results 2022

After calculating the magnitude of the influence, the simultaneous influence of the policy implementation variable on stunting prevention is the "coefficient of multiple determination", namely R2 = 0.371 or 37.1%. Furthermore, the influence of the Idealized policy variable on stunting prevention is 19.71%, the influence of implementing organizations is 5.61%, the influence of the target groups variable is 4.31% and the influence of environmental factors is 1.87%. From these results, it is known that the greatest influence of policy implementation on stunting prevention is given by idealized policy variables.This highlights that the rthat is most dominant in improving stunting prevention is idealized policy. This means that r is the most dominant in improving stunting prevention.

E. DISCUSSION

a. Analysis of the Simultaneous Effect of Policy Implementation Variables on the Effectiveness of Stunting Prevention

The outcomes of the study illustrate that there is a significant influence of implementationof policy on the effectiveness of stunting prevention. Calculations using pathway analysis obtained the influence of policy implementation on stunting prevention gave very large results, reaching 0.371 or 37.1%. These results show that one of the many factors that may affect stunting prevention is policy implementation so improvements in policy implementation will certainly have a significant impact on changes in stunting prevention for the better.The significant influence of implementation of policy on the effectiveness of stunting prevention is expected to have a positive effecton the communities served so that the ultimate goal of policy implementation can be achieved. This result is supported by Nugroho's opinion (2008: 432) which argues that "Policy implementation in principle is a way for a policy to achieve its goals", in this case through increasing the effectiveness of stunting handling acceleration programs.

The outcomes associated with the descriptive analysis showed a total score of Idealized policy factors of 19.7%, Implementing Organizations of 5.61%, Target groups of 4.31%, and environmental factors of 1.87%. From the results of this descriptive analysis, it can be analyzed that in general, the implementation of stunting prevention program policies has been running well, however, specifically for idealized policies and implementing organizations, improvements need to be made in aspects of interaction patterns and human resources, the authority of implementing officials and also supporting facilities for policy implementation.

b. Analysis of the Partial Effect of Policy Implementation Variables on the Effectiveness of Stunting Prevention

1. Idealized Policy effect (X_1)

The data analysis resultsdisplayed that idealized policy factors had an effect on stunting prevention by 0.1970 or 19.7%. This idealized policy factor consists of patterns of interaction that are expected to be carried out by parties involved in policy implementation.

The significance of the effect of idealized policy (x1) on y is shown by the calculated t value of 3.181 greater than the table t value of 1.645. This means that empirically idealized policy factors have had a major impacton the effectiveness of stunting prevention. The idealized policy factor plays a crucial role as a reference so that policy implementers have in-depth interaction with both fellow policy implementers and target groups.

On the basis of data analysis results and interview results, it is obtained that the interactions that occur in achieving the policy objectives of stunting prevention programs are carried out with high intensity.

2. Implementing Organizations effect (X_2)

The data analysisresultsdisplayedthat implementing organizations had an effect on stunting prevention by 5.614 or 5.6%. The implementing organizations factor involves indicators of the implementing officers number, the authority of implementing officers, and supporting facilities that are available.

The hypothesis proposed by the amount of policy implementation measured through resource variables (X2) affects stunting prevention (Y). The statistical test results display that the effect of X2 on Y is 5.6% with a calculated t value of 4.393 larger than the table t value of 1.645. This means that empirically resource variables have influenced stunting prevention in West Java Province.

The implementing organizations factor not only covers human resources / officials but also includes the authority of implementing officials and supporting facilities for the implementation of "Stunting Prevention policies". Researchers note that implementing organizations is an important tool to be used in operationalizing a policy. Edwards III (1980:52) states "the insufficiency of these sources means that laws will not be strong, performance will not be given and reasonable regulations will not be developed".

Implementing policies needs to be supported by adequate equipment. Widodo (2010: 93) stated that "without sufficient and adequate equipment will be able to reduce effectiveness and efficiency in implementing policies". According to Agustino (2006: 158) implementing organizations can consist of staff/employees or more specifically street-level-bureaucrat., street-level-bureaucrat information ("how to implement policies and compliance of implementers with regulations"), authorities, and facilities needed in implemention of policies. In addition, the high compliance of employees with the procedures of "Stunting Prevention policy" and the placement of employees in accordance with their abilities or expertise greatly help the success of policy implementation.

The survey results show that implementing organization factors in general are still considered unfavorable. This can be seen from the number of implementing officers who are considered insufficient in terms of quantity. The outcomes of the study on the division of the number of employees between sections vary greatly, if you look at the workload that is each section's responsibility is relatively similar. This condition shows that the division of the number of employees should consider the analysis of the workload in each section based on its main duties and functions.

3. Target Groups effect(X_3)

The data analysis results showed that the target group factor affecting stunting prevention was 0.043 or 4.3%. Target group factors consist of target indicators of people who are most directly affected and must change according to the policy objective i.e. society. The hypothesis proposed by policy implementation is measured through variable target groups (X3) affecting stunting prevention (Y). The statistical test results show that the effect of X3 on Y is 4.3% with a calculated t value of 4.498 greater than the table t value of 1.645. This means that empirically variable target groups have had a significant influence on the effectiveness of stunting prevention.

4. Environmental factor effect (X_4)

The results of the data analysis showed that environmental factors affecting stunting prevention were 0.0187 or 1.87%. Environmental factors consist of indicators of environmental elements that influence and are influenced by the policies implemented. The surrounding environment of the general public and interest groups is included. With regard to environmental factors, Smith explained that this is a corridor that must be passed to force the implementation of a policy. In this context, policy implementation is determined by political, cultural, social, and economic factors. The interaction between the components of policy implementation will produce tension/tension of problems that will provoke a response (transaction) which will ultimately become feedback for the policy-making process.

The hypothesis proposed by the amount of policy implementation measured through variable environmental factors (X4) affects stunting prevention (Y). The outcomes of the statistical test show that the effect of X4 on Y is 1.87% with a calculated t value of 2.082 larger than the table t value of 1.988. This means that empirically variable environmental factors have influenced the effectiveness of stunting prevention in West Java. Environmental factors are factors that have an impact on the incorporation of Stunting Prevention policies in the sense that theincorporation of these policies will not succeed if there are weaknesses in political, cultural, social, and economic conditions.

Effect of Other Variables (□□□to the Effectiveness of Stunting Prevention(Y)

On the basis of researchresults and testing of hypothesis, it can be obtained that simultaneously the influence between variables is in accordance with the hypothesis proposed. Policy implementation measured through idealized policy factors, resources, target groups, and environmental factors affected stunting prevention by 31.49% and 67.51% influenced by other variables not studied in this study.

F. CONCLUSIONS

Based on the results of the study, the researcher can conclude the following:

1. Simultaneous testing shows that policy incorporation has a major effect on the effectiveness of stunting prevention programs. Policy implementation is able to work more effectively through effective idealized policies, quality target groups, integrating agencies responsible for implementation of policy and environmental factors that support policy implementation.
2. Partially, Idealized policy and implementing organizations in policy implementation are factors that have the greatest influence value, meaning that these factors have a strong impact on the effectiveness of stunting prevention while the lowest value is environmental factors.
3. The results also reveal that the effectiveness of stunting prevention is not only impacted by variables of policy implementation.

REFERENCES

Agustino, L. 2016. *Dasar-Dasar Kebijakan Publik (Edisi Revisi)*. Bandung: Alfabeta.

Al Ihsan, Muchsin R, & Darwel. (2019). PengaruhSumber Air Bersih, Jamban, Dan Pola Asuh Terhadap Stunting Pada Balita DenganDiareSebagai Variabel Intervening. Buletin Kesehatan Lingkungan. Vol. 39 (1).

Amrul H, & Haris K. (2019). *Akses ke Sarana Sanitasi Dasar sebagai Faktor Risiko Kejadian Stunting pada Balita Usia 6-59 Bulan*. Jurnal Kesehatan Lingkungan. Politeknik Kesehatan Tanjunga Karang.

Aridiyah FO, Rohmawati N, Ririanty M. 2015.*Faktor-faktor yang MempengaruhiKejadian Stunting pada Anak Balita di Wilayah Pedesaan dan Perkotaan (The Factors Affecting Stunting on Toddlers in Rural and Urban Areas).* e-Jurnal Pustaka Kesehatan. 2015;3(1):163– 70.

Djasri, Haveni.2016. *Pengembangan Mutu Layanana KIA di RS: Antara Daerah TerpencilDengan Daerah denganKompetensi Tinggi*. Journal of Public Policy and Management Review.

Andrianto, P, &Nursikuwagus, A.2017. *SistemInformasiPelayanan Kesehatan Berbasis Web di Puskesmas. Komputer Dan Informatika (SENASKI)*, 2017, 47–52.

Badriyah, L., Syafiq, A. 2017. *The Association Between Sanitation, Hygiene, and Stunting in Children Under Two-Years*. Makara Journal of Health Research, 21(2).

Christasani, PutuDyana & Satibi, 2016. *Kajian Faktor Demografi Terhadap Kepuasan Pasien Jaminan Kesehatan Nasional Pada Fasilitas Kesehatan Tingkat Pertama*.Jurnal Farmasi Sains Dan Komunitas, Mei 2016.

Crookston B, Penny M, Alder SC, Dickerson T, Merrill RM, Stanford J , Porucznik CA, Dearden KA, 2010.Children Who Recover from Early Stunting and Children Who Are Not Stunted Demonstrate Similar Levels of Cognition. American Society for Nutrition. 2010; doi:10.3945/ jn.109.118927.

Desyanti, Chamilia; Nindya TS. Hubungan Riwayat PenyakitDiare dan PraktikHigienedenganKejadian Stunting pada Balita Usia 24-59 Bulan di Wilayah KerjaPuskesmas Simolawang, Surabaya The Relations Between Diarrheal Disease History and Hygiene Practices with Stunting Incidences Among. AmertaNutr. 2017;243–51.

Edward III, G. 1984. Implementing Public Policy. New York: JAI Press.

Herawati, Andi A, & Dina L.S. 2020. Hubungan Sarana Sanitasi, PerilakuPenghuni, dan KebiasaanCuci Tangan Pakai Sabun (CTPS) oleh Ibu denganKejadianPendek (Stunting) pada BatitaUsia 6-24 Bulan di Wilayah KerjaPuskesmas Harapan Baru, Samarinda. Jurnal Kesehatan Lingkungan Indonesia. 19 (1).

Hoffman DJ, Sawaya AL, Verreschi I, Tucker KL, Roberts SB. 2000. Why are nutritionally stunted children at increased risk of obesity? Studies of metabolic rate and fat oxidation in shantytown children from São Paulo, Brazil. Am J Clin Nutrition 72:702–7

Inamah, dkk (2021). HubunganSanitasiLingkungandengan Stunting pada Anak Balita di Daerah Pesisir Pantai PuskesmasTumalehuTahun 2020. Jurnal Kesehatan Terpadu. Vol 12 (2).

Kementerian Kesehatan RI, 2018. "Data dan Informasi profil Kesehatan Indonesia".

Kerlinger, F. N.,& Pedhazur, E. J. (1988). *Foundation of Behavioral Research.* New York : Holt Rinehard and WistonKusharisupeni, 2002.Growth Faltering pada Bayi di KabupatenIndramayu Jawa Barat. Makara Kesehatan, 2002, 6:1-5

Lainua, Maris Yoslina Wati. 2016 Faktor-Faktor yang Mempengaruhi Balita Stunting di KelurahanSidorejo Kidul Salatiga. Program Studi IlmuKeperawatan FIK-UKSW

Macinko, J., Starfield, B., & Shi, L. (2003). The Contribution of Primary Care Systems to Health Outcomes within Organization for Economic Cooperation and

Development (OECD) Countries, 1970–1998. *Health Services Research*, *38*(3), 831-865.

Mujiati & Yuniar, Yuyun.2016. Availability of Human Resources for Health in Health Facilities in the Era of National Health Insurance in Eight Districts-Cities in Indonesia. Media Litbangkes, Vol. 26 No. 4, Desember 2016, 201–210

Neuman, L. W. (2007). *Basic of Social Research Qualitative and Quantitative Approaches 2nd Edition University of Wisconsin*. Whitewater-USA: Pearson Education, Inc.

Ni'mah, Khoirun, dan Sri Rahayu Nadhiroh. 2015. "Faktor yang BerhubungandenganKejadian Stunting pada Balita." Media Gizi Indonesia Vol. 10 No. 1.

PeraturanPresidenNomor 18 Tahun 2020 TentangRencana Pembangunan Jangka Menengah Nasional Tahun 2020-2024. Lampiran II ProyekPrioritasStrategis (Major Project) Rencana Pembangunan Jangka Menengah Nasional Tahun 2020-2022

Picauly I, Magdalena S, 2013.Analisis Determinan Dan Pengaruh Stunting TerhadapPrestasiBelajar Anak Sekolah di Kupang dan Sumba Timur, NTT. Jurnal Gizi dan Pangan,8(1): 55—62

Quade, E.S. 1977. *Analysis For Public Decisions*. New York: Elseiver.

Ramdhani, D. 2022, Prevalensi Balita Stunting di Jabar 20,2 Persen, SumedangTertinggi, Kota Bekasi Terendah. Kompas.

Singarimbun, M., & Efendi, S. (2008). *Metode Penelitian Survei (cetakan kesembilanbelas)*. Jakarta: LP3ES.

Siti Aisah, dkk. (2019). Personal Hygiene Dan Sanitasi LingkunganBerhubunganDenganKejadian Stunting Di Desa WukirsariKecamatanCangkringan. Universitas Respati Yogyakarta

Smith, B. C. (1997). The Decentralization of Health Care in Developing Countries: Organizational Options. Public Administration and Development: The International Journal of Management Research and Practice, 17(4), 399-412.

Suprianto Arip. Dyah Mutiarin. 2017. EvaluasiPelaksanaanJaminan Kesehatan Nasional*(Studi TentangHubungan Stakeholder, Model Pembiayaan dan Outcome JKN di Kabupaten Bantul Provinsi Daerah Istimewa Yogyakarta)*. Journal Of Public Journal of Governance And Public Policy. UMY Jogyakarta

Tachjan. 2006. ImplementasiKebijakan Publik. Bandung; Penerbit AIPI Bandung.

Torlesse, H., Cronin, A. A., Sebayang, S. K., & Nandy, R. (2016). *Determinants Of Stunting In Indonesian Children: Evidence From A Cross-Sectional Survey Indicate A Prominent Role For The Water, Sanitation And Hygiene Sector In Stunting Reduction*. BMC Public Health, 16(1), 1–12.

Uliyanti, Tamtomo, D. G. &Anantanyu, S. 2017. Faktor yang Berhubungan dengan Kejadian Stunting Pada Balita Usia 24-59 Bulan. J. Vokasi Kesehatan. 3, 67–77

Ulumiyah Nurul Hidayatul.2018.Meningkatkan Mutu Pelayanan Kesehatan DenganPenerapan Upaya KeselamatanPasien Di PuskesmasJurnalAdministrasi Kesehatan Indonesia Volume 6 No 2 July-December 2018. Published by Universitas Airlangga

UNICEF/WHO/World Bank Group – Joint Child Malnutrition Estimates 2020 edition. Diunduh dari: https://stunting.go.id/level-and-trend-in-child-malnutrition-2020/

Walt, G., & Gilson, L. (1994). Reforming the Health Sector in Developing Countries: The Central Role of Policy Analysis. *Health Policy And Planning*, *9*(4), 353-370.

Widodo. (2008). *Kebijakan Publik, Formulasi, Implementasi dan Evaluasi*. Jakarta: PT Elek Media Komputindo.

Winarno, Budi (2012**).** KebijakanPublik : Teori, Proses, Dan Studi Kasus.Yogyakarta : CAPS, 2014.