



Evaluation of Rapid Reaction Unit Policies for Handling Extreme Poverty, Inflation and Stunting in Harmony in Efforts to Reduce Stunting Rates in North Konawe Regency

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ARTICLE INFO

Manuscript Received: 03 Dec, 2024

Revised: 18 Mar, 2025

Accepted: 10 Apr, 2025

Date of publication: 05 Dec, 2025

Volume: 6

Issue: 1

DOI: [10.56338/jphp.v6i1.6528](https://doi.org/10.56338/jphp.v6i1.6528)

KEYWORDS

Stunting;
Evaluation;
Quick Reaction;
Toddlers

ABSTRACT

Introduction: Stunting is a chronic nutritional problem in children. The prevalence of stunting in the North Konawe District Health Service area in 2022 will be 21.6% and in 2023 it will be 25.6%. One of the public policy steps taken by the North Konawe Regency Government is the implementation of the URC KISS program, but it has never been evaluated effectively. The aim of the research is to evaluate the rapid response unit's policies for handling extreme poverty, inflation and stunting in harmony with efforts to reduce stunting rates.

Methods: The type of research is qualitative research, case study design. The subjects in this research were 12 people consisting of 2 key informants and 10 ordinary informants. Sampling technique using the Snowball Sampling. Data analysis, by analyse the data reduction stages, data display and drawing conclusions.

Results: The results of the research on the evaluation of financing input were funded directly from the regional government, available human resources and according to their competence, available infrastructure in the form of cars, motorbikes and anthropometric measuring equipment. And accompanied by guidelines for efforts to reduce stunting rates in North Konawe Regency. Then the planning process implemented is to collect family card data, organization is structured and implementation is by providing additional food and groceries. Then monitoring the toddler's height every week is carried out. Output is in the form of providing additional food and foods such as oil, eggs. The outcome is that the prevalence of stunting will decrease, namely in 2023 it will be 6% and in 2024 it will be 5.4%.

Conclusion: Input evaluation available as needed. The process was carried out well. The output was implemented by providing local supplementary food and the outcome was that the prevalence of stunting reached 5.4%.

Publisher: Pusat Pengembangan Teknologi Informasi dan Jurnal Universitas Muhammadiyah Palu

INTRODUCTION

Stunting is a chronic nutritional problem in children which is now a top priority for nutrition problems in Indonesia because it can determine the quality of human resources (1;2). The prevalence of stunting in the world in 2020 was 22% of children under five, then in 2021 it was 22.1% and in 2022 it was 22.3% (3).

Meanwhile, in Indonesia, based on the results of the 2019 Nutritional Status Study of Toddlers in Indonesia, the prevalence of stunting was 27.7%, then based on the results of the Indonesian Nutrition Status Survey in 2021 at 24.4%, in 2022 at 21.6% and in 2023 at 21.5% (4). Meanwhile, the prevalence of stunting in Southeast Sulawesi Province in 2019 was 31%, then in 2021 it was 30.2%, in 2022 it was 27.7%, and in 2023 it was 30.0%. The prevalence of stunting in the North Konawe Regency Health Office in 2021 was ranked 6th, namely 29.5% and in 2022 it ranked 16th at 21.6% and in 2023 it increased to 25.6%. This explains that stunting cases in North Konawe Regency have increased and have not reached the stunting reduction target of reaching 14% (5).

In order to accelerate stunting reduction, the Indonesian government through Presidential Regulation Number 72 of 2021 stipulates a Presidential Regulation that implements a holistic and integrative concept of stunting handling by involving multiple sectors from the central to village levels so that it can target vulnerable groups such as adolescents, brides-to-be, pregnant women, breastfeeding mothers, and children aged 0-59 months (6). Stunting prevention requires convergent nutrition interventions, including specific nutrition interventions and sensitive nutrition. Specific nutritional interventions are carried out to address direct causative factors, while sensitive nutritional interventions are for indirect causes. Global experience shows that the implementation of convergent interventions to target priority groups in priority locations is the key to the success of nutrition improvement, child growth and development, and stunting prevention. To ensure the convergence of these interventions, a commitment from the highest national leadership is needed (7).

The role of multi-sector or multi-actor is very important for the success of achieving public health status through nutritional interventions and elimination of infectious diseases. This is not only the responsibility of the Ministry of Health, but it is necessary to involve all parties both at the central and regional levels, social institutions, academics, professional organizations, mass media, the business world and development partners through the issuance of laws and regulations and multisectoral meetings (8). Multi-sector coordination is the core of the government's role. Health services, education services, social services, and healthcare and social security agency need to coordinate well to provide integrated services, support information exchange, and realize effective collaboration in handling stunting. The government is also responsible for increasing public awareness. Through educational campaigns, seminars, training, and effective communication approaches, these efforts invite the public to understand the importance of balanced nutrition, good diet, and effective health care in preventing stunting (9).

One of the studies that examined a comparison of stunting policies in the Philippines stated that rising inflation in the Philippines certainly affects the increase in the price of basic materials, including food costs in the Philippines. The high cost of food in the Philippines is not reached by some people there. Although there are several cheap food options, often these foods do not contain the nutrients needed. Where the most affected are those who are the poorest among the community, who also experience the highest levels of malnutrition (10).

One of the public policy steps taken by the North Konawe Regency Government in an effort to suppress stunting cases is to issue a stunting control policy through North Konawe Regent Regulation Number 8 of 2023 concerning the Establishment of a Rapid Reaction Unit for Handling Extreme Poverty, Controlling Inflation, and Preventing Stunting in a Harmonious Manner (URC KISS) to support stunting reduction efforts launched by the Indonesian government. Thus, policy support instruments in accelerating stunting reduction already exist, and require organized implementation efforts that can be applied at every level by every element involved. With the issuance of this Regent Regulation, more concrete efforts are needed, focusing on reducing stunting and integrating activities across programs (specific efforts) and cross-sectoral (sensitive efforts) by all *stakeholders* (11). Previous research found that the evaluation of the stunting handling program policy at the Bandar Lampung City Health Office has not been effective with indicators of not achieving a reduction in stunting prevalence in the Medium-Term Plan (12).

Based on secondary data and the results of phenomena in the field, it can be seen that stunting cases in the North Konawe Regency area are still high, and currently the government has determined stunting control through the URC KISS program, but the problem that occurs is that the evaluation of the stunting prevention program in the Konawe Regency area is not optimal because the existing cases are not decreasing but increasing. Another thing can

also be seen from the problem indicators in the form of stunting prevention socialization policies that have not reached the target target seen from the number of counselling frequencies carried out by related agencies and also the limited resources of policy implementers so that in responding to problems it is not fast. In addition, the evaluation program on the success of the URC KISS program has also not been implemented effectively.

Based on this presentation, it can be seen that the Government in a structured manner, starting from the central and regional governments, has made various efforts to intervene against stunting through policy evaluation, but evaluation is needed to assess the success of the program. By evaluating the success and challenges of policies in efforts to reduce stunting, the government can improve and develop existing public health interventions, stunting determination, and effective policy strategies.

METHOD

Research Type

This type of research is qualitative research with a case study design research approach, which is an observation carried out on a certain group that is experiencing a case or situation in depth.

Population and Sample/Informants

The subject of this study is commonly known as a research informant consisting of key informants and ordinary informants. The total number of informants is 12 people consisting of 2 key informants and 10 ordinary informants. The technique of taking informants uses the Snowball Sampling technique, which is a technique for determining samples that are initially small, then this sample selects its friends to be used as samples, so that the number of samples becomes large. The selection of informants is carried out by following the principles of sufficiency and suitability. The principle of sufficiency can be interpreted as data obtained from informants are expected to be able to describe phenomena related to the research topic, while the principle of suitability means that informants are selected based on their relevance to the research topic. Samples can be increased until the data experiences saturation (13).

Research Location

This research has been conducted in April-June 2024 in the Working Area of North Konawe Regency, Southeast Sulawesi Province.

Instrumentation or Tools

The qualitative data were obtained through semi-structured interviews recorded and transcribed verbatim.

Data Collection Procedures

Data collection through in-depth interviews that are adjusted to the interview guidelines that have been made. Furthermore, observations were made on the interview activities carried out whether it was still necessary to add informants or it was enough. The observation technique used in this study is the direct observation technique (participant observation). The data validity test was conducted through triangulation techniques. The triangulation used in this study was source triangulation and time triangulation.

Data Analysis

Data analysis in this study was conducted manually based on verbatim transcripts and interview matrices through comparisons both objectively and subjectively from various sources. The data analysis used in this study is domain analysis, by reading the data script in its entirety and then obtaining the domains contained in the data. Data analysis, by analyse the data reduction stages, data display and drawing conclusions.

Ethical Approval

This study was approved by the Health Research Ethics Committee of Mandala Waluya University (Approval Number: No.021/KEP/UMW/VII/2024). All informants provided informed consent prior to participating in the study. The confidentiality of all participants was strictly maintained throughout the research process.

RESULTS

Table 1 shows that the evaluation of stunting control programs is an important process to ensure that the interventions carried out are effective and have a positive impact on children's health. Evaluation of the implementation of URC KISS consists of evaluation of inputs, processes, outputs and outcomes.

The evaluation of the Input aspect consists of 4 categories, namely financing, human resources, infrastructure and guidelines in the implementation of URC KISS. The financing system of the URC KISS program is funded by the local government of North Konawe Regency, with the financing system through the District Health Office, which then the assistance funds are handed over to the Health Center, precisely to the Nutrition Programmer or nutrition officer of the Health Center to manage the financing of the URC KISS program. The availability of health workers who carry out the URC KISS program is in accordance with their expertise. The availability of infrastructure facilities in support of the URC KISS program, including motorbikes, ambulances, and also anthropometric measuring instruments. The availability of guidelines in the implementation of the URC KISS program is based on the regulation of the Regent of North Konawe Regency, number 8 of 2023. The guidelines are distributed to URC KISS recipients.

Evaluation of the process aspect consists of 4 categories, namely planning, organizing, implementing and monitoring. The URC KISS planning stage is the authority of the North Konawe Regency Health Office, so that the health centre staff and mothers of toddlers who receive assistance do not understand the planning of the URC-KISS program. The URC KISS planning system is in the form of a stunting control and prevention process. Before being given assistance, data collection was first carried out and Family Cards were collected. The organization of URC KISS is arranged according to needs and has been determined, structured according to their respective fields. The implementation of URC KISS went well, where a program was carried out to provide supplementary food to stunted toddlers and also pregnant women of SEZs. The activity was carried out by nutrition workers at the Health Centre, the assistance program provided was supplementary food and also food that was delivered directly to the recipient's home. Monitoring the URC KISS program, technically adjusted to the interview results, this monitoring is carried out every week by the Health Centre staff and every 6 months for the North Konawe Regency Health Office.

The output in this study includes the types of URC KISS programs implemented, namely in the form of mooring food (supplementary food), raw food/basic necessities, food. The outcome of the URC KISS program is an achievement of the prevalence of URC KISS that has been achieved in North Konawe Regency, namely in 2023 by 6% and in 2024 until May reaching 5.4%. This means a decrease of up to 0.6%.

Table 1. Excerpts of Statements, Subthemes, and Themes from In-depth Interview

Themes	Subthemes	Statements
Input	Financing	<p>"Usually, the funds have entered each programmer's account after the funds continue to come in, then the programmer distributes it through in the form of supplementary feeding to the community" (Ordinary Informant - Nutrition Personnel of the Lamparinga Health Center)</p> <p>"The one who funded it for URC-KISS was from the local government" (Ordinary Informant - Nutrition Worker of the Oheo Health Center)</p> <p>"Yes, the financing is from DAK funds given to the health office to be managed in the form of additional food by health center nutrition workers" (Key Informant - Head of the North Konawe Regency Health Office)</p>
	Human Resources	<p>"Yes, if the eee has been appointed, all have their own portions" (Ordinary Informant - Head of the North Konawe Regency Health Division)</p> <p>"If there are already several nutrition workers available in each health center" (Ordinary Informant - Head of Nutrition Section)</p> <p>"For human resources, thank God it is very sufficient because this activity is "fully supported by the Health Office" (Key Informant - Secretary of URC KISS)</p>
	Infrastructure	<p>"Yes, it is available, we have a car here, there is an ambulance with an operational car, Oh yes, in addition to the ambulance, the operational car has an anthropometric measurement device" (Ordinary Informant - Nutrition Personnel of the Oheo Health Center)</p> <p>"Eee for the facilities and infrastructure, ma'am. Such as official car ambulances and operational cars, there are also tools provided at the health center, scales and anthropometric equipment" (Ordinary Informant - Head of Nutrition Section)</p>

Themes	Subthemes	Statements
Process	Guidelines	"Very available, First of all, the URC-KISS post behind the wheel there are operational vehicles and there is medical equipment needed for stunting" (Key Informant - Head of the North Konawe Regency Health Office)
		"Well, the guideline is from the regent's regulation made about URC-KISS itself" (Ordinary Informant - Nutrition Personnel of the Lamparinga Health Center)
		"For the guidelines, it is clear that we have provided the guidelines. Because to be a guideline in the implementation of activities, for the guideline, it is the regulation of the regent of North Konawe number 8 of 2023" (Key Informant - Secretary of URC KISS)
	Planning	"Eh, if it's planning, if this planning system is related, I don't know if this one is related to this planning" (Ordinary Informant - Nutrition Worker of Paka Health Center)
		"For the planning system, URC KISS has 3 main points, the first is extreme poverty, then inflation control and stunting prevention and reduction" (Key Informant - Secretary of URC KISS)
		"This ee is given a budget to the health center and then distributed to people who have stunted toddlers, usually mothers and pregnant women in chronic energy deficiency in the form of supplementary feeding " (Key Informant - Head of the North Konawe Regency Health Office)
	Organizing	"Umm, if the organization is good, if you are at the Health Center, all the officers already have their own officers, well, so maybe the health office has determined who runs the program" (Ordinary Informant - Head of the Health Division of North Konawe Regency)
		"The URC-KISS program was created to overcome extreme poverty, inflation and stunting and is arranged according to the field" (Key Informant - Head of the North Konawe Regency Health Office)
	Implementation	"Ah is going well, ma'am, so far we the community have also established a relationship with the officers very well" (Regular Informant - Nutrition Worker of the Lamparinga Health Center)
		"The implementation is carried out by each work of the Health Center" (Ordinary Informant - Head of the Nutrition Section)
		"Usually, this activity is carried out by the health center, namely the nutrition officer for the stunting" (Key Informant - Head of the North Konawe Regency Health Office)
Outcome	Monitoring	"Yes, if monitoring has been determined, if the regulation is stipulated, it is at least 2 times a year, but if we are at the health office, the monitoring is every week, what is the weight measurement" (Ordinary Informant - Head of the Health Division of North Konawe Regency)
		"So, we evaluate the monitoring system, we do the evaluation 2 times in 1 year" (Key Informant - Secretary of URC KISS)
	Output	"Eee, the provision of supplementary food for the community is a stunting category" (Regular Informant- Nutrition Worker of the Oheo Health Center)
		"We just distributed supplementary feeding, for 90 days" (Ordinary Informant - Head of Public Health Division of North Konawe Regency)
		'For the prevention and reduction of stunting, the government collaborates with the health office to provide supplementary feeding for 90 days or within a period of 3 months' (Key Informant - Secretary of URC KISS)
	Outcome	"The achievements so far are getting better For 2024 ee is around 5.4%, yes last year it was around 6% even. There is a decrease" (Ordinary Informant - Head of Nutrition Section)
		"Oh yes, if for the achievement, thank God, the impact has been felt by the community. Oh yes, based on the data that has come in, for 2023 ee is 6% and for 2024 this month it is 5.4% in this month alone it is around 5.4%" (Key Informant - Secretary of URC KISS)

DISCUSSION

Input (Financing, Human Resources, Infrastructure, Guidelines)

The results of this study show that the financing system of the URC KISS program is funded by the local government of North Konawe Regency, with the financing system through the District Health Office which then the assistance funds are handed over to the Health Center, precisely to the Nutrition Programmer or Nutrition Officer of the Health Center to manage the financing of the URC KISS program. The source of URC KISS financing is from

the local government of North Konawe Regency, in the realization of financing, no obstacles were found, this is according to the informant's statement that there are no obstacles in terms of financing.

This research is in line with Mayasari's research that the input element of the First 1,000 Days of Life Movement Program can be described, among others, in the aspect of funding (*money*) has been sufficient and its use is appropriate (14). This research is reinforced by Karyoto's theory that *money* or funds are the most important means after humans, where in every activity money is needed. Funds can be obtained from non-governmental organizations and those subsidized by the government funds from a program are usually obtained from the state budget, regional budget, and non-governmental organizations (15). Other research about evidence-based interventions or improvement of maternal and child nutrition, shows that it is possible to alleviate 80% of stunting by investing in nutrition-sensitive areas including agriculture, health and social protection, water, sanitation, and hygiene, as well as gender justice (16).

The results of this study show that in the implementation of the URC KISS program, health workers have been available according to their expertise. The average health worker who implements the program is nutrition workers in the public health center which amounts to 2 to 3 people in each public health center. In addition, the results of the study also found that all informants stated that there were no obstacles in the availability of human resources in the services of the URC KISS program. This research is in line with Natsir's research that the results of public policy evaluations on stunting enforcement and the high prevalence of stunting in many regions are due to the lack of competent human resources (HR) at the regional level (17). The theory put forward by Alamsyah emphasizes that officers who often attend training will be different from officers who rarely attend training, this difference can be seen from the shrewdness of officers in carrying out their duties and in studying a problem (18). Moving the nutrition agenda forward required having a committed technical expert to focus on nutrition, and there is a genuine demand for human resources (19). By utilizing competent and trained human resources, and ensuring ongoing training and capacity development, efforts to reduce stunting rates can be carried out more effectively and sustainably.

Facilities are facilities that are used directly. Meanwhile, infrastructure is a tool/facility that supports facilities. Infrastructure suggestions are needed in the implementation of a program, including vaccines, syringes, KMS, scales, medicines and so on (20). The results of the research on facilities and infrastructure show that there are infrastructure facilities available in supporting the URC KISS program, including motorbikes, ambulance cars, and also anthropometric measuring instruments and there are also no obstacles in the availability and use of the URC KISS program facilities and infrastructure.

Phitra's research that available properly. Facilities and infrastructure (machines) are adequate in the stunting locus village, Merangin Regency, including Availability of supporting supplements for stunting programs such as TTD, Vitamin A and zinc, Availability of anthropometry, Availability of PMT for pregnant women and toddlers, and Availability of Promotional Media (21). This research is emphasized by Alamsyah's theory that materials are a means used to support the smooth running of a program. Complete package materials can facilitate the running of a program, and vice versa, if the required package materials are inadequate, it can hinder the implementation of a program (18).

The results of this study show that the available guidelines in the implementation of the URC KISS program are based on the regulation of the Regent of North Konawe Regency, number 8 of 2023. The guidelines are distributed to URC KISS recipients which are given directly at the recipients' homes and are often read by mothers who receive assistance. These guidelines provide comprehensive information on the nutrition needed to prevent stunting, which can then be conveyed to pregnant women, breastfeeding mothers, and families.

Research by Prabawaningrum et al., that related to the implementation of zinc supplementation as a specific nutritional intervention in preventing stunting itself, there is already an SOP regarding the handling of malnutrition, but related to the implementation of zinc provision in the Halmahera health center, there is no specific SOP related to zinc provision (22). According to research conducted by Muthia et al., there is a need for supervision from the leadership of the Health Center in the use of guidelines and SOPs for all activities carried out at the Health Center and activities from specific nutritional interventions so that the guidelines and SOPs are not only for administrative purposes (23). Implementing multi-sectoral policies is one of Brazil's primary success factors in reducing stunting, but this should not be done in a vacuum; rather, it should be helped by programs that are funded in a way that promotes cross-sectoral cooperation amongst different parties at the local level, such as the school lunch program (24).

Process (Planning, Organizing, Implementing, Monitoring)

This study shows that the URC KISS planning stage is the authority of the North Konawe Regency Health Office, so that the health center staff and mothers of toddlers who receive assistance do not understand the planning of the URC-KISS program. The results of the statement of the key informant can be seen that the planning system URC KISS has 3 main points, the first is extreme poverty, then inflation control and stunting prevention and reduction, then the recipients of URC KISS assistance, stated that before being given assistance they are first recorded by health workers and collect their family cards, this is one of the components of the planning system in the implementation of URC KISS.

This research is in line with Arumsari's research that the planning of the stunting prevention program is carried out by the person in charge of nutrition in each health center. In the program planning process, the government carries out: 1) Analysis of the stunting reduction program situation, 2) preparation of activity plans, and 3) stunting discussions. The results of these three activities are integrated into annual planning and budgeting (25). This research is strengthened by the theory put forward by Herlambang, that the planning function is the most basic initial stage in every activity. Planning is the process of determining the goals, strategies, and policies needed to achieve the goals (26). The planning of the stunting program in the Semarang city health center work area involves nutrition workers as the person in charge of the public health unit sub-nutrition as the program planner and the head of the health center as the director of the stunting control program. The planning of the stunting program at the health center is the activity of monitoring toddlers, providing supplementary food, health counselling, nutrition counselling at the health center and providing vitamins and minerals (27).

The organization of URC KISS is arranged according to needs and has been determined, structured according to their respective fields. The organization has certainly been well planned where nutrition officers deliver assistance directly to URC KISS recipients. The study also found that there were no obstacles found in organizing the URC KISS Program. Kusuma's research found that the organization in the form of division of work and job descriptions and coordination went well. The organization in the implementation of the 1000 First Days of Life movement program at the Rias Health Center has carried out the division of work according to their respective duties or sections (28). Other studies claims that at the district level, there is already a stunting control working group and it involves related integrated service units, for example, the food service, population control and family planning, fisheries, regional development planning agency, hospitals and other services so that specific nutrition interventions are supported by sensitive nutrition interventions (23).

Muninjaya's theory emphasizes this research that organizing is a series of management activities to divide tasks, authority and unite resources owned by the organization to be used efficiently in achieving goals by managing all the resources owned. In its implementation, organizing cannot be separated from the planning of a program. If the organization is done well, then planning can also run well. In organizing there are several elements (20).

The results of this study found that the implementation of URC KISS went well, where the supplementary food program was implemented for stunted toddlers and also pregnant women with SEZs. The activity was carried out by nutrition workers at the Health Center, the assistance program provided was supplementary food and also food that was delivered directly to the recipient's home. The implementation of the URC KISS program has been carried out well and no obstacles have been found in its implementation. This research is in line with the research of Susanti et al., that regarding the process of implementing stunting program policies based on the context of evaluation, it can be said that there are no obstacles in the establishment of nutrition posts in each village, the provision of additional food in the form of eggs, nut milk, and the provision of biscuits for toddlers and pregnant women (29).

The results of the research on monitoring activities show that URC KISS activities are monitored or monitored in the form of measuring anthropometry and also reporting the results of activities to the District Health Office. Measurements from the Health Center are carried out every week, while evaluations from the Health Office are carried out 2 times a year. This study also found no obstacles in the implementation of monitoring URC KISS activities. Yulyanti's research found that supervision is held during meetings held every quarter and once a year. Supervision is carried out in 3 stages, namely before implementation, during implementation and after implementation (30). Meanwhile, coordination in stunting prevention in Rembang Regency has been carried out with policy implementation practices, namely related to monitoring and evaluation. The implementation of this monitoring and evaluation coordination involves related agencies and members of the district stunting reduction acceleration team (31).

This research is strengthened in Hasibuan's theory that the function of control in management according to G. R. Terry stated, control is defined as a process of determination, what must be achieved, namely performance standards and goals, and what is being done, namely implementation, by assessing the implementation and if necessary making improvements, so that the implementation can be in accordance with the same plan as the standard (32). Likewise, according to Darmawan, the implementation of evaluation in a program is very important to know the course of the program and the success of the program implemented (33). The URC KISS policy has had a very significant impact in efforts to reduce stunting rates in Indonesia. Through a fast, coordinated approach based on family and community empowerment, this policy can improve the quality of life of Indonesian children. However, its success is highly dependent on budget sustainability, support from all parties, and ongoing evaluation to improve and optimize the policy.

Output

Outputs in stunting control programs refer to the direct results of activities and interventions carried out to prevent and reduce stunting rates. These outputs usually include results that can be measured and reported directly, which serve as indicators of program success. Data on the number of children whose growth is checked routinely, data on anthropometric measurements and the number of target recipients of assistance. Output is a health service that will be used by the community. The output of the URC KISS program is the distribution of supplementary food and also food and food raw materials to toddlers who are stunted. This research is in line with others research which found that the output element is an indicator of the achievement of the First 1,000 Days of Life Movement program. There are 4 indicators that have been achieved, namely the Additional Food Indicator for Chronic Energy Deficiency, Health Promotion on Exclusive Breastfeeding (for individuals and groups), IEC Provision of MP-ASI and also Provision of Vitamin A (34). Likewise, the Thai government under the Social Welfare Assistance Program provides social assistance to poor families, which includes food subsidies to ensure they have access to nutritious food (35).

Outcome

The achievement of stunting prevalence can be seen that there has been a decrease in stunting prevalence in North Konawe Regency, namely in 2023 by 6% and in 2024 until May reaching 5.4%. This means a decrease of up to 0.6%. This research is in line with Hasibuan's research which found that the effectiveness of the implementation of the First 1000 Days of Life Movement program in Deli Serdang Regency has been achieved or has been running effectively in accelerating stunting prevention and is proven by a significant decrease in the prevalence of stunting in Deli Serdang Regency, namely in 2019 the prevalence of stunting was 30.97% and in 2023 it became 13.9% (36). Fitriani's research also proves that the 1000 First Days of Life program at the Simomulyo Health Center shows significant results in reducing stunting rates and improving the health of pregnant women (37).

This research is emphasized in the theory of Child Growth and Development Theory. This model focuses on the importance of adequate nutrition during critical periods of a child's growth and development, especially in the first 1000 days of life (from conception to the age of two). Interventions that support children's growth through nutrition, immunization, and general health can improve growth status and reduce stunting (13). One of the most significant elements of Brazil's strategy is the Bolsa Família program, a cash transfer initiative aimed at reducing poverty and food insecurity. Families with children under five who participate in the program are required to engage in health and nutrition education, including growth monitoring and vaccination programs. The program also provides nutritional supplementation for pregnant women and children under two, helping to address the key risk factors for stunting. According to Brazilian government reports, Bolsa Família helped reduce poverty by approximately 27%. It has been particularly effective in rural and semi-rural areas, where the rates of poverty are higher. The program has also contributed to a decrease in extreme poverty (those living on less than \$1.90/day), benefiting millions of families (38).

The results of a study conducted in India, stated that various factors explain that 66% of the change in stunting between 2006 and 2016 in the form of ladders for improving home assets, as well as community mobilization contributes to health, poverty, and sanitation improvement programs (39). Achieving the stunting target is done but requires a coordinated investment measure in the key intervention package for stunting and supportive environmental

advocates. In addition to external factors, internal factors also need to be considered to reduce stunting rates and achieve global targets (40).

The policy outcomes show significant changes in children's health and nutrition conditions and the impact of the program on the community at large. A decrease in the percentage of children experiencing stunting in the target areas, as measured by anthropometric data such as height for age (H/A). Reducing the prevalence of stunting requires a comprehensive and coordinated approach, covering various aspects of health, nutrition, and community well-being. With a coordinated and evidence-based approach, these efforts can effectively reduce the prevalence of stunting and improve the health and well-being of children and families.

CONCLUSION

Based on the results of the study, it can be concluded that inputs in the form of financing are funded directly from the local government, human resources are available according to their competence, infrastructure facilities in the form of cars, motorcycles and anthropometric measuring devices. It is also supported by the URC KISS implementation guidelines. The process in the form of planning, organizing, implementing and monitoring processes is carried out well. The output produced is the implementation of the provision of local additional meanings and the provision of pagan materials to families of stunted toddlers. The outcome is that the prevalence of stunting decreased to 5.4%. The study's recommendations, particularly for the North Konawe Government, include; (1) strengthening the data-based monitoring system that enables quick identification of rising poverty and food scarcity and its effects on children's nutritional status; (2) increasing the efficacy of non-cash food assistance by guaranteeing the nutritional value and quality of food, particularly for vulnerable families affected by malnutrition; (3) promoting local food production to lessen reliance on imports and the impact of inflation on food prices; (4) coordinating with international organizations like UNICEF, WHO, and FAO to secure technical and financial support for stunting control programs; and (4) conducting regular program evaluations to ascertain the effectiveness of interventions implemented in overcoming extreme poverty, inflation, and stunting.

AUTHOR'S CONTRIBUTION STATEMENT

Sartini Risky developed the conceptualization, methodology and implementation of the research, collecting data, analyzing and interpreting data, revising draft article, and final approval of the version to be published. Ari Nofitasari contributed to the administration, implementation of research, data analysis and interpretation. Asbath contributed to the conceptualization, data curation, methodology, and implementation of the research. Israeli implementation of the research, analyzing and interpreting data, editing and revising draft article.

CONFLICTS OF INTEREST

This research has no conflict of interest.

DECLARATION OF GENERATIVE AI AND AI-ASSISTED TECHNOLOGIES IN THE WRITING PROCESS

I declare that generative AI and AI-assisted technologies were used only to support language refinement and improve clarity in the writing process. All ideas, analyses, and conclusions in this thesis are entirely my own, and no AI tools were used to generate research data or substantive academic content.

SOURCE OF FUNDING STATEMENTS

This research is not funded by any party.

ACKNOWLEDGMENTS

The researcher would like to thank all parties who have assisted in the research process. This gratitude is especially directed to all informants who have described phenomena related to URC KISS.

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