



Evaluating the Implementation of the Stunting Prevention Program at the Regional Technical Unit of Binjai Estate Health Center in Binjai City

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<p>Track Record Article</p> <p>Revised: 23 May 2025 Accepted: 19 June 2025 Published: 30 June 2025</p> <p>How to cite : Manalu, P., Ginting, M. F. B., & Girsang, E. (2025). Evaluating the Implementation of the Stunting Prevention Program at the Regional Technical Unit of Binjai Estate Health Center in Binjai City. <i>Contagion : Scientific Periodical of Public Health and Coastal Health</i>, 7(1), 243–258.</p>	<p style="text-align: center;">Abstract</p> <p><i>Stunting remains a critical public health issue affecting the quality of human resources, particularly in Indonesia, where its prevalence remains high across various regions. According to the 2021 Indonesia Nutritional Status Survey (SSGI), the national stunting prevalence was 24.4%, with North Sumatra reporting 30.11% and Binjai City 21.7%, all of which exceed the WHO target of below 20%. These statistics underscore the urgent need for effective prevention strategies, particularly through nutritional interventions at the primary healthcare level. This study aims to evaluate the implementation of the stunting prevention program at the Regional Technical Implementation Unit of the Binjai Estate Community Health Center in Binjai City. The program components include nutrition education, regular monitoring of pregnant women and toddlers, and the provision of supplementary feeding. A qualitative descriptive approach was employed, utilizing in-depth interviews with healthcare personnel and field observations conducted in 2023. Findings indicate that although the program is generally well-implemented, several challenges persist. These include low community participation in outreach activities and persistent cultural myths that impede proper understanding of stunting. Nonetheless, there has been a noticeable increase in awareness regarding balanced nutrition among pregnant women and caregivers of toddlers. Monitoring is routinely conducted via the SIMPUS and SIP systems; however, long-term impact evaluation remains insufficient. In conclusion, while the stunting prevention program demonstrates promising outcomes, further improvements are necessary in enhancing community engagement, strengthening communication strategies, and developing a more robust evaluation system. Strengthening human resource capacity, improving inter-sectoral coordination, and expanding public access to accurate nutritional information are recommended to more effectively combat stunting</i></p> <p>Keywords: <i>Stunting, Program Implementation, Primary Health Care, Nutrition Education, Monitoring and Evaluation</i></p>
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INTRODUCTION

Stunting prevalence is significantly affected by dietary practices, sanitation and hygiene behaviors, and caregiving approaches within the household (Munawar et al., 2024). Other contributing factors to stunting include deficiencies in both micro- and macronutrients, inappropriate feeding practices, inadequate caregiving, low socio-economic status, the presence of infectious diseases, and psychosocial determinants such as emotional stress, child temperament, and maternal depression (Yunus et al., 2021).

Indonesia currently ranks second in Southeast Asia and fourth globally in terms of stunting prevalence among children under five. According to the Ministry of Health of the Republic of Indonesia, the prevalence of stunting among toddlers reached 24.4% in 2021 (Badan Kebijakan Pembangunan Kesehatan, 2023). Although this figure represents a decline

from 30.8% in 2018, it remains significantly above the threshold set by the World Health Organization (WHO), which defines an acceptable stunting prevalence as below 20% (Mariana *et al.*, 2021; Mursyida and Budi, 2023). Aiming to reduce stunting prevalence to 14% by 2024, the Indonesian government has launched multiple programs at both national and local levels. The 2022 Indonesian Nutrition Status Survey (SSGI), conducted by the Ministry of Health, recorded a prevalence of 21.6%, reflecting progress from 24.4% in 2021, yet still indicating a substantial gap toward the targeted figure (Syarifah, 2024; Fristiwi, Nugraheni and Kartini, 2023).

Stunting remains a major public health concern in North Sumatra Province. Based on the 2021 Indonesian Nutrition Status Survey (SSGI), data from the provincial Stunting Reduction Acceleration Task Force (TPPS) indicate a stunting prevalence of 30.11%, reflecting a modest decline from 32.4% in 2018. Binjai City, one of the urban areas in the province, also continues to face stunting-related challenges, with a reported prevalence of 21.7% in 2021 (SSGI, 2023). The data underscore the need for enhanced stunting prevention strategies in North Sumatra Province, particularly in Binjai City, to meet the World Health Organization's standard of a prevalence rate below 20%.

The application of Edward III's policy implementation model offers a comprehensive understanding of the challenges encountered in the implementation of the stunting prevention program at the UPTD Binjai Estate Health Centre. Despite considerable efforts in communication and intervention, several obstacles persist, including low community participation, limited resource availability, and inadequate bureaucratic coordination. To enhance the effectiveness of the program, it is essential to improve community-based communication strategies, strengthen resource capacity, and foster better coordination among implementing units. According to research by Pratiwi Yunus *et al.*, (2021), A study analyzing the implementation of stunting prevention policies at the Antang Health Centre in Makassar City found that clear communication and adequate resource availability are critical determinants of policy success.

The UPTD Binjai Estate Health Centre provides services to four urban villages: Binjai Estate, Tanah Merah, Bhakti Karya, and Pujidadi. As a result, health programs, including stunting prevention initiatives, are implemented and monitored across all four areas. Each village has access to preventive and promotive services, such as nutrition education, maternal and child health check-ups, and environmental health interventions. Given its coverage, the UPTD Binjai Estate Health Centre plays a pivotal role in the success of local health programs. Optimizing program delivery and fostering active community participation are essential to

reducing stunting prevalence and meeting national targets. However, the main challenge identified in this study is the low level of community engagement and limited understanding of stunting, which undermines the effectiveness of counseling and intervention efforts. Furthermore, resource constraints and the absence of a comprehensive evaluation mechanism continue to impede optimal progress in reducing stunting rates within the UPTD Binjai Estate Health Centre's service area.

Based on Government Regulation No. 83 of 2017 concerning the Strategic Policy on Food and Nutrition, the formulation of the National Action Plan for Food and Nutrition (RAN-PG) and the Regional Action Plan for Food and Nutrition (RAD-PG) is emphasized as a foundation for developing high-quality and competitive human resources through food and nutrition programs. Nutritional improvement efforts are to be conducted in a comprehensive, integrated, and sustainable manner to maintain and enhance the nutritional status of the population. The reduction of stunting cases requires collaborative efforts between the health and non-health sectors, involving promotive, preventive, curative, and rehabilitative actions led by local governments and supported by community engagement. The overarching goal of stunting prevention efforts in Binjai City is to reduce the prevalence of stunting among children under five to 14% by the year 2024.

METHODS

This study employed a qualitative approach with a descriptive design to evaluate the implementation of the stunting prevention program at the Regional Technical Implementation Unit (UPTD) of Binjai Estate Community Health Center in Binjai City. The research was conducted in 2023, with data collection carried out across four urban villages served by the health center: Binjai Estate, Tanah Merah, Bhakti Karya, and Pujidadi.

A total of eight informants participated in this study, consisting of four health professionals (a physician, a midwife, and two nutritionists), two posyandu (integrated health post) cadres involved in community education and monitoring, and two community leaders or posyandu coordinators who provided insights into field-level coordination. Informants were selected through purposive sampling, focusing on individuals with extensive knowledge and direct experience in the implementation of stunting prevention initiatives.

To ensure the credibility and trustworthiness of the findings, data triangulation was employed by gathering information from multiple sources, including in-depth interviews with health workers, community health volunteers, and local leaders, as well as direct field observations of program activities at the health center. Thematic analysis was used to analyze

the data, allowing for the identification of key patterns and themes related to the program's successes and challenges.

This research adhered to ethical research principles, including informed consent, data confidentiality, and participant anonymity to protect informants' privacy and ensure the responsible use of data solely for academic purposes. All participants were briefed on the study objectives and given the opportunity to ask questions before providing their consent. Ethical clearance for this study was obtained from the Ethics Committee of the Faculty of Public Health, Universitas Prima Indonesia (013/KEPK/UNPRI/VI/2025).

RESULTS

Table 1. Characteristics of Research Informants

Code	Age	Position	Education	Description
INF01	45 Years	Head of Health Center	S-1 and Profession	Key Informant
INF02	42 Years	Doctor	S-1 and Profession	Key Informant
INF03	59 Years	Nutrition Officer	Diploma	Key Informant
INF04	48 Years	Midwife	Diploma	Key Informant
INT	30 Years	Parent of a Stunted Child	High School (SMA)	Triangulation Informant

Table 1. presents the characteristics of the informants involved in this study on the implementation of the Stunting Prevention Program at the Regional Technical Implementation Unit (UPTD) of Binjai Estate Community Health Center in Binjai City. The study engaged four key informants and one triangulation informant. The key informants included the Head of the Health Center (IF01), a Medical Doctor (IF02), a Nutrition Officer (IF03), and a Midwife (IF04), all of whom play crucial roles in both the implementation and evaluation of the stunting prevention program.

All key informants possessed at least a Bachelor's degree (S-1) or a professional qualification and were aged between 40 and 58 years. In addition, one triangulation informant (IT01) was included a parent of a stunted toddler aged 40 years, with a high school education background. This informant contributed a community perspective on barriers to meeting children's nutritional needs and accessing health services.

This combination of institutional and community-level perspectives allowed for a comprehensive understanding of both program implementation and the contextual challenges encountered at the health center level.

The implementation of the stunting prevention program at the UPTD Binjai Estate Community Health Centre is aimed at reducing the prevalence of stunting among children under five in its service area

This study aims to analyze the implementation of the stunting prevention program at the Regional Technical Implementation Unit (UPTD) of Binjai Estate Community Health Center in Binjai City by applying George C. Edward III's policy implementation framework, which encompasses four key variables: communication, resources, disposition (implementers' attitudes), and bureaucratic structure.

1. Communication

Communication plays a crucial role in the success of the stunting prevention program. The UPTD Binjai Estate Health Center uses various methods to convey information to the community, such as direct counseling, social media, and educational classes for prospective brides and grooms.

"We routinely hold counseling at the Posyandu every month. In addition to providing education about nutrition and stunting, we also conduct health checks for pregnant women and toddlers." (INF-04)

However, although communication efforts are carried out intensively, low community participation in counseling activities is a major obstacle.

"Limited human resources mean that this program can only reach a portion of the community, so we need more cadres and officers in the field." (INF-03)

Meanwhile, "Receiving clear and easily understandable information from health officials, although there are still some members of the community who are less active in seeking information, requires a more intensive approach from the officials." (INT)

These findings indicate that although communication has been carried out intensively, the limitations of operational capacity affect the even and sustainable distribution of information. Thus, all the results obtained from the interviews contribute directly to the conclusion that the success of the stunting prevention programme is highly determined by the effectiveness of communication, both in message delivery strategies and in the support of resources to extend the reach of interventions in the community.

2. Resources

The available resources at the community health centre, including the number of health workers and infrastructure, influence the success of programme implementation. This health centre faces limitations in the number of health workers available to serve the entire community across four villages.

"We are still struggling to increase community participation in nutrition outreach; many feel that it is unnecessary to attend."(INF-03)

Meanwhile, "Acknowledging that there has been assistance and education from the community health centre, but hoping that facilities and services can be improved further." (INT)

This statement confirms that in addition to challenges from the supply side (health workers and facilities), obstacles also come from the demand side, namely the lack of public awareness of the importance of nutrition education in preventing stunting. This finding directly contributes to the conclusion that the availability of adequate human resources and infrastructure is an important prerequisite for the success of stunting prevention programs. Without strengthening internal capacity, even well-designed interventions are difficult to achieve the expected coverage and impact.

3. Disposition (Executor's Attitude)

The disposition or attitude of program implementers greatly influences policy implementation. In this case, health workers at the Regional Technical Implementation Unit of Binjai Estate Community Health Center have shown a high commitment to the success of the program. However, time constraints and high workloads hinder the effectiveness of program execution.

"We are very committed to reducing the stunting rate, but time and personnel limitations are obstacles. This program can only run at its best if more personnel are involved."(INF-03)

Meanwhile, "I feel a consistent attention and support from the health workers. I also appreciate the friendly, patient, and open attitude of the staff when providing information and health services."(INT)

This statement shows that although health workers have a high commitment, time constraints and workloads hinder the optimal implementation of the program. Activities such as counseling and monitoring of growth and development have not been able to reach all areas. This finding confirms that the success of program implementation is greatly influenced by the attitude of the implementer and institutional support, especially in terms of adequate time and energy.

4. Bureaucratic Structure

The bureaucratic structure at the Regional Technical Implementation Unit of Binjai Estate Community Health Center is quite clear, but there are still some issues with coordination between the various units involved. The limitations in coordination lead

to a lack of synchronisation between health workers and posyandu cadres in programme implementation.

"Although the bureaucratic structure at the Health Centre is in place, coordination between units is still not optimal. Sometimes we do not receive enough information regarding the nutritional status of children or pregnant mothers who require special attention."(INF-01)

This limitation in coordination has impacted the lack of synchronisation in the implementation of programmes in the field, such as handling cases of malnutrition or monitoring at-risk pregnant women. This result contributes to the conclusion that although the organisational structure is available, the effectiveness of the programme heavily depends on the quality of cross-unit coordination in carrying out interventions in an integrated manner.

5. Impact of the Program on the Stunting Rate

Based on data from the community health centres in 2023 and 2024, the number of stunting cases remained at five cases per year. Although there was no increase, the distribution of cases shifted from the majority being male to entirely female in 2024, indicating a possible influence of biological and social factors on nutritional intake and parenting patterns.

"Although the number of stunting cases has not increased, we are seeing changes in the distribution of cases. In 2024, all children experiencing stunting are girls. This opens up the possibility that there are social or cultural factors influencing their dietary patterns and nutritional intake."(INF-04)

In addition, "They feel the benefits of the education and assistance provided, such as knowledge about healthy eating patterns and the provision of nutritional supplements, which have a positive impact on the improvement of their children's nutritional status." (INT)

And "This change may also be influenced by gender roles within the family. Typically, boys receive more attention in terms of nutrition and care, whereas girls are sometimes considered to need less attention, which affects their nutritional status."(INF-03)

The change in the distribution of stunting cases provides a new perspective on the potential influence of social and biological factors that need to be considered in stunting prevention strategies, especially related to caregiving practices that may differ based on gender.

This finding significantly contributes to the conclusion that stunting prevention strategies cannot solely focus on nutritional interventions, but must also consider socio-cultural factors, particularly gender-based caregiving practices. The shift in the distribution of these cases offers a new perspective that unequal treatment of children based on gender may be one of the important determinants in children's nutritional status, and therefore should be a concern in formulating more equitable and gender-sensitive intervention policies.

6. Public Perception

Most of the community understands that stunting affects children's physical growth and intelligence, and associates its causes with inadequate nutritional intake and the family's economic limitations. They hope for increased food aid and more inclusive and equitable outreach programmes.

“Many parents have realised that stunting affects a child's growth and development, both physically and cognitively. They know that the causes are often due to a lack of balanced nutrition, and that it is largely driven by economic constraints.”(INF-03)

I admit to feeling well served, quickly, and without any additional charges, so they feel valued and prioritised as beneficiaries of the programme.”(INT)

These findings contribute directly to the conclusion that the public's perception of stunting is fairly accurate, although the solutions they are hoping for tend to be practical, such as food aid and more inclusive and equitable outreach programmes. This public hope reflects the need for policy interventions that focus not only on education but also on economic empowerment and access to nutritious food resources.

7. Monitoring and Evaluation

Monitoring is routinely carried out using the Primary Health Centre Information System (SIMPUS) and the Posyandu Information System (SIP). However, the evaluation of the long-term impact on the reduction of stunting rates remains limited. Data collection has been conducted, but there is yet to be a comprehensive evaluation system that can measure changes in an overall manner.

"We have been monitoring through SIMPUS and SIP, but the evaluation of the impact on the reduction of stunting rates has not yet been conducted in a structured manner. We need a more comprehensive evaluation system to measure long-term success."(INF-03)

"Yes, obtaining information regarding monitoring and evaluation results clearly and openly, and being involved in the feedback process to improve programme effectiveness." (INT)

This finding contributes to the conclusion that despite consistent recording and monitoring efforts, there are still gaps in evaluating long-term impacts. The lack of a structured and comprehensive evaluation system is a major obstacle in measuring the effectiveness of stunting reduction programmes as a whole. Therefore, there is a need to strengthen the evaluation system so that the results from monitoring can be optimally used for decision-making and policy improvement in the future.

DISCUSSION

The findings of this study indicate that the implementation of the stunting prevention program at the Regional Technical Implementation Unit (UPTD) of Binjai Estate Community Health Center has made notable progress, despite facing several structural and social challenges. The success and constraints of the program can be comprehensively analyzed through the lens of George C. Edward III's policy implementation model, which highlights four key variables: communication, resources, disposition, and bureaucratic structure.

Communication

Communication is a critical component in the effective implementation of stunting prevention programs. Interview findings revealed that the Regional Technical Implementation Unit (UPTD) of Binjai Estate Community Health Center utilizes a range of communication strategies to disseminate information on stunting, including counseling sessions at Posyandu, the use of social media platforms, and educational classes for prospective brides and grooms.

Communication contributes significantly to stunting prevention through Behavior Change Communication (BCC), which serves to educate and motivate community members to adopt appropriate health behaviors. By fostering greater awareness and understanding, BCC facilitates positive shifts in nutritional practices, hygiene, and parenting behaviors key factors in reducing stunting prevalence (Darajat et al., 2022). The communication strategy employed includes direct socialization, interpersonal communication, and the use of social media to deliver key messages related to stunting prevention. These messages emphasize the importance of nutrition during the first 1.000 days of life, routine health check-ups, and effective parenting practices (Khumairoh et al., 2024).

The communication efforts include direct counseling, which serves as the primary method for raising community awareness on the importance of nutrition and stunting

prevention (Marni et al., 2021). This finding is consistent with previous research, which indicates that effective communication between health workers and the community can significantly enhance public understanding and engagement in stunting prevention programs (Anasa et al., 2024).

However, despite the implementation of various communication strategies, a major challenge remains the low level of community participation, particularly in outreach activities (Raudah, 2024). Some community members continue to exhibit limited concern regarding the issue of stunting, which contributes to the low responsiveness and participation in outreach programs (Haryono & Marlina, 2021). This underscores the importance of strengthening community-based communication and enhancing public trust in the information delivered by health workers, as emphasized in previous studies Anggreni et al., (2022) that highlights communication challenges in public health programmes.

Resources in Programme Implementation

The implementation of the stunting prevention program at the Regional Technical Implementation Unit (UPTD) of Binjai Estate Community Health Center also faces resource-related challenges, particularly concerning human resources and infrastructure. While the health center is staffed with qualified healthcare professionals, their number remains insufficient to effectively reach the entire population across the four villages within its service coverage. This constraint hampers the timely dissemination of information and limits the capacity for direct supervision of stunting prevention activities.

The availability of trained personnel such as health cadres, midwives, and family support facilitators is essential for the early detection of stunting, the provision of assistance, and the successful implementation of nutritional interventions and appropriate parenting practices. Strengthening this human resource component is therefore critical to enhancing the program's overall effectiveness (Negero et al., 2021). Training programs for health cadres and healthcare workers enhance their capacity to address stunting comprehensively, from the prenatal period through toddlerhood (Simbolon et al., 2023).

Research by Pormes et al. (2023), This indicates that the limitation of human resources remains one of the primary barriers to the effective implementation of public health programs, particularly in remote or underserved areas. A study conducted in Keerom Regency, Papua Province, found that strategic policies for stunting prevention had incorporated both specific and sensitive nutritional interventions, alongside educational campaigns aimed at increasing public awareness of the importance of balanced nutrition (Manangsang et al., 2024).

Implementation Disposition of the Programme

The disposition of program implementers referring to their attitudes, commitment, and readiness to carry out policy directives plays a critical role in the success of implementation. Findings from this study indicate that health workers at the Regional Technical Implementation Unit (UPTD) of Binjai Estate Community Health Center demonstrate a positive disposition toward the stunting prevention program. They exhibit strong commitment in delivering community education and executing the required interventions with consistency and dedication.

However, several health officials reported challenges related to time constraints and excessive workloads, which have hindered the optimal functioning of the program. This finding is consistent with the results of a study by Anggreni et al., (2022), which emphasized that workload-related stress among healthcare providers can negatively affect the quality and consistency of public health program implementation.

Bureaucratic Structure in Programme Implementation

The bureaucratic structure at the Regional Technical Implementation Unit (UPTD) of Binjai Estate Community Health Center adheres to the organizational guidelines established by both central and local governments. However, research findings reveal that insufficient coordination among internal units remains a key barrier to effective program implementation. While the health center operates under a defined organizational framework, the lack of synergy between field staff and program management has the potential to undermine the quality and reach of stunting prevention services.

According to Presidential Decree No. 72 of 2021, the National Population and Family Planning Board (BKKBN) has been appointed as the lead coordinator for accelerating stunting reduction efforts at the field level. In addition, the Stunting Reduction Acceleration Team (TP2S), under the coordination of the Vice President's Secretariat, is responsible for ensuring program convergence as well as integrated monitoring and evaluation. The effective execution of these responsibilities is highly dependent on a well-functioning bureaucratic structure that supports coordination across sectors and levels of governance (Perpres RI, 2021).

This finding aligns with research by Pormes et al., (2023), This highlights that ineffective coordination across sectors can significantly impede the achievement of health policy objectives. Therefore, enhancing inter-unit coordination and reinforcing the functional roles within the organizational structure of community health centers are essential steps to improve the implementation and impact of stunting prevention programs.

Impact and Evaluation of the Programme

Based on the data obtained, although the stunting rate at the Regional Technical Implementation Unit (UPTD) of Binjai Estate Community Health Center did not show a significant decline between 2023 and 2024, there are positive indications of increased public awareness and behavioral changes related to family nutrition practices. The relatively stable trend in stunting reduction suggests that preventive interventions have reached certain programmatic targets, even though the overall outcomes remain suboptimal.

This study highlights the need for regular evaluations to enhance the effectiveness of stunting prevention programs, focusing not only on implementation processes but also on their measurable impact on the nutritional status of children in the target area. Such evaluations are essential to ensure that interventions are producing optimal outcomes and are aligned with established program targets.

Muthia et al., (2020) research emphasizes the importance of periodic evaluation to improve the effectiveness of stunting prevention programs. The results show that without evaluation, the decline in stunting rates tends to stagnate even though there are changes in community behavior.

The success of stunting prevention programs relies heavily on periodic evaluations that assess not only implementation fidelity but also the program's impact on behavioral change and children's nutritional status. In the absence of robust evaluation mechanisms, programs risk stagnation and tend to yield suboptimal outcomes. Therefore, strengthening the evaluation system is strongly recommended to enable continuous program refinement and to support the achievement of national stunting reduction targets.

Public Perception

Public perception plays a critical role in the success of stunting prevention programs, as community understanding and attitudes toward stunting significantly influence their willingness to engage in initiatives provided by community health centers (Y et al., 2024). Based on interview findings, the majority of parents particularly pregnant women and families with toddlers demonstrate an awareness of the importance of stunting prevention programs. They acknowledge that nutritional deficiencies can impair both physical and cognitive development, potentially leading to long-term consequences for the child's quality of life. However, despite this awareness, several misconceptions persist within the community. For instance, stunting is often perceived solely as a physical growth issue, without recognition of its impact on brain development. Moreover, some parents continue to believe that stunting is primarily hereditary and thus unavoidable, which diminishes their motivation to engage in

educational activities related to stunting prevention. These findings are consistent with previous research by Pormes et al., (2023), which state that myths and incorrect beliefs can hinder the success of public health programmes, particularly those focused on nutrition and disease prevention.

Low community participation in educational activities remains a major challenge in the implementation of the stunting prevention program. Despite the direct approaches adopted by the community health center such as through integrated service posts (Posyandu) and educational sessions for prospective brides and grooms many parents continue to show limited concern for nutrition and child health education. As one health worker at the center stated: “One of our biggest challenges is the low community participation in extension activities. Many parents are still indifferent to the issue of stunting.” This finding underscores the need for more inclusive and participatory strategies to engage community members in health education. It also highlights the importance of leveraging locally appropriate communication channels such as community leaders, traditional gatherings, or local media to address persistent misconceptions about stunting and to promote behavior change (Maulida et al., 2024).

Monitoring and Evaluation of the Stunting Prevention Programme

Monitoring and evaluation (M&E) are essential components in ensuring the successful implementation of stunting prevention programmes (Kodish et al., 2022). Based on the research findings, the Regional Technical Implementation Unit (UPTD) of Binjai Estate Community Health Center conducts routine monitoring of the stunting prevention program through integrated health information systems, including the Community Health Centre Information System (SIMPUS) and the Posyandu Information System (SIP). These systems enable health officers to regularly track the nutritional status of pregnant women, toddlers, and children under five, and to implement timely follow-up actions when stunting cases are identified. The use of such digital tools enhances data-driven decision-making and supports early intervention efforts.

However, the evaluation of the program’s impact on reducing stunting prevalence has not yet been conducted in a comprehensive and systematic manner. While community health centers have periodically reported stunting figures, there is a lack of in-depth assessment regarding the program’s effectiveness in achieving significant reductions in stunting rates. This gap highlights the need for the stunting prevention program to be supported by clearer, measurable indicators that can accurately assess its outcomes. Such indicators should include behavioral evaluations related to improved dietary practices and increased access to healthcare services among the target population (Rahmadani, 2024).

CONCLUSION

Based on the research findings on the implementation of stunting prevention programs at the Regional Technical Implementation Unit (UPTD) of Binjai Estate Community Health Center, it can be concluded that policy implementation in this area has progressed effectively. This is reflected in a reduction in stunting prevalence within the health center's service area during the 2023–2024 period. The success has been supported by the application of comprehensive strategies, including the provision of supplementary nutrition, vitamin and mineral supplementation, and education for pregnant women and caregivers on the importance of balanced nutrition.

The active involvement of healthcare professionals such as doctors, midwives, and nutritionists alongside family engagement, particularly among target groups, has been a critical factor in program success. Nonetheless, challenges persist, including limited public awareness and resource constraints, which continue to hinder the program's full potential.

To sustain and improve current achievements, it is recommended that maternal and child health monitoring be conducted continuously from pregnancy through postpartum periods. In addition, strengthening cross-sectoral collaboration is essential to enhance intervention coverage and effectiveness.

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