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The Influence of Policy Implementation and Coordination on Achieving the Stunting Reduction Target in Cianjur Regency (Study in Campaka, Naringgul, and Tanggeung Districts)

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This study aims to analyze the influence of policy implementation and coordination between stakeholders on achieving the stunting reduction target in Cianjur Regency, with a focus on Campaka, Naringgul, and Tanggeung Districts. The problem of stunting remains a strategic issue in health development, so effective policy implementation and optimal coordination between local governments, health workers, and other relevant parties are needed. This study uses a quantitative approach with a descriptive verification method. The results show that policy implementation and cross-sectoral coordination have generally been running well and have a very important role in achieving the stunting reduction target. Clarity of policy objectives, availability of resources, and the attitude and commitment of implementers are the main factors in successful implementation, while effective coordination through communication, division of labor, and unity of action can create synergy between sectors. Both partially and simultaneously, these two variables have been proven to have a significant and complementary influence in supporting the success of the program. However, target achievement has not been fully optimized due to ongoing obstacles such as limited access to services, socio-cultural factors, and the suboptimal integration and involvement of all stakeholders. Therefore, ongoing strengthening is needed to ensure the program runs more effectively and sustainably.
Keywords: Policy Implementation, Coordination, Target Achievement, Stunting

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1. Introduction

Stunting is a serious public health issue and a major concern for the government and various stakeholders. Stunting refers to a condition in which children experience stunted growth, particularly in height, due to chronic malnutrition (Tampubolon, 2020). Stunting can also be defined as a condition of growth failure in toddlers, characterized by a height lower than the age-standard due to chronic malnutrition during the first 1,000 days of life (HPK). This condition not only impacts physical growth but also hinders children's cognitive, motor, and learning development, ultimately affecting future productivity and the quality of human resources (Nisa, 2018). Stunting also contributes to a significant economic burden, as stunted children are at higher risk of chronic diseases in adulthood, lower work productivity, and increased healthcare and education costs (Sunaryo et al., 2021).

According to Wello & Safei (2021), four factors influence stunting: 1) Parenting practices influenced by a lack of parental knowledge about nutritional health before, during, and after childbirth; 2) Poor quality ANC (antenatal care) and postnatal care services; 3) Inadequate access to nutritious food due to its relatively high cost; 4) Lack of access to clean water and sanitation, which can lead to recurrent infections, which impact child development (Haskas, 2020).

The policy on stunting is regulated in Presidential Regulation of the Republic of Indonesia Number 72 of 2021 concerning the Acceleration of Stunting Reduction (Lailiyah, 2023). This regulation was established to create healthy, intelligent, and productive human resources and achieve sustainable development goals. Stunting, in this regulation, is defined as impaired growth and development in children due to chronic malnutrition and recurrent infections, characterized by height or length below the standards set by the minister responsible for government affairs in the health sector (Molan et al., 2025). It discusses how efforts to accelerate stunting reduction must be implemented in a convergent, holistic, integrative, and high-quality manner through coordination, synergy, and synchronization among ministries/agencies, provincial governments, city/district governments, village governments, and relevant stakeholders (Putri & Suprayoga, 2023).

To coordinate the implementation of the Stunting Reduction Acceleration Program at the central level, a Stunting Reduction Acceleration Team (TP2S) was established. According to Presidential Decree No. 72 of 2021, Article 15, paragraph 2, the Stunting Reduction Acceleration Team is tasked with coordinating, synergizing, and evaluating the implementation of the Stunting Reduction Acceleration Program effectively, convergently, and integratedly, involving cross-sectoral stakeholders at the central and regional levels (Fait & Sabaruddin, 2025). The Stunting Reduction Acceleration Team (TP2S) is divided into two sections: a Steering Committee and an Implementing Committee. The Vice President serves as the Steering Committee Chair, assisted by the Coordinating Minister for Human Development and Culture and other ministers. Meanwhile, the Head of the National Population and Family Planning Agency was appointed as the Chief Executive. Stunting Reduction Acceleration Teams were also established at the provincial, district/city, and village/sub-district levels (Darmawati et al., 2025).

The 2024 SSGI was implemented in 38 provinces and 514 districts/cities and was fully supported by relevant ministries/agencies, local governments, and international development partners, such as WHO, SEAMEO RECFON, and Prospera (Setiyawati et al., 2024). The 2024 SSGI was implemented according to standards with external validation by AIPTKMI (Association of Indonesian Public Health Higher Education Institutions). No significant differences were found between the results of the validator team and the SSGI Team for the indicators of stunting, wasting, and underweight (Endah Sampriyani, 2025). Validation was conducted at all stages, from input, process, to output. It is known that the root causes of stunting in Indonesia are very complex and involve multidimensional factors, such as poor nutrition, low access to and quality of health services, inadequate environment and sanitation, low nutrition education, and socio-economic factors that cause unequal access to resources (Agri et al., 2024).

Stunting remains a priority issue for many cities and regencies in West Java. Cianjur Regency, one of the areas with a relatively high stunting prevalence in previous years, has become a focus of intervention and monitoring by the local government and cross-sectoral agencies in 2024. Cianjur Regency, West Java, has demonstrated remarkable achievements in reducing stunting prevalence in recent years. In 2014, the stunting prevalence in Cianjur Regency reached 41.22%, one of the highest in Indonesia. According to the 2024 Indonesian Health Survey (SKI), the stunting prevalence in Cianjur has dropped dramatically to 11.4%, after reaching 33.7% in 2021 and 13.6% in 2022. This decline places Cianjur in second place among 27 regencies/cities in West Java in terms of stunting reduction. The Cianjur Regency Government continues to strive to achieve "zero new stunting" through collaboration involving various parties.

In implementing the policy to accelerate stunting reduction, which refers to Presidential Regulation No. Despite the implementation of Presidential Regulation No. 72 of 2021, particularly regarding the national strategy for accelerating stunting reduction, Cianjur Regency still faces various challenges on the ground. One major obstacle is the persistence of multiple interpretations of the policy and the lack of comprehensive

outreach, resulting in suboptimal understanding among implementers and the public. Furthermore, budget limitations and the quality of human resources, both cadres and health workers, also impact implementation effectiveness, compounded by the uneven distribution of facilities and interventions. Implementer coverage and human resource capacity are also limited, particularly in remote, hard-to-reach areas. Furthermore, implementers' tendency to be passive, lacking initiative, and not fully recognizing the importance of the policy has resulted in less than optimal implementation.

In terms of coordination and collaboration between stakeholders, the implementation of the policy to accelerate stunting reduction in Cianjur Regency also faces various obstacles. Stunting reduction requires active collaboration across sectors, including health, education, agriculture, social affairs, and village government. However, in practice, this coordination has not been effective and sustainable. Intersectoral coordination often occurs only in the initial stages of the program, while in subsequent implementation stages each sector tends to operate independently without strong synergy. Although Cianjur Regency has established 1,908 Family Support Teams (TPK) consisting of midwives or nutritionists, Family Welfare Movement (PKK) cadres, and Family Planning (KB) cadres to assist families at risk of stunting, its implementation still faces several challenges. Coordination between units is ineffective and has not yet achieved optimal synchronization, while communication between organizations and implementers is also inconsistent and insufficiently intensive, potentially leading to miscommunication and overlapping programs.

Similarly, in terms of achieving the stunting reduction target in Cianjur Regency, results have not been fully optimal and continue to face various obstacles. One key issue is the lack of comprehensive outreach, resulting in uneven understanding of the program's objectives among stakeholders and the community. Furthermore, the reporting and data recording system remains suboptimal, as evidenced by the failure to achieve targets for several indicators, such as immunization coverage and iron supplement consumption. Limited human resources and budget, as well as the uneven distribution of interventions, also pose significant obstacles to achieving established targets. Furthermore, several programs are not fully integrated with regional development priorities, reducing the effectiveness of policy implementation.

2. Method

The method used by researchers in this research is descriptive verification with a quantitative approach. The method used in this study is a descriptive verification method, the definition of the descriptive verification method according to Sugiyono (2013), namely: "The research method through proof to test the hypothesis of descriptive research results with statistical calculations so that research results are obtained that show the hypothesis is accepted or rejected. The operational variables in this study are Policy Implementation (X1), Cross-Sector Coordination (X2) and Target Achievement (Y). The population in this study are all groups that have a role and direct involvement in the implementation of the policy to accelerate stunting reduction and coordination in Campaka District, Naringgul District and Tanggeung District, Cianjur Regency, totaling 8,000 respondents. The sampling technique in this study uses stratified proportional random sampling. The application of the stratified proportional random sampling technique in this study is expected to provide a more comprehensive picture of the conditions and roles of each respondent group in efforts to accelerate stunting reduction, as well as produce accurate and scientifically accountable research findings. Determination of the number of samples in this study was carried out using the Slovin formula so that 99 samples were obtained. Data collection was conducted by distributing questionnaires. Questionnaires were chosen because they are an efficient data collection instrument for accurately identifying the research needs and measuring the research variables. The questionnaire is a closed-ended questionnaire, where respondents are asked to choose from a range of answers provided by the researcher

(Sekaran, 2006). Primary data obtained from respondents were analyzed using SEM (Structural Equation Models) to determine the relationships between latent variables. Before distributing the questionnaires to the selected respondents, the items must be ensured to be valid and reliable. Validity and reliability testing is carried out to ensure that the data to be analyzed is obtained from valid and reliable (consistent) measuring instruments.

3. Result And Discussion

Model testing is performed based on AMOS program output, the results of which summarized in the following table:

Table 1 Summary Structural Model Testing Influence Implementation policy and coordination cross sector against Target achievement

Endogenous Latent Variables	Variables Latent Exogenous	Coefficient (standardized)	Simple, Baku	T_{count} (C,R,)	Conclusion	R^2
Target achievement	Implementation policy	0.763	0.069	14,883	Significant	0.895
	Coordination cross sector	0.559	0.053	18,702	Significant	

Source: Analysis Results Data, 2026

Based on Table 1 above, it can be concluded that the path coefficient (standardized) of the structural model in this study has a significant influence. The indirect causal influence of X1 (exogenous variable) to Y (endogenous variable) through the exogenous X2 (endogenous variable) is not counted as an indirect influence. Similarly, the indirect causal influence for X1 and X2 to Y through other exogenous variables is also not counted as an indirect influence, because the relationship between exogenous variables is only correlative (non-causal). SEM only calculates causal influences, while the total influence of exogenous latent variables on endogenous latent variables is in standardized numbers.

Table 2 Decomposition Influence between Exogenous latent variables with Endogenous Latent Variable Target achievement

Variables Latent Exogenous	Influence causal		Total influence
	Direct	Indirect	
Implementation policy	0.582	-	58.2
Coordination cross sector	0.313	-	31.3

Source: Analysis Results Data, 2026

Based on the table above, it can be concluded that the latent variable of policy implementation (X1) shows the largest total causality influence on the endogenous latent variable of target achievement (Y), namely 0.582, while the latent variable of cross-sector coordination (X2) shows the total causality influence on the endogenous latent variable of target achievement (Y), namely 0.313.

The Influence of Policy Implementation (X1) and Cross-Sector Coordination (X2) on Target Achievement (Y)

The hypothesis for testing the structural model of target achievement influenced by policy implementation and cross-sector coordination is that, because F-test = 5.342 > F-table = 3.042, H0 is rejected. This means that at least one path of policy implementation and cross-sector coordination significantly influences target achievement. The magnitude of the influence of the two variables above can be seen more clearly in the following figure:

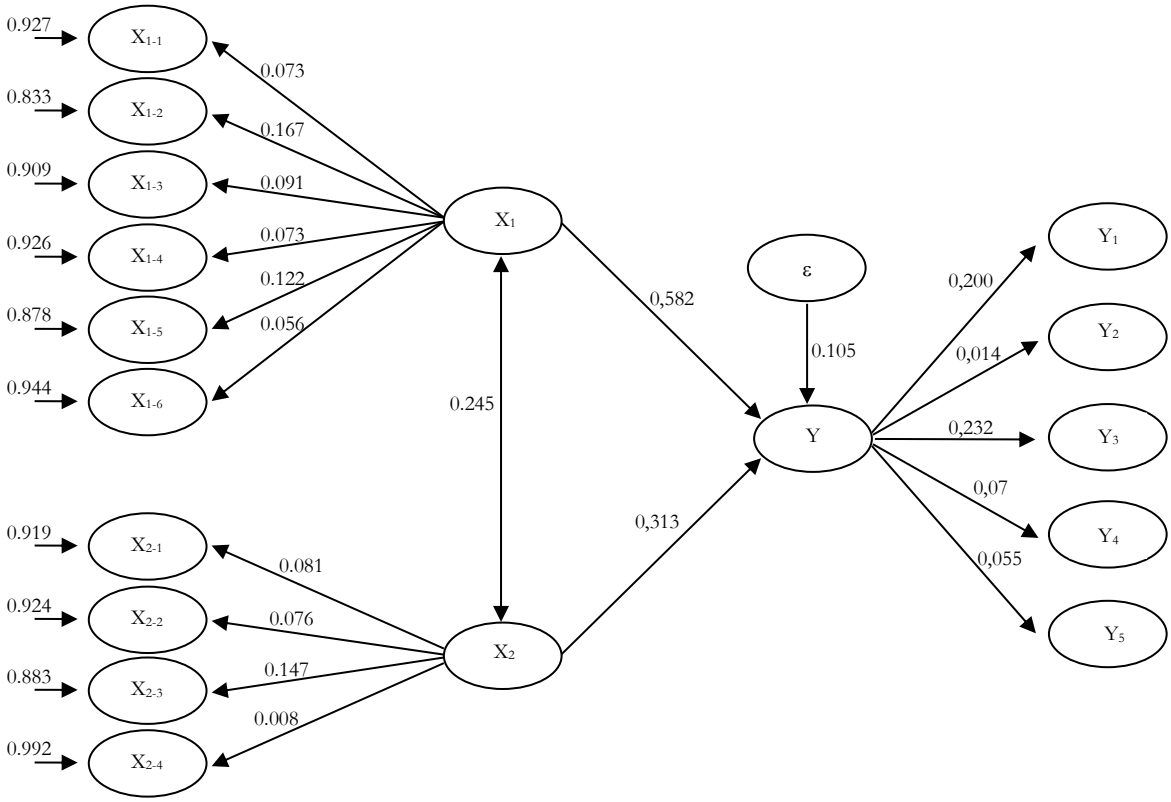

Figure 1 Structural Model of the Influence of Policy Implementation Variables X1 and Cross-Sector Coordination X2 on Target Achievement (Y)

Based on the results of a simultaneous analysis, policy implementation and cross-sectoral coordination together contributed 89.5% to achieving the stunting reduction target in Campaka, Naringgul, and Tanggeung Districts, Cianjur Regency. This indicates that these two variables are the most dominant factors in determining program success, while the remaining 10.5% is influenced by factors outside the research model. Sound policy implementation is the primary foundation, particularly through clarity of objectives, availability of resources, the characteristics and attitudes of implementers, and supportive environmental conditions. With effective implementation, the program can proceed according to plan and reach its intended target.

Conversely, cross-sectoral coordination also plays a crucial role because stunting reduction is a multidimensional issue involving various sectors such as health, social affairs, education, and government. Good coordination through communication, division of labor, and unity of action can create synergy between agencies, making program implementation more efficient and avoiding overlap. These two variables complement each other, and sound policy implementation must be supported by effective coordination to achieve optimal results. In the context of the research area, which has diverse geographic and socioeconomic conditions, synergy between policy implementation and cross-sectoral coordination becomes increasingly important. Challenges such as limited access, community economic conditions, and varying levels of participation require an integrated approach based on local needs. Therefore, continuous strengthening of both aspects is necessary for the stunting reduction program to be effective and sustainable.

In addition to these two main variables, other factors influence the achievement of the stunting reduction target, namely socio-cultural factors and community behavior, as well as access to and quality of basic services. Public awareness regarding nutrition, parenting, and healthy lifestyles remains uneven,

necessitating more intensive education. Furthermore, limited access to health facilities, uneven quality of services, and poor sanitation and infrastructure conditions also pose obstacles in some areas. Therefore, a more comprehensive approach is needed that focuses not only on policy implementation and coordination but also encompasses changes in community behavior and improvements in the quality of basic services to optimally achieve the stunting reduction target.

The Influence of Policy Implementation (X1) on Target Achievement (Y)

The magnitude of the influence of the latent variable, the policy implementation variable X1, which is predicted by the dimensions of policy standards and objectives (X1-1), resources (X1-2), inter-organizational communication (X1-3) and the characteristics of implementing agents (X1-4), the attitudes of implementers (X1-5) and social, economic and political conditions (X1-6) can be described as follows:

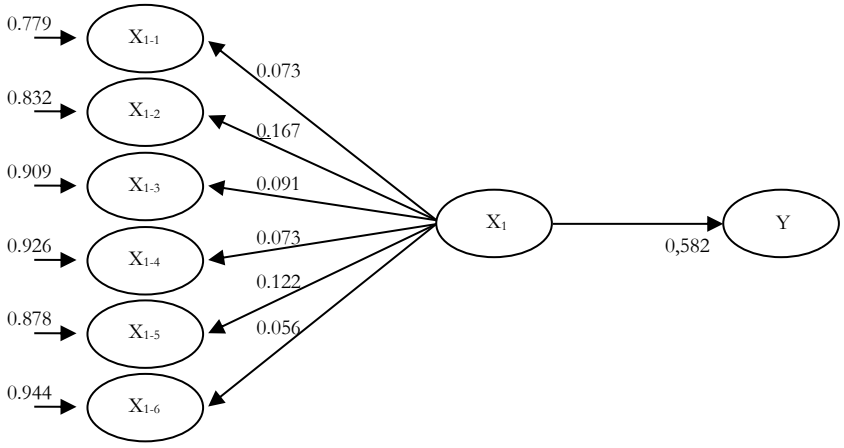

Figure 2 The magnitude of the influence of the latent variable of policy implementation (X1)

From the model and figure above, it can be seen that the dimension with the largest path coefficient (standardized) is the resource dimension (X1_2) of 0.409, with a magnitude of influence in predicting the policy implementation variable X1 of 16.7%, and a measurement error of 83.3%. Meanwhile, the dimension with the smallest path coefficient is the social, economic and political conditions dimension (X1-6) of 0.237, so that the magnitude of influence in predicting the policy implementation variable X1 is 5.6%, the remaining 94.4% is measurement error. The results of the path coefficient analysis of the confirmatory factor analysis (CFA) model indicate a significant influence, as shown in table 4.37 above, the T-value (C, R / critical ratio) are all above the required critical value of C, R 2. So it can be concluded that the policy implementation variable can be used to predict the target achievement variable.

Overall, the analysis results show that policy implementation contributes 58.2% to achieving the stunting reduction target. This confirms that program success is largely determined by how the policy is implemented in the field. Of the various dimensions analyzed, all demonstrated varying but complementary contributions in supporting effective program implementation.

The policy standards and objectives dimension contributed 7.3% and is in the high category, indicating that the policy's direction and objectives are sufficiently clear and understood by implementers. This contributes to more focused program implementation, although increased socialization is still needed to ensure a more equitable understanding. Meanwhile, the resources dimension was the most dominant factor, contributing 16.7%. The availability of human resources, budget, and facilities and infrastructure was deemed adequate to support the program, although challenges remain in their equitable distribution and optimal utilization.

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The inter-organizational communication dimension contributed 9.1% and is also in the high category. This indicates that communication and coordination between institutions are already well-functioning, although improvements are needed, particularly in strengthening cross-sector synergy. Furthermore, the implementing agent characteristics dimension, with a contribution of 7.3%, indicates that the organizational structure, division of tasks, and implementer competencies support policy implementation, although capacity building and workload distribution are still needed.

On the other hand, the implementer attitude dimension contributed 12.2% and was a crucial factor in the program's success. The implementer's positive attitude, commitment, and initiative were deemed excellent and capable of driving implementation effectiveness. The social, economic, and political conditions dimension contributed 5.6%, categorized as moderate to high. This factor indicates that external conditions are quite supportive, but challenges remain, particularly in terms of community economics and unequal participation.

Thus, it can be concluded that all dimensions of policy implementation have been running quite well and have made a positive contribution to achieving the stunting reduction target. However, improvements are still needed, particularly in the distribution of resources, increased cross-sectoral coordination, strengthened implementer capacity, and increased community socio-economic support to ensure more effective and optimal policy implementation.

The Influence of Cross-Sector Coordination (X2) on Target Achievement (Y)

The magnitude of the influence for the latent variable Cross-Sector Coordination X2, predicted by the dimensions of unity of action (X2-1), communication (X2-2), division of labor (X2-3), and discipline (X2-4), can be described as follows:

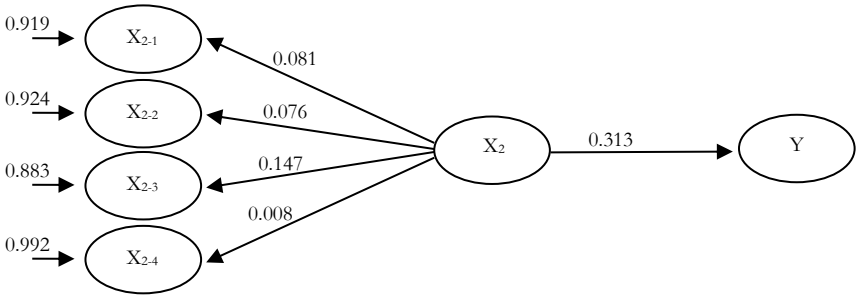

Figure 3: Magnitude of the Influence of the Latent Variable of Cross-Sector Coordination X2

From the measurement model and figure above, it can be seen that the dimension with the largest standardized path coefficient is the division of labor dimension (X2-3), at 0.384, with a 14.7% influence in predicting the cross-sector coordination variable X2 and a measurement error of 85.3%. Meanwhile, the discipline dimension (X2-4) has the smallest path coefficient, at 0.091, resulting in a 0.08% influence in predicting the cross-sector coordination variable X2, with the remaining 99.2% being due to measurement error. The results of the path coefficient analysis using the confirmatory factor analysis (CFA) model indicate a significant influence, as shown in Table 4.37 above. The calculated T values (C,R/critical ratio) are all above the required critical value of C,R ≥ 2. Therefore, it can be concluded that the cross-sector coordination variable can be used to predict target achievement.

Based on the analysis, cross-sectoral coordination contributed 31.3% to achieving the stunting reduction target. One of the key dimensions is unity of action, contributing 8.1%, which is in the moderate to high category. This indicates that alignment of actions between units is quite good, particularly in the coordination of schedules and activities. However, differences in perceptions and actions between units

persist due to differing priorities and work mechanisms, necessitating strengthening synchronization and leadership roles for optimal coordination.

The communication dimension contributed 7.6% and is also in the moderate to high category. In general, communication between units has been quite good, characterized by clear information and relatively regular communication frequency. This communication helps align perceptions and facilitates cooperation between agencies. However, involvement across units is not evenly distributed, requiring more intensive and structured communication.

The division of labor dimension is the most dominant factor in cross-sectoral coordination, contributing 14.8% and is in the high to very high category. This indicates that the division of tasks is clear, proportional, and aligned with the competencies of each implementer. This situation supports the effectiveness of program implementation, as each unit can optimally fulfill its role. However, improvements are still needed to ensure equitable workload distribution and competency alignment across units.

Meanwhile, the discipline dimension contributed 0.8%, categorized as high to very high. Despite its relatively small contribution, discipline remains a crucial factor in supporting successful coordination. Task implementation was deemed to be in accordance with SOPs, timely, and consistent. However, the level of discipline is not yet fully uniform across all units, so strengthening efforts are still needed to ensure more effective cross-sectoral coordination and optimally support the achievement of stunting reduction targets.

4. Conclusion

Based on the research results and discussion in Chapter IV, it can be concluded that policy implementation, cross-sectoral coordination, and achievement of the stunting reduction target have generally gone well. This is evident in the clarity of policy objectives, the availability of resources, and the high level of commitment of implementers. Furthermore, synergy between sectors has been established through communication, division of labor, and unity of action. However, target achievement has not been fully optimized due to persistent obstacles, particularly in the socio-cultural aspects of the community, limited access to services, and the suboptimal integration of program implementation in the field.

Partially, policy implementation has a significant influence on achieving the stunting reduction target. The quality of implementation is a key factor, particularly in the aspects of resources, implementer attitudes, and clarity of policy objectives. This indicates that the better the implementation, the higher the level of target achievement. However, improvements are still needed, particularly in strengthening the capacity of implementers and optimizing communication between organizations to ensure more effective policy implementation.

Furthermore, cross-sectoral coordination also has a significant influence on target achievement. Program success is largely determined by the level of synergy between sectors, with division of labor being the most dominant factor, followed by communication and unity of action, while discipline has a relatively smaller influence. Effective coordination can align programs, increase efficiency, and avoid overlapping implementation. However, strengthening coordination integration is still needed, particularly in improving the quality of communication and ensuring equitable involvement of all units.

Simultaneously, policy implementation and cross-sectoral coordination have a significant impact on achieving the stunting reduction target. These two variables complement each other and are key to program success. Good policy implementation will achieve optimal results if supported by strong and integrated cross-sectoral coordination. Therefore, continuous strengthening efforts in both aspects are needed to ensure optimal, effective, and sustainable achievement of the stunting reduction target.

5. References

Agri, T. A., Ramadanti, T., Adriani, W. A., Abigael, J. N., Setiawan, F. S., & Haryanto, I. (2024, July). Menuju pertumbuhan seimbang dalam tantangan SDGs 2 dalam penanggulangan kasus stunting di Indonesia. In *National Conference on Law Studies (NCOLS)* (Vol. 6, No. 1, pp. 128-144).

Darmawati, D., Hadijah, S., Rahmayanti, R., Fitriana, F., & Andayani, S. (2025). Edukasi pencegahan stunting pada remaja putri serta screening haemoglobin di Dayah Insan Qurani Aceh Besar. *Jurnal PADE: Pengabdian & Edukasi*, *7*(2), 127-131.

Endah Sampriyani, E. S. (2025). *The Relationship Between Home Environmental Sanitation and The Incidence Of Stunting in Toddlers in The Winong Health Center Working Area Cirebon RegencY* (Doctoral dissertation, Institut Teknologi dan Kesehatan Mahardika).

Fait, T., & Sabaruddin, A. (2025). Kolaborasi Multistakeholder Dalam Percepatan Penurunan Stunting di Kabupaten Kolaka. *Journal Publicuho*, *8*(2), 997-1012.

Haskas, Y. (2020). Gambaran stunting di Indonesia: literatur review. *Diagnosis Jurnal Ilmiah Kesehatan*, *15*(2), 154-157.

Lailiyah, K. (2023). Peran Badan Kependudukan Dan Keluarga Berencana Nasional (BKKBN) Dalam Percepatan Penurunan Stunting Perspektif Perpres Nomor 72 Tahun 2021. *Mendapo: Journal of Administrative Law*, *4*(1), 16-33.

Molan, A. A. A., Fernandez, D., & Pariangu, U. T. (2025). Implementasi Peraturan Presiden Nomor 72 Tahun 2021 Tentang Percepatan Penurunan Stunting (Studi Kasus di Desa Lambunga Kecamatan Kelubagolit Kabupaten Flores Timur). *Triwikrama: Jurnal Ilmu Sosial*, *10*(9), 141-150.

Nisa, L. S. (2018). Kebijakan penanggulangan stunting di Indonesia. *Jurnal Kebijakan Pembangunan*, *13*(2), 173-179.

Putri, N. A., & Suprayoga, S. (2023). Implementasi Kebijakan Penurunan Stunting Di Kota Surabaya (Studi Kecamatan Bubutan). *Jisp (Jurnal Inovasi Sektor Publik)*, *3*(3), 52-63.

Sekaran, U. (2006). *Metodologi Penelitian untuk Bisnis. Edisi 4*. Jakarta: Salemba Empat.

Setiyawati, M. E., Ardhiyanti, L. P., Hamid, E. N., Muliarta, N. A. T., & Raihanah, Y. J. (2024). Studi literatur: keadaan dan penanganan stunting di Indonesia. *IKRA-ITH HUMANIORA: Jurnal Sosial Dan Humaniora*, *8*(2), 179-186.

Sugiyono. (2013). *Metode Penelitian Kuantitatif, Kualitatif dan R&D*. Bandung: Alfabeta.

Sunaryo, D. R., Candradewini, C., & Arifianti, R. (2021). Implementasi kebijakan percepatan pencegahan dan penanggulangan stunting di Kabupaten Bandung. *Responsive: Jurnal Pemikiran Dan Penelitian Administrasi, Sosial, Humaniora Dan Kebijakan Publik*, *4*(4), 205-213.

Tampubolon, D. (2020). Kebijakan intervensi penanganan stunting terintegrasi. *Jurnal Kebijakan Publik*, *11*(1), 25-32.

Wello, E. A., & Safei, I. (2021). Literature review faktor-faktor yang mempengaruhi terjadinya stunting pada anak balita. *Fakumi Medical Journal: Jurnal Mahasiswa Kedokteran*, *1*(3), 241-246.