Conference Paper



Dynamic Governance in Overcoming Stunting Mojokerto Regency

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*Corresponding author: ABSTRACT E-mail: ratna.a.krishanti@gmail.com As a form of commitment to accelerate the reduction of stunting rates, the government has issued Presidential Regulation Number 72 of 2021 concerning the Acceleration of the Reduction of Stunting Rates. This is evidenced by the results of the 2021 Indonesian Nutritional Status Study (SSGI) survey, the stunting rate in Mojokerto Regency reached 27.4 percent and decreased in 2022 to 11.6 percent and in 2023 decreased again to 9.6 percent of cases or 20.0%. Even in 2024, it had a blue status with a prevalence below 10 percent. In this study, the author focuses on how to implement dynamic governance in Mojokerto Regency to overcome stunting. This research method uses a descriptive method with a qualitative approach. There are several methods of data collection used by researchers in this study, namely observation, interviews, and documentation. The data analysis techniques used are data condensation, data display, and conclusion drawing/verification. The results of the study show that dynamic governance in overcoming stunting in Mojokerto Regency can be seen from the results of the last stunting measurement in 2024, which was below 10 percent and had a blue status, indicating a decrease in stunting cases. The stunting control policy also increases child productivity, which is the result of collaboration between various sectors that help in handling stunting in Mojokerto Regency. Conclusion: The Mojokerto Regency Government is advised to increase stunting handling interventions through collaboration between each sector to increase child productivity in Mojokerto Regency. Then the Mojokerto Regency Government is also advised to be able to determine the right policy direction by considering social and environmental changes and the results of previous program evaluations.

Keywords: Dynamic governance, stunting prevalence, policy

Introduction

We must collectively overcome all challenges to achieve a developed Indonesia by 2045. In Indonesia, stunting is one of the main health problems, including in Mojokerto Regency. Stunting is a childhood growth and development disorder caused by malnutrition and recurrent infections that is characterized by below-standard body length or height (Asnol, 2023). This condition, which is characterized by stunted physical growth due to malnutrition and recurrent infections in children, has a long-term impact on cognitive development and an individual's future productivity potential (Ernidayati et al., 2022). Indonesia is currently facing chronic nutritional problems due to long-term low nutritional intake, which can disrupt children's growth. Years of malnutrition cause stunting. People who have been stunted since childhood will suffer from malnutrition, such as mental health, psychomotor, and intelligence disorders (Yadika et al., 2019). Stunted babies under two years of age are susceptible to reduced productivity levels and future disease (Jariah et al., 2024).

According to the World Health Organization (WHO), Indonesia has an increasing trend in stunting cases, making it one of the highest countries in Southeast Asia (Rahman et al., 2023). In 2017, the prevalence of stunting among Indonesian toddlers reached an average of 36.4 percent or more than 8.8 million people. However, according to the results of the Indonesian Nutrition Status Survey (SSGI),

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the prevalence of stunting in Indonesia fell from 24.4% in 2021 to 21.6% in 2022. This downward trend is still above the WHO standard of 20% (Setiyawati et al., 2024).

According to data from the Indonesian Toddler Nutrition Status Survey (SSGBI) released by the Ministry of Health, East Java is one of the provinces with a fairly high prevalence of stunting in Indonesia. Despite recent reductions in stunting rates, East Java's stunting prevalence remains above the WHO's 20% threshold (Nadhiroh et al., 2022). Mojokerto, one of the regencies in East Java, also struggles with stunting. The Mojokerto Regency Health Office's data shows a fairly concerning stunting rate of 27.4% in 2022 (Ariyanti et al., 2024). Mojokerto Regency handles stunting by Mojokerto Regent Regulation Number 66 of 2021, which pertains to the Integrated Acceleration of Stunting Reduction. The Mojokerto Regency Government will make every effort, both in terms of socialization of nutrition, sanitation, early marriage, and increasing access to health services, to achieve the target of reducing stunting by 15.96 percent in 2024.

The Mojokerto Regency Government has implemented various programs to reduce stunting rates, but there are still several issues that require attention. Coordination between sectors, adaptive policies, and community participation primarily contribute to this (Priyono, 2020). The ever-changing concept of governance emphasizes cross-sectoral cooperation, flexibility, and innovation when addressing various policy challenges. Stunting requires effective solutions that adapt to local conditions and needs, making this method highly relevant (Heny & Nurdin, 2018). Mojokerto Regency, with a dynamic government, can optimize cooperation between the government, business sector, educational institutions, and community to create more responsive and sustainable policies.

Mojokerto Regency faces several problems, including uneven information, a lack of resources in some areas, and a lack of public awareness of the importance of nutrition and sanitation (Jafa, 2022). Dynamic governance allows for a more adaptive approach through increased cross-sector coordination and the application of technology for real-time program monitoring and evaluation (Alim, 2022). In addition, this strategy allows the community to be directly involved in the decision-making process, resulting in a more targeted and sustainable stunting management program (Putra, 2020). Mojokerto Regency hopes to develop more flexible, innovative, and responsive policies to tackle stunting and create a more efficient public service system for the community's welfare by implementing the principles of dynamic governance. Therefore, this study aims to determine and analyze dynamic governance in overcoming stunting in Mojokerto Regency, East Java Province.

Material and Methods

Researchers use a qualitative approach because these methods describe actual field events during the research process. The data sources for this research are people, places, and papers. The data analysis techniques used are: data condensation, data display, and conclusion drawing/verification.

Results and Discussion

Dynamic governance in overcoming stunting in Mojokerto Regency, East Java Province

We conducted a study to determine the role of dynamic governance in addressing stunting in Mojokerto District, in close collaboration with the Health Office and the Population and Family Planning Control Office in the same area. We looked at how dynamic governance can help stop stunting in Mojokerto District, East Java Province. We used Neo and Chen's (2007) dynamic governance capability theory, which has three parts: thinking forward, thinking back, and thinking across.

Thinking ahead

Policy objectives

Minimizing the number of people suffering from stunting is the policy objective to overcome stunting. If stunting decreases, children in Mojokerto Regency will grow up healthily, which means we will have healthy and quality successors in the nation. The policy's objective to combat stunting is to

ensure that children grow up in optimal health and well-being, as indicated by the results of research conducted with several informants. The policy aims to reduce stunting below 14% by 2024, aligning with the national objectives. The stunting control policy also aims to reduce the number of stunting cases and produce a healthy, smart, and high-quality young generation in Mojokerto Regency. If stunting decreases, children in Mojokerto Regency will grow up healthy, which means we will have a healthy and quality young generation.

Development impact

According to the study's results, development can significantly reduce stunting rates and increase child productivity when implemented properly and sustainably. Simultaneously, the current regulations, which align with the regent's guidelines, have a positive effect, fostering collaboration among the different sectors responsible for managing stunting in Mojokerto Regency. The regulations encourage everyone to work together to combat stunting. The results of the last stunting measurement in August 2022 demonstrate the impact of existing development. Mojokerto Regency recorded 2,132 stunting cases in August 2022, accounting for 4.81% of the total measured children. The figure shows a significant decrease compared to the previous measurement in February 2022. The Mojokerto Regency Government continues to strive to reduce stunting rates through various programs and has succeeded in reducing the prevalence of stunting from 27.4% in 2021 to 9.6% in 2022. This effort involves cross-sectors and increased supervision of the health of pregnant women and adolescents.

Threats to new opportunities

The study's findings show that taking social and environmental changes and concentrating on effective interventions is the right way to determine policy direction. In addition, evaluate the results during the previous period and maximize the results during the next period. So far, efforts to overcome stunting have achieved their goals. In other words, the regulations related to handling stunting in the district and village are right on target; it's just a matter of the quality of the approach. The new approach involves adopting a more humanistic perspective, treating society as a subject rather than an object, to enable them to manage stunting on their own. We evaluate past initiatives, including those designed to educate infants in their first 1000 days of life (270 days during pregnancy and 730 days postpartum). We treat the prospective bride and groom for three months before the wedding to ensure their physical and mental readiness. In the field, 723 staff or family support teams work. In each team, there are three people: one midwife, one KB (family planning) cadre, and one PKK (family welfare development) cadre.

Influencing policy makers

The study's findings on dynamic governance in overcoming stunting in Mojokerto Regency demonstrate that policymakers play a central role in integrating various sectors through an adaptive and data-based approach. They develop cross-sectoral policies involving the health, education, and infrastructure sectors, and they use technology to monitor the prevalence of stunting in real-time. With this dynamic approach, policies become more responsive to changes in social, economic, and demographic conditions and focus on prevention and early intervention.

Thinking again

The study's findings on the application of dynamic governance in overcoming stunting in Mojokerto Regency demonstrate that policymakers are dynamically able to "think again" by evaluating and adjusting policy strategies based on changing conditions and new challenges. They revise policies based on data and field feedback, especially when economic, social, or public health conditions change. This approach allows policies to be more flexible and adaptive, ensuring the sustainability of reducing

stunting rates through strengthening coordination between institutions and utilizing technology. So far, there has been an increase in handling stunting, as evidenced by the results of the last measurement in August, which fell to 4,313 (16.4%) from 5,320. On the other hand, all parties involved in handling stunting work together well. We gather with our traditional community and religious leaders to find solutions. Efforts to handle stunting come not only from the top level but also from the community. To combat stunting, we must collaborate and provide welfare facilities.

Finding the cause

The results show that stunting management in Mojokerto Regency was successful due to close collaboration and cooperation from all parties, including the government, private companies, and the general public. However, the lack of optimal use of every existing program could have prevented its achievement. Last year, collaboration between each OPD and private organizations made stunting management possible. Then there was a problem. The community's awareness of the importance of addressing and managing stunting is relatively low. The community tends to be passive, only expecting assistance or incentives from the government. The lack of effective cooperation, coordination, and communication within the TPPS (Stunting Reduction Acceleration Team) prevented the achievement.

Reviewing prominent factors

According to the interview results, teamwork emerged as a significant achievement. However, the program's implementation remained suboptimal due to the community's ongoing lack of communication to combat stunting. The main factor is teamwork. The second factor is the involvement of students, the private sector, and the media.

Redesigning the program

The informant conveyed that the new program design maximizes community empowerment in handling stunting, thereby increasing the community's desire to actively participate in overcoming stunting. Each component—community, and government—can help combat stunting. At present, the focus remains on enhancing current programs and formulating a strategy utilizing contraceptive techniques.

Implementation of new policies

The informant stated that the program design could involve a continuation of the previous program, which involved community leaders sharing knowledge and insights to combat stunting. In the Health Office itself, there is a maternal and child mortality program number eleven. To reduce stunting, we improve health services for pregnant or giving birth women. The current program design incorporates seven contraceptive methods: medical surgery for women, medical surgery for men, EMD (for women who have not given birth for 8 years), implants (for women who have not given birth for 3 years), injections, pills, and condoms. By using the contraceptive methods above, there are no births, which means no stunted children, decreased birth rates, or infant mortality.

Thinking across

Finding the same program

The results demonstrate that private parties collaborate with the government. The Supplementary Feeding Program (PMT) provides additional food containing sufficient nutrition for infants and children who are vulnerable to stunting. Additionally, a Drinking Water Quality Improvement program strives to guarantee the community's consumption of healthy and high-quality drinking water. We can implement additional programs to improve access to health services. Improving the quality of education influences children's ability to learn and develop academically.

Reflecting on the program

The results are that in the implementation of existing programs and services for pregnant women, it was found that the community itself tends to be passive, meaning that there is no overall awareness to take part in this program. I regret to inform you that implementing this program in Mojokerto Regency may not be the best course of action, as many individuals, including employees, lack basic knowledge of information technology. If we implement the PMT program for stunted toddlers and maintain the quality of clean water, it will lead to a decrease in stunting cases. Additionally, the results indicate that building schools in remote areas will enhance the quality of education for children.

Program evaluation

Realizing the community's passive attitude motivates us to intensify our efforts in educating and preventing stunting within the community. Therefore, first of all, we need to improve the facilities and infrastructure, and, more importantly, build better human resources to support the use and application of information technology. We hope to meet the nutritional needs of stunted toddlers by providing PMT. The high quality of clean water will also impact the development of toddlers. We suggest conducting routine child health checks and improving the quality of children's education to help reduce stunting rates.

Connecting new ideas

The new idea is to increase participation or awareness of each component. We are connecting the idea of implementing information technology to combat stunting, specifically by recording in more detail and efficiently the number of children who are stunted. This will simplify the government's intervention efforts, facilitate the provision of assistance, and reduce the expenses associated with previous stunting management operations. In this small effort, funds will continue to flow to build integrated health posts and schools that are more suitable for children shortly.

Adapting to community needs

The results of interviews with informants reveal that understanding the community's doubts about the importance of addressing problems can lead to better socialization and empowerment. The community's needs determine how the government can better serve them. By maximizing the use of the information technology above, we can more effectively target stunting interventions for every toddler experiencing this problem. However, the community must also provide support for these initiatives. The Mojokerto Regency community's economic situation is still far from good. The state provides extra help, like PMT, and works to enhance the quality of drinking water. With fewer health services, recording and distributing assistance to the community is easier. As a result of receiving a quality education, children become more knowledgeable and competent.

Conclusion

Using interview, observation, and research documentation methods, we analyzed field problems and drew thinking-ahead conclusions about the role of government in combating stunting in Mojokerto Regency, East Java Province. Policy Objectives: Integrated health policies to prevent and address stunting; Development Impact: The quality of public health and welfare increases, which has a positive impact on productivity and economic growth; Threats to New Opportunities: Changes in demographics and economic conditions can disrupt the achievement of stunting reduction targets; Influencing Policy Makers: To reduce stunting, policymakers must take appropriate action.

Thinking again: finding the causes: And identifying the main factors causing stunting is crucial for more effective interventions. Revisiting the Salient Factors: Evaluating key factors contributing to stunting, such as nutrition and maternal health; Redesigning the Program: Adapting and improving the program based on new findings to increase effectiveness; Implementing New Policies: We are

implementing more responsive and data-driven policies to achieve the target of sustainable stunting reduction.

The Thinking across approach involves finding similar programs by identifying and aligning successful programs in other areas. Reflecting Programs: Reflecting on existing programs to identify strengths and weaknesses; Evaluating Programs: Conducting comprehensive evaluations to understand the impact and effectiveness of implemented programs; Connecting New Ideas: Integrating innovative ideas to improve existing policies; Adapting Community Needs: ensuring that the programs implemented are in line with the community's needs and local context.

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References

- Alim, B. N. (2022). Upaya mewujudkan dynamic governance pada pelayanan publik di dinas kependudukan dan pencatatan sipil kabupaten Sidoarjo. *Dialogue: Jurnal Ilmu Administrasi Publik*, 4(2), 343–361. https://doi.org/10.14710/dialogue.v4i2.14645
- Asnol, U. B. (2023). Faktor-faktor yang berpengaruh terhadap stunting di tujuh desa PKMD Kecamatan Sungai Tebelian Kabupaten Sintang Tahun 2023. Termometer: Jurnal Ilmiah Ilmu Kesehatan Dan Kedokteran, 1(3), 203–227.
- Ariyanti, C., Rahmadanik, D., & Widiyanto, M. K. (2024). Implementasi peraturan bupati mojokerto no. 66 tahun 2021 tentang percepatan penurunan stunting terintegritas di kecamatan Gondang. *Birokrasi: Jurnal Ilmu Hukum dan Tata Negara*, 2(3), 50–61. https://doi.org/10.55606/birokrasi.v2i3.1299
- Ernidayati, E., Irianto, S. E., Noviansyah, N., Budiati, E., & Karyus, A. (2022). Faktor-faktor yang berhubungan dengan kejadian stunting di wilayah kerja dinas kesehatan kabupaten Lampung Selatan. *Poltekita: Jurnal Ilmu Kesehatan*, 16(3), 376–383. https://doi.org/10.33860/jik.v16i3.1385
- Heny, A., & Nurdin, M. (2018). Menuju pemerintahan terbuka (Open government) melalui penerapan e-government. Jurnal Manajemen Pemerintahan, 5(1), 1–17.
- Jafa, B. J. (2022). Dynamic governance dalam mengatasi stunting di Kabupaten Manggarai Provinsi Nusa Tenggara Timur. Asdaf Kabupaten Manggarai, Provinsi Nusa Tenggara Timur Program Studi Administrasi Pemerintahan Daerah, 2022, 1–18.
- Jariah, N., Arfa, U., Fajhriani N, D., Sari, Y. N., & Januarti, U. D. (2024). Dampak stunting terhadap perkembangan kognitif anak usia dini. Jurnal Ilmiah Cahaya Paud, 6(1), 33–38. https://doi.org/10.33387/cahayapd.v6i1.7922
- Nadhiroh, S. R., Riyanto, E. D., Jannah, S. Z., & Salsabil, I. S. (2022). Potensi balita risiko stunting dan hubungannya dengan keluarga prasejahtera di Jawa Timur: Analisis Data Pk-21. *Media Gizi Indonesia*, *17*(1SP), 112–119. https://doi.org/10.20473/mgi.v17i1sp.112-119
- Neo, B.S., & Chen, G., (2007. Dynamic governance: Embedding culture, capabilities and change in Singapore, World Scientific Publishing Co. Pie. LTD
- Priyono, P. (2020). Strategi percepatan penurunan stunting perdesaan (Studi Kasus pendampingan aksi cegah stunting di Desa Banyumundu, Kabupaten Pandeglang). Jurnal Good Governance, 16(2), 149–174. https://doi.org/10.32834/gg.v16i2.198
- Rahman, H., Rahmah, M., & Saribulan, N. (2023). Upaya penanganan stunting di Indonesia. Jurnal Ilmu Pemerintahan Suara Khatulistiwa (JIPSK), VIII(01), 44–59.

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. https://doi.org/10.37817/ikraithhumaniora.v8i2.3113

Putra, D. T. F. (2020). Kapabilitas dynamic governance dalam pencapaian pertumbuhan ekonomi provinsi kepulauan Riau Tahun 2012 – 2017. *KEMUDI: Jurnal Ilmu Pemerintahan*, 4(2), 144–176. https://doi.org/10.31629/kemudi.v4i2.1460

Yadika, A. D. N., Berawi, K. N., & Nasution, S. H. (2019). Pengaruh stunting terhadap perkembangan kognitif dan prestasi belajar. Jurnal Majority, 8(2), 273–282.