

## Research Article

# The Effectiveness of Innovation-based Multisectoral Collaboration in Accelerating Stunting Reduction in Indonesia: The Strategic Role of Local Governments

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## Abstract.

Child stunting is a chronic nutritional issue with serious implications for human resource quality. Indonesia has set an ambitious target to reduce the prevalence of stunting among children under 5 to 14% by 2024 through an Accelerated Stunting Reduction Program involving multiple sectors. This literature review analyzes the effectiveness of innovation-based multisectoral collaboration in accelerating stunting reduction in Indonesia, highlighting the strategic role of local governments. Data from the last decade (2015–2025) demonstrate a significant downward trend in stunting prevalence, decreasing from approximately 37% (2013) to 21.6% (2022). This success has been supported by cross-sector collaboration encompassing both specific interventions (health and nutrition) and sensitive interventions (clean water, sanitation, education, and social protection). Program innovations such as the establishment of family assistance teams (Tim Pendamping Keluarga), integrated data dashboard utilization, the healthy kitchen program to overcome stunting (DASHAT), daycare initiatives, and foster parent movements underline the crucial role of local governments in coordinating stakeholders. This study finds that an integrated multisectoral approach, strengthened by local innovations and political commitment, effectively accelerates stunting reduction. Local governments play a strategic role as collaboration initiators, convergence program planners, and intervention implementers at the grassroots level. In conclusion, sustainable, innovation-driven multisectoral collaboration, actively involving local governments, the private sector, academia, civil society organizations, and communities are essential for further accelerating stunting reduction in Indonesia.

**Keywords:** stunting, multisectoral collaboration, innovation, local government, nutrition intervention, Indonesia

## 1. Introduction

Stunting, defined as impaired growth in children under five due to chronic malnutrition, has long been a significant public health challenge in Indonesia. Stunting refers specifically to a child's length or height being below standard for their age as a result of prolonged nutritional deficiencies [1]. Children who experience stunting are at increased risk of cognitive developmental delays, reduced learning capacity, higher vulnerability to chronic diseases in adulthood, and decreased economic productivity [2]. Globally,

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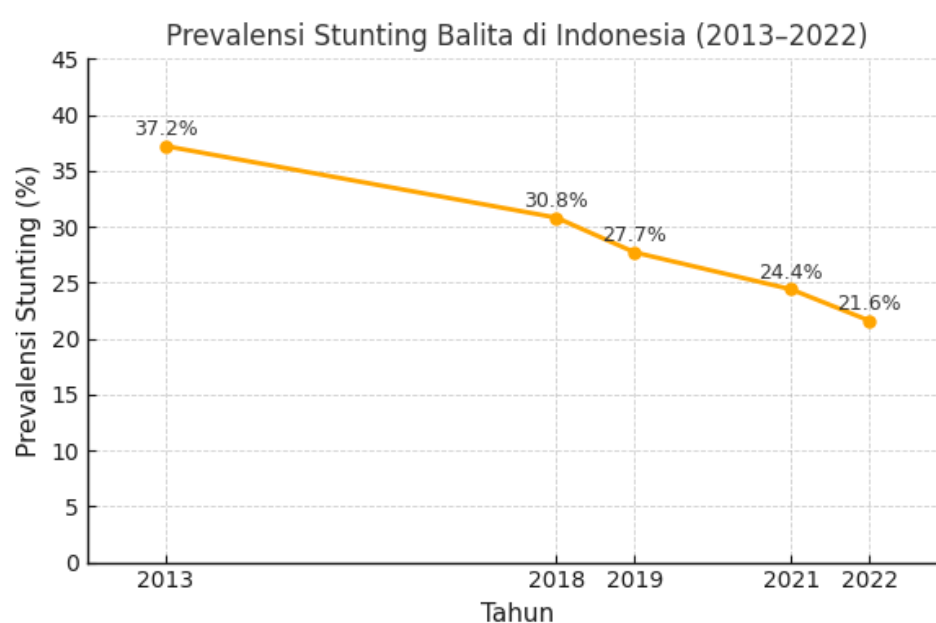
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stunting remains a critical issue; in 2022, an estimated 149 million children under five years of age were stunted [1]. In Indonesia alone, millions of children are affected by this condition. For instance, in 2020, approximately 6.3 million Indonesian children were estimated to be stunted, placing Indonesia among countries with the highest stunting burden globally.

The Indonesian government has prioritized accelerating stunting reduction as a national policy focus. This is reflected in several strategic policies, including the National Medium-Term Development Plan (RPJMN 2020–2024), which aims to reduce stunting prevalence to 14% by 2024 [6]. This target is more ambitious than the global World Health Assembly target of achieving a 40% reduction in stunting cases by 2025. National data trends indicate significant progress over the past decade. Based on national surveys, the prevalence of stunting among Indonesian children under five decreased from 37.2% (Riskesdas 2013) to 30.8% (Riskesdas 2018) [3]. Subsequently, a specialized survey conducted in 2019 (SSGBI) reported a prevalence rate of 27.7% [4]. The Indonesian Nutritional Status Survey (SSGI), conducted annually by the Ministry of Health, recorded further declines from 24.4% in 2021 to 21.6% in 2022 [2]. Figure 1 illustrates the downward trend in stunting prevalence among Indonesian children under five from 2013 to 2022. Notably, a sharp decline occurred after 2018, coinciding with the initiation of intensive government-led stunting reduction programs.



**Figure 1:** Trend of declining stunting prevalence among children under five in Indonesia, 2013–2022 (based on data from Riskesdas 2013 & 2018, SSGBI 2019, and SSGI 2021–2022).

Despite the declining trend (Figure 1), achieving the target of reducing stunting prevalence to 14% by 2024 remains a significant challenge. Vice President Ma'ruf Amin, serving as the Chair of the Steering Committee for Accelerated Stunting Reduction at the time, emphasized that a “business as usual” approach is no longer sufficient; stronger innovation and cross-sector collaboration are required to accelerate the reduction of stunting [5]. Stunting is a multidimensional issue that cannot be resolved by the health sector alone. Its root causes include nutritional factors (dietary intake and childcare practices), health aspects (access to maternal and child healthcare services), and non-nutritional factors such as environmental sanitation, clean water availability, education, poverty, and cultural practices [6]. Consequently, addressing stunting requires a multisectoral approach involving various stakeholders, including the central government, local governments, civil society organizations, businesses, academia, and local communities [6]. In Indonesia, this strategy is known as program convergence—integrating specific and sensitive nutritional interventions across sectors to target households at risk of stunting.

Local governments play a strategic role in accelerating stunting reduction initiatives. As frontline implementers of policy at the community level, provincial and district/city governments are instructed to establish Stunting Reduction Acceleration Teams (TPPS) and develop local action plans aligned with the national strategy. Presidential Regulation No. 72 of 2021 on Accelerating Stunting Reduction provides a framework for this multi-stakeholder collaboration and designates the National Population and Family Planning Agency (BKKBN) as the coordinating agency for field implementation. Against this background, this article reviews the effectiveness of innovation-based multisectoral collaboration in accelerating stunting reduction and evaluates the key role of local governments within the Indonesian context.

## 2. Methods

This study employed a systematic literature review approach, analyzing literature, reports, and secondary data related to stunting reduction in Indonesia over the past decade. The primary data sources included official publications from the Indonesian government (National Population and Family Planning Agency [BKKBN], Ministry of Health, National Development Planning Agency [Bappenas], and Coordinating Ministry for Human Development and Cultural Affairs [Kemenko PMK]), relevant regulations (presidential decrees and national policies), international organization reports (WHO,

UNICEF), research articles, and news from credible media outlets. Literature searches were conducted through online databases and academic search engines using relevant keywords in both Indonesian and English, such as “penurunan stunting Indonesia” (stunting reduction in Indonesia), “kolaborasi multisektoral stunting” (multisectoral collaboration in stunting), “inovasi percepatan stunting” (innovation in accelerating stunting reduction), and “peran pemerintah daerah stunting” (role of local governments in stunting reduction). Inclusion criteria encompassed documents published between 2015 and 2025 comprehensively addressing stunting programs in Indonesia. Collected data were analyzed using descriptive-qualitative methods. Literature findings were synthesized to evaluate the relationship between innovative multisectoral collaboration and the rate of stunting reduction, focusing specifically on the contributions of local governments. Information validity was ensured through triangulation across multiple sources, especially for quantitative data such as stunting prevalence rates and program achievements.

### 3. Discussion

#### 3.1. Current Conditions and Trends of Stunting in Indonesia

Indonesia has achieved significant progress in reducing stunting prevalence over the past decade. As illustrated in Figure 1, the national stunting prevalence has decreased from over 30% to approximately 21.6% in 2022 [2]. According to the Ministry of Health, this reduction implies that about 2.6 million children avoided stunting during the 2018–2022 period [3]. After 2018, the annual reduction rate reached 2.3 percentage points, approximately 1.5 times faster than during the period from 2013 to 2018 [3]. This achievement is closely linked to the implementation of the National Strategy for Accelerating Stunting Reduction initiated in 2018, as well as strengthened political commitment at the highest levels. President Joko Widodo himself has paid special attention to this issue, setting a challenging target of reducing stunting prevalence to 14% by 2024, emphasizing the importance of consolidating efforts from all sectors: “This target is achievable if everyone works together” [2]. The President’s directive highlights integrated interventions, encompassing clean water provision, sanitation, improved housing conditions, and better nutritional practices [2].

Despite the declining national trend, regional disparities remain a major concern. Provinces such as East Nusa Tenggara, West Sulawesi, and Aceh historically report

stunting prevalence higher than the national average [6]. Consequently, since 2020, the government has focused interventions on ten priority provinces with the highest stunting prevalence [6]. This has been accompanied by intensive support for hundreds of districts/cities identified as stunting hotspots. In 2023, the Vice Presidential Secretariat invited 14 provinces and 288 districts/cities to formulate accelerated stunting reduction action plans, particularly for regions with high or increasing prevalence [5]. This data-driven approach aims to ensure resources are effectively targeted toward the most vulnerable regions and population groups.

Nevertheless, achieving the 14% target by 2024 remains challenging. It requires an annual reduction of approximately 3.8 percentage points during the 2023–2024 period, significantly above historical trends [5]. Vice President Ma'ruf Amin emphasized that meeting this ambitious target will only be possible if all stakeholders strengthen their commitment, innovate, collaborate, and coordinate effectively in program implementation [5]. Rigorous monitoring was also stressed: stunting programs must be continuously monitored, evaluated, and reported comprehensively to identify barriers and implement timely corrective actions [5]. As 2024 marks the conclusion of the National Medium-Term Development Plan (RPJMN), additional efforts are needed to approach the established target [5]. Furthermore, the continuity of programs beyond 2024 must be maintained. The government has indicated that stunting reduction will remain a national priority within the RPJMN 2025–2029, targeting a prevalence of approximately 14.2% by 2029 [9]. This reflects Indonesia's long-term commitment toward achieving the Sustainable Development Goals (SDGs) target of around 10% stunting prevalence by 2030.

### **3.2. The Importance of Multisectoral Collaboration in Reducing Stunting**

Stunting is a multidimensional issue that requires multisectoral solutions. For instance, the Indonesian Ministry of Health has identified at least four major factors contributing to stunting: (1) poor childcare practices, (2) limited access to maternal and child healthcare services, (3) inadequate access to nutritious food, and (4) insufficient access to clean water and sanitation [6]. These factors involve different sectors, making it impossible for interventions to be implemented separately. Nutrition experts likewise emphasize that stunting is not merely a health issue but is closely linked to poverty, education, food security, and environmental conditions. Therefore, a whole-of-government and whole-of-society approach is essential.

Multisectoral collaboration in Indonesia is embodied through the Pentahelix model, involving government agencies, private sector entities, academia, community groups, and media [6]. The Minister of Health (2020) highlighted the necessity of adopting this Pentahelix partnership model to achieve policy and program convergence down to the village level [6]. Convergence refers to integrating various cross-sectoral interventions—including nutrition improvement, healthcare, sanitation, social protection, and education—into comprehensive programs targeting the same households. Local governments play a central role as orchestrators of convergence efforts within their jurisdictions. They formulate cross-sectoral regional action plans through their respective regional government agencies (OPD) and ensure alignment between national programs and local needs.

The national policy framework also strongly supports such collaboration. Presidential Regulation No. 72/2021 mandates the establishment of coordination teams for accelerating stunting reduction at central and regional levels. These teams include representatives from various ministries and institutions (such as the Ministry of Health, Bappenas, Ministry of Home Affairs, Coordinating Ministry for Human Development and Cultural Affairs, BKKBN) and non-governmental partners [5]. The national stunting strategy is structured around five pillars reflecting a comprehensive approach: (1) leadership commitment and vision, (2) behavior change campaigns, (3) central-local program convergence, (4) food and nutrition security, and (5) integrated monitoring and evaluation systems [5]. These pillars involve multiple sectors. For example, the food and nutrition security pillar engages the Ministry of Agriculture through programs promoting home gardens and local food diversification, whereas the sanitation pillar involves the Ministry of Public Works and Public Housing (PUPR) to provide clean water and proper sanitation facilities.

The positive impacts of multisectoral collaboration have begun to be evident. Evaluation studies demonstrate a clear convergence effect: districts that effectively implement convergence actions (such as situation analyses, integrated planning, and multi-stakeholder engagement) generally record greater reductions in stunting compared to districts where implementation has been suboptimal. The commitment of local leaders plays a critical role in this regard. Heads of districts who prioritize stunting reduction in their regional mid-term development plans (RPJMD) and actively mobilize cross-sectoral efforts tend to achieve better progress [9]. Budi Setiyono, Secretary of the Ministry of Population and Family Development (Kemendukbangga), emphasizes that if stunting management is not clearly articulated within the RPJMD, significant reductions

in prevalence are unlikely [9]. Consequently, the Ministry of Home Affairs (Kemendagri) and the National Development Planning Agency (Bappenas) now mandate that stunting reduction targets must be integrated into regional planning and budgeting documents.

Besides collaboration among governmental institutions, the involvement of the private sector and communities is also crucial. Vice President Ma'ruf Amin stresses the importance of engaging all stakeholders—including the private sector, religious organizations, NGOs, and community groups—in collective efforts to accelerate stunting reduction [5]. The private sector can contribute through Corporate Social Responsibility (CSR) programs focusing on nutrition and health, such as providing supplementary feeding or improving sanitation facilities. Non-governmental organizations and religious groups can play pivotal roles in education and family assistance programs. This multi-stakeholder collaboration ensures interventions are sustainable and deeply rooted within communities.

### **3.3. Program and Approach Innovations for Accelerating Stunting Reduction**

To accelerate stunting reduction, various innovations have been developed in programs and policies. These innovations include new approaches, technological applications, and institutional breakthroughs to enhance the effectiveness of cross-sectoral interventions.

1. **Technology-Based Target Mapping and Data Collection**One key innovative effort is the precise utilization of data. In 2021, the National Population and Family Planning Agency (BKKBN) conducted Family Data Collection, producing detailed data on families at risk of stunting (Keluarga Berisiko Stunting/KRS), including socioeconomic status, housing conditions, and sanitation [9]. This data formed an integrated database accessible to local governments to target interventions effectively. Approximately 23 million families were recorded, detailing conditions such as toilet ownership and access to clean water [9]. With this data, local authorities can focus programs, such as the renovation of unfit housing (Rumah Tidak Layak Huni/RTLH) or provision of clean water. However, a significant challenge remains regarding the seriousness of local governments in utilizing this data within local planning [9]. To monitor program effectiveness, the government also developed the Stunting Dashboard ([dashboard.stunting.go.id](https://dashboard.stunting.go.id)), displaying real-time indicators

from the national down to village levels. This digital innovation enables cross-sectoral stakeholders to share data and jointly track progress, thus increasing program accountability.

2. **Family Assistance Teams and Stunting Case Audits**Indonesia deployed over 600,000 field personnel through Family Assistance Teams (Tim Pendamping Keluarga/TPK) across villages nationwide. TPK teams, comprising midwives, PKK cadres, and family planning cadres, assist families at risk of stunting, provide nutritional education, monitor child growth, and ensure delivery of essential services (posyandu, immunization, etc.). This innovation is notable in its scale and integrated family-level service delivery. Additionally, the government conducts Stunting Case Audits, a policy innovation in which each stunting case is individually investigated by cross-sectoral teams (health, social, etc.) to identify service gaps and implement corrective actions. These audits help in formulating locally-specific solutions based on root causes—for instance, reinforcing reproductive health education if teenage pregnancy is identified as a key factor.
3. **Healthy Kitchen Program to Overcome Stunting (DASHAT)**DASHAT is an innovative BKKBN initiative leveraging local resources to meet the nutritional needs of families at risk of stunting. The program establishes community-based healthy kitchens (usually at village or sub-district levels) to provide nutrition education and demonstrate nutritious menus using affordable local ingredients. Hasto Wardoyo, Head of BKKBN, stated that DASHAT is enhanced by targeted family data collection and cross-ministry integration [7]. For example, BKKBN proposed redirecting the maternal-child supplementary feeding budget (traditionally biscuits) under the Ministry of Health to a Special Allocation Fund (Dana Alokasi Khusus/DAK) managed locally to purchase fresh local foods. Thus, village posyandu and TPK, supported by health center nutritionists, can provide nutritious meals for pregnant women, breastfeeding mothers, and toddlers using local ingredients (eggs, fish, vegetables). This initiative brings interventions closer to the community and educates families about the importance of animal protein and balanced nutrition. Antara News (2022) reported that DASHAT's enhancement involves partners like Tanoto Foundation, supporting nutritional education in coastal communities that traditionally underutilize abundant fish resources for child nutrition [7]. DASHAT has now expanded nationwide since 2021, becoming a flagship program of BKKBN for stunting reduction.



4. **Local Cross-Sector Innovations (Daycare and Rumah Pelita)** Several local governments have launched innovative, holistic approaches to address stunting. A notable example is Semarang City, establishing 11 daycare centers known as Rumah Pelita, specifically aimed at stunting interventions [9]. This initiative was commended by the Ministry of Population and Family Development (Kemendukbangga) for its creative approach to preventing stunting [9]. The daycare provides high-quality childcare services for disadvantaged families, including developmental stimulation (educational play) and free nutritious meals daily (Makanan Bergizi Gratis/MBG) [8]. Parents (especially mothers) can thus engage in employment or training without compromising child nutrition and care. This innovation generates dual benefits: short-term nutritional improvement for stunted/at-risk children, and long-term enhancement of maternal productivity, contributing to the demographic bonus [9]. Semarang's daycare initiative now serves as a national model and is listed among Kemendukbangga's five quick wins for 2025 [9], demonstrating how local creativity enriches national strategies.
5. **Foster Parent Movement and Private Sector Involvement** Another innovation involves engaging companies and institutions as "foster parents" for stunted children. BKKBN launched the Foster Parent Movement for Stunting Prevention (Gerakan Orang Tua Asuh Cegah Stunting/GENTING), connecting capable entities (state-owned enterprises, private companies, and organizations) to support children from impoverished areas. Recently, Kemendukbangga/BKKBN signed an MoU with PT Perkebunan Nusantara III (PTPN III) for such foster-parent programs [9]. Minister of BKKBN, Wihaji, stated that partnerships with corporations like PTPN aim to reach employee communities and surrounding areas needing support [9]. Companies with substantial workforces can prioritize stunting reduction efforts within their operational areas by providing supplementary food, regular health check-ups for employee children, or improving sanitation in employee housing. Other state-owned enterprises (BUMN) coordinated by the Ministry of SOEs also participate, including the Yayasan BUMN untuk Indonesia, targeting stunting reduction in disadvantaged regions. These steps exemplify innovative funding and support mechanisms beyond relying solely on state budgets.
6. **Integration of Reproductive Health and Family Planning Services** Another innovative multisectoral effort involves integrating stunting reduction programs with

reproductive health and family planning (KB) services. Early-age or late-age pregnancies and closely spaced births significantly contribute to stunting risks [9]. Therefore, BKKBN has intensified programs promoting delayed marriage age and post-delivery family planning services as key stunting prevention strategies. Policy innovations such as synergizing *Banggakencana* (Family Development, Population, and Family Planning) with the National Strategy for Stunting Reduction aim to address risk factors at the earliest stages (pre-conception). In several areas, regulations were issued requiring prospective couples to undergo nutritional counseling and assessments (upper-arm circumference and anemia status) three months before marriage, exemplifying integrated innovation involving local Religious Affairs Offices (KUA), Health Offices, and BKKBN.

Overall, the above innovations enrich the stunting reduction acceleration strategy. This innovation-based multisectoral collaboration has proven effective in enhancing the efficiency and reach of interventions. Nevertheless, challenges persist regarding standardization, scalability across regions, and funding sustainability. There is a need for forums to exchange best practices among regions, central government support for replicating successful models (such as Semarang's daycare), and mainstreaming these innovations into regulatory frameworks to ensure widespread adoption.

### 3.4. Strategic Role of Local Governments

Local governments play a strategic role as key drivers of multisectoral collaboration at the local level. Several crucial aspects of local governments' roles in accelerating stunting reduction include:

1. **Integration of Programs into Regional Planning** Local governments are responsible for incorporating stunting reduction as a priority within their regional planning documents (RPJMD and RKPD). As highlighted by the Ministry of Population and Family Development (Kemendukbangga), elected regional leaders must prioritize stunting in their five-year programs [9]. By integrating stunting targets into the RPJMD, local governments ensure that budget allocations and cross-sectoral activities annually support achieving these targets. For example, the Central Java Provincial Government set a stunting prevalence target reduction to 20.7% by 2024 within its RPJMD, closely monitoring annual progress [9]. Additionally, many regions have enacted local regulations (*Peraturan Bupati/Perwali*) on Accelerating

Stunting Reduction as a legal foundation to coordinate cross-sectoral regional agencies (OPD).

2. **Cross-Sectoral Coordination at the Implementation Level**At the operational level, local governments establish Stunting Reduction Acceleration Teams (TPPS) across provinces, districts/cities, sub-districts, and villages. TPPS teams are chaired by local leaders (governors, regents, or mayors) and comprise representatives from health departments, education departments, public works (water and sanitation), social services, regional planning agencies (Bappeda), community leaders, and other partners. TPPS serves as a regular coordination forum for planning, implementing, and evaluating convergence actions. Through TPPS, local governments ensure central programs—such as food assistance, sanitation improvements, scholarships—are consolidated and targeted to the same households. For example, Sumedang Regency developed the “Satu Data Stunting” system and coordination mechanisms down to the village level, which effectively accelerated stunting reduction due to the regent’s strong commitment and effective TPPS management (often cited as a national best practice).
3. **Strengthening Commitment and Capacity of Village Governments**Local governments also play a role in building the capacity of village governments for stunting management. Since 2018, Village Funds (Dana Desa) have been allowed to finance nutritional programs, healthcare, clean water, and sanitation interventions related to stunting. Local governments, through sub-district heads (Camat) and village facilitators, encourage villages to allocate at least 20% of Village Funds for stunting intervention activities, such as constructing family toilets, supplementary feeding in integrated healthcare posts (posyandu), and developing community nutrition gardens. Additionally, local governments train cadres in posyandu and Human Development Cadres (KPM) in villages to effectively detect and educate families early. This role is critical because service delivery points are at the village level, such as ensuring pregnant women regularly visit posyandu, child growth monitoring, and targeted social assistance. Success at the village level cumulatively impacts district and provincial achievements. Consequently, successful local governments typically have innovations at the village or sub-district level, such as thematic family planning (Kampung KB) for stunting or stunting-free villages.

4. **Innovator and Partnership Facilitator** Local governments hold a unique position as both innovators and facilitators of local partnerships. Semarang City, for example, initiated innovative daycare centers specifically designed for stunting interventions, supported strongly by the municipal government. Many other regions have also begun innovative programs: Southeast Sulawesi Province launched the Integrated Stunting Prevention Movement (Gerakan Cegah Stunting Terintegrasi/GENTING) [10], Ponorogo Regency targeted reducing stunting by 4% annually through breakthrough programs, and others. Local governments can facilitate partnerships with local universities for expert guidance, local media for public campaigns, and the local private sector through CSR programs. Engagement of local community and religious leaders is also initiated by local governments, for example through interfaith declarations supporting stunting prevention. These efforts require visionary local leadership. As Vice President Ma'ruf Amin emphasized, “ensure all parties, including non-government actors, collaborate closely in accelerating stunting reduction,” and local governments ensure this appeal materializes in their respective regions.
5. **Performance Monitoring and Accountability** Lastly, local governments hold responsibilities for regional-level monitoring and evaluation. Each quarter or semester, TPPS reports indicators (such as current stunting prevalence rates, service coverage) to the central government. If performance is lacking, the central government, through BKKBN and the Ministry of Health, provides additional support. Moving forward, there is a proposal for implementing reward and punishment mechanisms among regions regarding stunting programs [8]. Regions successfully reducing stunting could receive incentives (e.g., additional funding), whereas underperforming regions might receive reprimands or targeted support. This accountability requirement encourages local governments to be more proactive. Some provinces, such as West Java, have even developed regional dashboards to monitor stunting at district/city levels and organized inter-regional innovation competitions. Such initiatives demonstrate local governments’ active roles rather than passively awaiting central directives, emphasizing stunting reduction as integral to regional development responsibilities.

From the above explanation, it is clear that local governments significantly influence the success of accelerated stunting reduction. They serve as catalysts, translating national commitments into concrete community actions. Without local coordination

and innovation, even excellent central programs will miss their targets. Conversely, strong local leadership can optimize limited resources through effective cross-sectoral collaboration at the grassroots level.

## 4. Conclusion

This literature review affirms that innovative multisectoral collaboration effectively accelerates stunting reduction in Indonesia, particularly when local governments actively serve as primary drivers. The significant reduction in stunting prevalence to approximately 21.6% in 2022 demonstrates the positive impacts of cross-sectoral convergence approaches. Integration of specific interventions (health and nutrition) and sensitive interventions (clean water, sanitation, education, and economic development) targeting vulnerable families has been successfully implemented through the pentahelix partnership framework involving government, private sector, academia, civil society organizations, and media.

Program innovations, such as DASHAT (community-based nutrition fulfillment), daycare initiatives and Rumah Pelita (quality childcare for stunted children), foster-parent movements involving state-owned enterprises, data-driven family assistance (KRS-based data), and stunting case audits, have served as catalysts for acceleration efforts. The key success factor behind these innovations is the local government's commitment to support and adapt innovations in line with local contexts. Local governments strategically plan, implement, and evaluate stunting programs within their jurisdictions. Strong commitment from local leaders in prioritizing stunting reduction, effective cross-sectoral coordination via TPPS teams, and the courage to implement local innovations significantly distinguish regions in achieving stunting reduction targets.

Moving forward, sustaining the momentum and achieving even lower prevalence targets requires enhanced collaboration and continuous innovation. Recommendations derived from this review include: (1) Institutionalizing multisectoral convergence mechanisms down to the village level while ensuring adequate budget support through regional budgets (APBD) and village funds; (2) Enhancing the capacities of local and village governments in evidence-based data analysis and program planning, utilizing the integrated information systems already established; (3) Promoting the replication of successful innovations (e.g., Semarang's daycare model, DASHAT) to other regions with necessary local adaptations, supported by central government and development partners; (4) Strengthening partnerships with the private sector, religious organizations,

and universities for supplementary funding, expert contributions, and volunteer family assistance; and (5) Maintaining cross-administration political commitment to ensure stunting reduction remains a national priority beyond the RPJMN 2024 towards achieving the SDG target by 2030.

Through these strategic actions, Indonesia can accelerate the realization of a stunting-free generation, laying a strong foundation for human resource development toward Indonesia Emas (Golden Indonesia) in 2045. Innovative multisectoral collaboration, with local governments as its main driving force, will remain a key element on the path to achieving this ambitious goal.

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