



Collaborative Process in Efforts to Reduce Stunting Prevalence in Central Buton Regency

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ABSTRACT

Introduction: The government has implemented various efforts to address nutritional issues, one of which is the issuance of Presidential Regulation No. 42 of 2013. This regulation governs the National Movement for the Acceleration of Nutrition Improvement, involving collective efforts by the government and stakeholders. To achieve substantial results, stunting reduction efforts must be integrated and converge across multiple sectors. This study aims to describe the collaboration process in stunting reduction, which presents significant challenges in implementation.

Methods: A qualitative method with an interactive data-analysis approach was used in this study. The analysis involved three key stages: data reduction, data presentation, and conclusion drawing.

Results: The study revealed that the collaboration process begins with face-to-face dialogue, fostering trust and leading to a commitment to the process. This is achieved through mutual understanding and shared benefits. While face-to-face dialogue is progressing, the involvement of diverse stakeholders remains limited. Nevertheless, the actors involved demonstrate mutual trust, a shared vision, and commitment to a joint agenda. In Central Buton Regency, collaboration is essential to address stunting effectively.

Conclusion: The study concludes that while face-to-face meetings involve key parties, broader stakeholder participation, such as community leaders, is still lacking. However, mutual trust and a shared vision among existing participants highlight the importance of multisectoral involvement in reducing stunting prevalence



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INTRODUCTION

Indonesia is one of the countries with a relatively high prevalence of stunting compared to other middle-income countries. If this situation is not addressed, it could impact Indonesia's development performance, particularly in terms of economic growth, poverty alleviation, and inequality (Hisanuddin, Andriani, & Haisanuddin, 2023). If children are born healthy, grow well, and are supported by quality education, they will become a generation that supports the success of the nation's development. Stunting (short stature) or chronic malnutrition is another form of growth failure (Scheffler et al., 2020). The World Health Organization (WHO) defines stunting as a condition in which the body is significantly shorter, exceeding a deficit of two standard deviations below the median length or height of the reference international population (World Health Organization, 2014). Stunting can also be defined as a condition in which the growth of a toddler is impaired, resulting in a height shorter than that expected for their age (Mchome, Bailey, Darak, & Haisma, 2019). Thus, stunting has an impact on children starting in early life and will continue throughout the human life cycle (Ponum et al., 2020).

Stunting is caused by various factors both directly and indirectly. Direct factors include inadequate nutritious food intake and infectious diseases, whereas indirect factors include maternal caregiving practices, household food insecurity, and environmental health services (Dwiyanti, Riviwanto, & Edmon, 2024). The root causes of stunting include limited access to adequate healthcare services; poor family economic conditions; and social, cultural, economic, and political factors that influence the surrounding environment. All of these factors interact and contribute to stunting in toddlers (Martony, 2023). Based on the results of the Indonesian Nutrition Status Survey (SSGI) conducted by the Ministry of Health in 2022, 21.6 percentage of toddlers experienced stunting reached 21.6% (Setiyawati, Ardhiyanti, Hamid, Muliarta, & Raihanah, 2024). This figure exceeds the standard set by the World Health Organization (WHO), where only two out of ten children are expected to experience stunting. These data indicate that stunting remains a significant public health issue in Indonesia, as the prevalence rate still exceeds the 20% threshold considered high.

In the Central Buton Regency, stunting rates across sub-districts fluctuated over the last three years. The trend of stunting rates by sub-district showed that the most significant decrease in stunting prevalence occurred in East Mawasangka, dropping from 12.8% in 2022 to 2.3% in 2023. Consistent reductions also occurred in Central Mawasangka, where the rate decreased yearly, although not significantly, from 34.2% in 2021 to 33.6% in 2022 and then to 20.1% in 2023, marking a decrease of 13.5%. Addressing stunting requires effective and efficient actions tailored to the needs, including nutritional interventions divided into two parts: first, specific nutritional interventions contribute 30%, and second, sensitive nutritional interventions contribute a significant 70%. These interventions were related to the general and comprehensive lives of the community. The implementation of sensitive nutritional interventions essentially targets the general population without exception and includes non-health development activities such as providing clean water, poverty alleviation, and gender equality (Sukanti & Faidati, 2021).

Various efforts have been made by the government to address nutritional issues, one of which is the issuance of Presidential Regulation No. 42 of 2013, which governs the implementation of the National Movement for the Acceleration of Nutrition Improvement. Nutritional interventions, both direct (specific) and indirect (sensitive), need to be carried out jointly by ministries/agencies and other stakeholders. To have a significant impact, efforts to prevent stunting must be integrated and convergent, adopting a multisectoral approach. Therefore, the government must ensure that all ministries/agencies and development partners work together to prevent stunting in Indonesia. Prevention efforts should not only be at the central level, but must also occur at regional levels down to the village level (Hisanuddin et al., 2023).

In addition, to address the issue of stunting in Indonesia, the government issued a food and nutrition strategy policy through Presidential Regulation No. 83 of 2017 regarding the Formulation of the National Action Plan for Food and Nutrition (RAN-PG) and the Regional Action Plan for Food and Nutrition (RAD-PG). It aims to achieve adequate food and nutrition based on high-quality human resources with strong competitiveness. Furthermore, to enhance knowledge about providing healthy food and balanced nutrition, the government issued another policy through Presidential Instruction No. 1 of 2017 on the Healthy Living Movement (Germas) (Folensino, Asmiddin, & Islamy, 2023).

One way to accelerate the success of a program is through collaboration between the government and various actors. To address and manage public issues, it is necessary to involve not only the government but also non-governmental organizations, including local NGOs and traditional institutions. Public issues cannot be the sole responsibility of the government; instead, the involvement of all relevant and integrated actors is required (Hisanuddin, 2018). Therefore, researchers are interested in studying the problem of the collaboration process in efforts to reduce the prevalence of stunting in the Central Buton Regency.

This research focuses on understanding the dynamics and challenges of the collaboration process among various stakeholders in reducing the prevalence of stunting. Specifically, it examines the extent to which dialogue, trust-building, shared vision, and commitment are developed and sustained among actors such as government agencies, NGOs, traditional institutions, and community leaders. Additionally, the research explores barriers to multisectoral

involvement and identifies gaps in coordination that may hinder the effective implementation of integrated stunting reduction strategies. By addressing these aspects, the study aims to provide insights into improving collaborative efforts to achieve a significant and sustainable impact on public health in Central Buton Regency.

METHODS

This study employs a qualitative design. The reasons for using this design are as follows: (1) the researcher aims to obtain data directly from sources through interviews, observations, and document studies; (2) the researcher seeks to gain a clear picture from the results of interviews, observations, and document studies regarding the collaboration process in reducing the prevalence of stunting in Central Buton Regency.

This research was conducted in the working area of Central Buton Regency, selected due to the high prevalence of stunting, which reaches 41.6 percent. The participants in this study included six key informants: the Coordinator of Family Planning (KB) Extension Workers, a KB Extension Worker, a Nutrition Program Officer from the Public Health Center, a PKB Cadre, and a Community Leader. These informants were chosen using purposive sampling based on their direct involvement and expertise in programs related to stunting reduction, ensuring they provided rich, relevant, and diverse perspectives on the collaboration process (Huberman, 2014).

Data were collected using interviews, observations, and document studies. Semi-structured interviews allowed flexibility to explore informants' experiences in depth, while observations provided contextual insights into the collaborative activities. Document studies complemented these methods by examining official reports, guidelines, and relevant program documentation.

Ethical considerations were prioritized throughout the research. Informed consent was obtained from all participants, ensuring they understood the study's purpose, procedures, and voluntary nature of participation. Confidentiality was maintained by anonymizing personal information and securely storing data to protect participants' privacy. This ethical approach ensured the integrity and reliability of the research process.

RESULTS

The collaboration process begins with face-to-face interactions, which enhance the collaboration quality. Once face-to-face dialogue is established and conducted frequently, it can lead to the development of strong trust between collaborating parties once mutual trust is achieved on both sides (Sari, Sentanu, & Cahyasari, 2021). This will influence the commitment to the process; furthermore, when commitment to the process is established, a shared understanding will also form, which will discuss a clear vision and mission in identifying common issues. Ultimately, this will address shared problems and achieve mutual results between the collaborating parties.

Face-to-face dialogue

Face-to-face dialogue is a key requirement for the collaborative process. This can be understood as a follow-up meeting between stakeholders, which will result in mutual agreement. Everything related to collaboration begins initially and is built through face-to-face dialogue. This can create new opportunities for collaborating parties to achieve mutual benefits (Holler, Bavelas, Woods, Geiger, & Simons, 2022).

One informant revealed:

"...Face-to-face dialogues are often conducted in various activities, both formal ones like mini-workshops, where face-to-face meetings among stakeholders are held in the form of coordination meetings..."

This is supported by an interview with the SRC, who serves as part of the Family Assistance Team (TPK):

"...Every time there is an invitation for a mini-workshop meeting to evaluate and discuss stunting, I am always invited to participate, as there is much information I can share and

provide input to all participants about the issues occurring in the field..." (Interview on April 24, 2024).

A different perspective was provided by MRT, a Family Planning Extension Worker:
"...There was a face-to-face dialogue held in the hall of the Central Buton Regency office with cross-sector participants, but I was not officially invited; I attended to accompany the Family Assistance Team (TPK) cadre..." (Interview on March 25, 2024).

Similarly, DSB, a Nutrition Program Officer at the Puskesmas, stated:
"...For the face-to-face meeting, I was invited once, but never again after that." (Interview on April 16, 2024).

HRD, a community leader, responded:
"...I do not attend the face-to-face meetings because I am not a member of the stunting team, but sometimes I join when invited by the sub-district head." (Interview on April 19, 2024).

From the responses of the informants, it was concluded that face-to-face dialogue in the effort to reduce stunting has been conducted in several mini-workshop activities. However, not all members of the stunting task force team are invited; conversely, participants who always attend are not part of the official membership of the stunting reduction acceleration team. Meetings tend to be formalities, raising concerns that the objectives may not be achieved.

Building trust

Building trust in collaboration to reduce the prevalence of stunting is necessary so that collaborative actors can trust each other and share the same commitment, ensuring that their efforts achieve their expected objectives. Building trust is based on clear rules and regulations that govern all actions for stunting reduction. This was revealed in an interview with an informant.

"...I think the principle of togetherness means that in carrying out tasks, there is no suspicion, and what we prioritize is mutual trust..." (Interview on April 3, 2024).

Furthermore, the SMF, the Coordinator of Family Planning Extension Workers, shared his perspective:

"...I believe in mutual trust because this is our primary asset for being able to work together in the field; trust is essential, and there should be no suspicion..." (Interview on April 2, 2024).

MRT provided feedback on the process of collaboration and trust building, acknowledging that it is not easy as issues often arise, but these are quickly resolved and discussed together:

"Alhamdulillah, these stakeholders trust each other in everything. Even if there is a problem, it will be discussed together." (Interview on March 25, 2024).

This view is reinforced by DSB's statement:

"...Although not actively involved in the structure of the stunting reduction acceleration team, at least what I do as a nutrition program officer aligns with the same task and goal, which is handling stunting in Central Buton..." (Interview on April 16, 2024).

The information from the informants indicates that building trust in the collaboration process is based on a shared principle of togetherness while performing tasks without suspicion and is a basic asset for working in the field. Collaboration is not limited to achieving consensus; rather, it is an effort to build mutual trust and equality among stakeholders.

The researchers' observations show that stakeholders have a strong commitment to resolving stunting. However, in practice, this commitment is only apparent during meetings that discuss joint stunting-handling efforts. Afterward, each actor becomes busy with their own affairs and interests, seemingly forgetting the commitment that was built. The researcher also noted that fieldwork, such as data collection and direct handling in the field, is only conducted by cadres

without involving other actors, and the results are no longer discussed by the Stunting Reduction Acceleration Task Force. Consequently, any outcome obtained is considered to represent overall teamwork.

Commitment to Process

Commitment to the process is an essential part of collaborative governance and can facilitate collaboration. Therefore, when the commitment of actors is weak, whether at the upper or lower levels, it can be seen as a particular issue that may hinder the progress of collaborative governance (Grootjans, Stijnen, Kroese, Ruwaard, & Jansen, 2022).

One informant explained:

"...Without a clear commitment, nothing will ever be properly implemented, and once again, our activities must be carried out effectively. If there are any shortcomings, there is an evaluation process to address what is lacking, what is excessive, and what we should do..." (Interview on April 3, 2024).

Based on the interviews, some informants admitted that they did not understand the type of commitment built on the stunting issue. They mentioned that all tasks are carried out based on the duties and responsibilities assigned and will be executed to the best of their abilities. However, there are still challenges that need to be addressed and evaluated together.

SCR provided their feedback as follows:

"I do not know what kind of commitment there is. Clearly, with the tasks given to me, I can collect data, and, Alhamdulillah, I report the results to the task force and the Family Planning Extension Worker." (Interview on April 24, 2024).

Based on these interviews, it was concluded that building commitment is akin to building mutual trust so that the program can run effectively and successfully. Commitment to this process is a crucial indicator of the collaborative process. Commitment depends on trust and the willingness of the actors to respect each other's perspectives and interests. A sense of ownership of the process implies mutual responsibility for its progress.

Exchanging and sharing understanding

Grimm & Reinecke, (2024) stated that a shared understanding encompasses everything that both collaborating parties should comprehend, particularly regarding having a common vision and mission with the same objectives. Efforts to build a shared understanding of the collaborative governance of stunting reduction include conducting outreach for the entire community. This is also supported by several studies conducted on the topic (Grossman & Pupik Dean, 2019; King et al., 2019; Koskela et al., 2016; Satne, 2021) It is revealed that a shared understanding is an ongoing process where regular activities can foster shared comprehension.

This was expressed in an interview with one informant, who stated:

"...Of course, there is a shared understanding to unify our perceptions regarding a case. For instance, how the sub-district government views a case, how security perceives it, and so on. By sharing these different perspectives to solve a case, we come together and ultimately develop a common understanding to address it..." (Interview on April 3, 2024).

This was also supported by DSB's statement:

"Of course, we must understand what is being done, and afterwards, it's not just about understanding but also being able to apply it in real actions, such as disseminating information about stunting, educating the community about how stunting occurs. Especially now, not all of our community members know what stunting is." (Interview on April 16, 2024).

SRC's opinion on shared understanding in collaboration is as follows:

“To some extent, I already understand as a cadre. I always follow the developments in stunting and have even been asked to join a Zoom session about the meaning of stunting and how to handle it.” (Interview on April 24, 2024).

From these interviews, it can be concluded that, in team collaboration to discuss or resolve something, the process must begin with aligning perceptions. In this process, stakeholders can share information, ideas, and views, and build a better understanding of issues related to the joint program. Shared understanding is the process of aligning perceptions regarding the knowledge required to address an issue. At this stage, it is expected that an agreement will be reached on the final outcomes to be achieved in the collaboration and planning of the final result. A shared understanding can also build trust and commitment to performing the duties and functions of each stakeholder in resolving the issues at hand.

Observations indicate that stakeholders understand their roles, and a commitment has been well established. However, actions in the field are not yet fully adequate, and mutual understanding remains symbolic. As previously mentioned, a shared understanding requires follow-up actions such as disseminating information through counselling and education to the community. Field activities conducted by cadres are mainly data collection and assessment of the condition of homes at risk of stunting, which then serves as material for reports to the stunting task force. Further efforts were made by Puskesmas nutrition program officers through stunting interventions, such as providing supplementary food to pregnant women with chronic energy deficiency (pregnant women with KEK), malnourished toddlers, and promotional activities at toddler Posyandu sessions. The contributions of other stakeholders are almost invisible compared to the commitments made in meetings to discuss stunting reductions in the Central Buton Regency.

Intermediate Outcome

Intermediate outcomes are the outputs of efforts that can be identified and measured in a short period, and are part of the indicators of long-term results (Dal Mas, Massaro, Lombardi, & Garlatti, 2019).

In addressing stunting, intermediate outcomes are based on interview findings, such as:
“...We can identify factors that may lead to stunting, for instance, anemia in pregnant women and adolescent girls. This must be our concern, and we need to continuously monitor it by providing iron tablets...” (Interview on April 24, 2024).

However, a different perspective was shared by DSB, who stated:
“...A comprehensive awareness is needed, not only from the community but also from the cadres and health educators, to help provide education and awareness to prevent the triggers of stunting...” (Interview on April 25, 2024).

From the above interviews, it can be concluded that intermediate outcomes act as a bridge between inputs (nutritional interventions) and outputs (stunting reduction). Both play a role in determining the effectiveness of appropriate nutritional interventions and monitoring progress in stunting reduction, allowing for the control and early detection of stunting.

DISCUSSION

Face-to-Face Dialogue

In the collaboration process, communication is essential to reach a mutual agreement (Castañer & Oliveira, 2020). Moreover, communication is an important medium for personal development and growth within a social context (Muchacki, 2022). Through communication, we can grow and learn, discover ourselves and others, negotiate, express dislike, etc. The form of communication that occurs in a collaborative process is usually conducted through face-to-face dialogue with stakeholders involved in the collaboration. This face-to-face dialogue ensures information alignment and leads to mutual agreement. Moreover, face-to-face dialogue can serve

as a tool to build trust and commitment among stakeholders involved in the collaborative process (Gordon, McKay, Marchildon, Bhatia, & Shaw, 2020; Palm & Lazoroska, 2021).

Supervision and monitoring conducted through face-to-face dialogue are crucial to ensure the performance of the actors involved in stunting management. In this case, the Health Office, the Puskesmas, assisted by other stakeholders, conducts direct monitoring and evaluation to assess the situation on-site and to set references for future stunting management programs. Face-to-face dialogue in response to the shared desire to reduce stunting in the Central Buton Regency shows that the role of the community is still not significantly visible. This is evidenced by the interview results, which indicate a lack of community involvement in the dialogue process or meetings.

Several studies conducted by Badru, (2022); Davey, Elliott, & Bora, (2019); Gordon et al., (2020); Nilsson & Mattes, (2015) stated that face-to-face dialogue is fundamental in collaborative governance because, through face-to-face dialogue, initial communication can proceed in a two-way manner. In line with Kim, Kim, & Woosnam, (2023) stated that the collaborative governance process begins with face-to-face dialogue between actors and stakeholders. This was done to achieve consensus or mutual agreement. As a consensus-oriented process, it provides an opportunity for each actor to identify opportunities for mutual benefits. Face-to-face dialogue is conducted as a medium for negotiation to break down suspicions among actors when building collaboration, as the initial emphasis is on building consensus and not on regulating the benefits of each actor. Face-to-face dialogue is the process of building mutual trust, respect, understanding, and commitment to the process. There are many benefits to conducting face-to-face dialogue, such as:

Face-to-face dialogue helps to develop effective strategies for managing stunting. The government engages in dialogue with the private sector and the community to reach consensus and increase public participation in the collaboration process. Face-to-face dialogue also enhances community knowledge of stunting and the importance of addressing it. Seminars and training sessions conducted as part of face-to-face dialogue helped raise public awareness and boost participation in the collaborative process. Face-to-face dialogue builds trust and commitment among the stakeholders involved in managing stunting. This is crucial for achieving mutual agreement and increasing community participation in the collaboration process.

Building trust

Building trust is ongoing, where stakeholders have a strong commitment to resolving stunting management and share the principle of togetherness between the government and all stakeholders. This ensures that, in carrying out their duties, there is no mutual suspicion, and it serves as a fundamental asset for working in the field. Government transparency regarding applicable regulations is an effort to build public trust in the government (Bonsón, Torres, Royo, & Flores, 2012; Grimmelikhuijsen, Porumbescu, Hong, & Im, 2013; Kwoka & DuPey, 2020; Lourenço, 2015; Robinson, 2020).

Collaboration is not limited to achieving consensus; it is also an effort to build mutual trust among stakeholders (Douglas & Ansell, 2023). It is and trust among actors is the starting point in determining the success of the collaboration process. Trust can take the form of information or efforts from other stakeholders to achieve the objectives of collaborative governance.

Commitment to the process

Building trust is the commitment or agreement to carry out a specific process to achieve a desired common goal. Sharing commitments means that stakeholders depend on each other to address issues and solutions, recognizing that this process is jointly owned and open to gaining mutual benefits. The formation of a stunting reduction acceleration team through a decree and deliberations to reach consensus ensures that no party feels like a winner or loser.

In the context of Sorawolio, a commitment to jointly reduce the prevalence of stunting has been established; however, it is hindered by limited information and evaluation of the team's work results. This aligns with several studies (McNamara, Miller-Stevens, & Morris, 2020; Schoon et al., 2021; Scott & Merton, 2021; Wang & Ran, 2023; Wondirad, Tolkach, & King, 2020) The level of commitment among stakeholders is a determining factor in the success or failure of Collaborative

Governance; however (Fassin, 2012), It is stated that stakeholders do not want their interests to be ignored or merely secure their position. On the contrary, commitment is the belief that the collaborative process will create benefits for each party and serve the public interest (Islamy, Alwi, Haning, & Allorante, 2017).

Exchanging and sharing understanding

Every organization or community group with a shared interest in achieving a specific goal is certainly based on a clear and challenging vision and mission for the future. This also applies to managing issues involving various stakeholders. Building a shared vision and mission can motivate individuals, both as individuals and as part of a group, to recognize and understand themselves as part of that group (Islamy et al., 2017).

Sharing an understanding of the existing problems, vision, and mission among collaborative participants can make collaborative activities more effective. A vision contains the dreams, aspirations, or core values of an organization, whereas a mission outlines the processes or steps that must be taken to achieve that vision. Therefore, discussions on efforts to reduce the prevalence of stunting should start from the smallest steps to obtain accurate information, such as deliberations, cadre meetings, and stunting discussions.

Intermediate Outcome

In an effort to reduce the prevalence of stunting, intermediate outcomes (intermediate achievement indicators) include several variables that act as intermediaries between input and output. These variables include anemia in pregnant women and adolescent girls, low birth weight (LBW) in infants, exclusive breastfeeding, diarrhea in children under two and under five, worm infections in toddlers, and malnutrition in toddlers (Syafei, 2017).

In the Central Buton Regency, steps to detect and prevent an increase in the prevalence of stunting are taken by recording all pregnant women and adolescent girls who are at risk of anemia, as well as providing education on the importance of exclusive breastfeeding and Clean and Healthy Living Behavior (PHBS). This is in line with research findings that state that infants require sufficient breast milk and food intake to improve their nutritional status during growth. If intake is inadequate, it will hinder the child's growth and development, even into adulthood. Stunting in children is a consequence of an unsanitary environment and a lack of knowledge about the implementation of clean and healthy living behaviors (PHBS) (Budge, Parker, Hutchings, & Garbutt, 2019; Islam, Rana, & Mohanty, 2021; Marlina, Triana, & Fanora, 2022; Sjahrudin, Nugroho, Sembiring, Bangkara, & Fatmawati, 2022; Yunitasari, Pradanie, Arifin, Fajrianti, & Lee, 2021).

Implications for Public Health

Efforts to reduce stunting require a multisectoral collaboration involving the health, education, agriculture, and social welfare sectors. Building strong partnerships among government agencies, NGOs, the private sector, and local communities is essential for addressing the multifactorial causes of stunting. Community engagement plays a critical role in identifying stunting cases and implementing preventive measures. Involving local leaders, cadres, and community members in decision-making and program execution ensures culturally appropriate, locally accepted, and sustainable interventions. Establishing trust and transparency among stakeholders through open communication, shared goals, and mutual respect facilitates resource sharing, better coordination, and effective interventions.

Capacity building through training, education, and awareness programs equips health workers, cadres, and community members with the knowledge and skills necessary for improving maternal and child health. Sharing best practices across regions further strengthens capacity. Robust monitoring and evaluation systems are vital to track progress, address challenges, and refine strategies through regular evaluations and data-driven decisions. Addressing intermediate outcomes, such as anemia in pregnant women and adolescent girls, promoting exclusive breastfeeding, reducing diarrhea incidence, and improving sanitation, is crucial for mitigating stunting risks early.

Policy advocacy is essential to ensure political commitment and allocate sufficient resources for stunting prevention. Collaborative governance should prioritize policies that create enabling environments for stakeholders to work together effectively. Developing integrated action plans with clear roles and responsibilities ensures coordinated efforts. These plans should focus on sustainable, community-driven programs supported by strong government policies to address the root causes of stunting. By implementing these strategies, Central Buton Regency can adopt a comprehensive, community-centered approach to reduce stunting and improve the overall health and well-being of its population.

Limitations and Cautions

Based on my observations, although there have been efforts to involve various stakeholders, active participation from all parties is still lacking. Certain sectors, such as private entities or local community leaders, often do not fully engage in the collaborative process. This lack of involvement creates gaps in the coordination and implementation of stunting prevention strategies, which may hinder the program's success. From my perspective, the availability and allocation of resources remain significant challenges. In many cases, funding, manpower, and infrastructure are insufficient or unevenly distributed, especially in remote or hard-to-reach areas. This limitation restricts the effectiveness of interventions and often places additional strain on local actors.

Through direct interaction with stakeholders, it is clear that differing levels of knowledge and capacity among local cadres, community members, and government officials can lead to inconsistent implementation of programs. Although training and education initiatives are essential to address this issue, they often require significant time and resources, which may not always be readily available. Collaboration requires trust among stakeholders, but in practice, building such trust is a complex process. I have observed that differing interests and priorities among stakeholders often lead to conflicts or delays in decision-making. This issue is particularly pronounced when disagreements arise over goals, roles, or resource allocation, which can disrupt the momentum of the collaborative process.

Based on field experiences, monitoring and evaluating stunting reduction efforts remains inconsistent. There is a lack of standardized systems for data collection and reporting, making it difficult to assess the effectiveness of interventions reliably. Without consistent evaluation, adjustments to improve the strategies cannot be made effectively. From my interactions with local communities, I have found that cultural and social factors often hinder the acceptance and implementation of health interventions. For instance, traditional dietary habits or misconceptions about nutrition can limit the impact of educational campaigns, emphasizing the need for culturally sensitive approaches in program design.

Recommendations for Future Research

Future research should explore and compare various multi-sectoral collaboration models to determine which frameworks are most effective for stunting reduction, particularly within the cultural and socioeconomic context of Central Buton Regency. Key areas include examining factors that motivate or hinder stakeholder participation, assessing strategies to enhance engagement, and evaluating the impact of community-based initiatives such as nutrition education and food security programs. Additionally, understanding the dynamics of trust-building among diverse actors—government agencies, NGOs, and communities—and identifying practical methods to strengthen relationships through transparency, communication, and inclusive decision-making will be essential to support sustainable collaborative governance.

CONCLUSION

The findings of this study indicate that face-to-face meetings involving multiple stakeholders have been conducted, showcasing mutual trust and a shared vision for addressing stunting in Central Buton Regency. While the involvement of other sectors, such as community leaders, is not yet evident, stakeholders have demonstrated a commitment to a joint agenda and a shared

understanding of the issue. However, concrete actions from stakeholders remain limited, with most on-the-ground activities being carried out by Family Planning Extension cadres.

Several aspects require greater attention from the government and other stakeholders. These include strengthening the effectiveness of stunting prevention outreach programs to ensure broader community engagement, providing comprehensive funding, and offering incentives to encourage tangible actions from all parties. Moreover, collaboration and coordination between implementing agencies must be enhanced to ensure effective convergence efforts. Cross-sectoral involvement also needs to be facilitated by ensuring open access for healthcare service providers to foster improved cooperation.

It is recommended that policymakers and local government authorities establish clear mechanisms for engaging all relevant stakeholders, including community leaders, to broaden participation in stunting reduction initiatives. The government should increase funding allocations for stunting prevention efforts and provide financial incentives to motivate active involvement across various sectors. Furthermore, it is essential to develop policies that strengthen coordination between government departments, non-governmental organizations, and local stakeholders.

Author's Contribution Statement: The author takes full responsibility for the content and accuracy of the research findings, ensuring that the work contributes significantly to understanding and improving collaborative efforts in stunting reduction in the Central Buton Regency.

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