

IMPLEMENTATION OF THE PRINCIPLES OF GOOD GOVERNANCE IN COMBATING STUNTING IN THE JABON DISTRICT, SIDOARJO REGENCY

Alifa Asta Sabilla

alifaasta@gmail.com

Public Administration Department of UPN Veteran East Java

Arimurti Kriswibowo

arimurti.adne@upnjatim.ac.id

Public Administration Department of UPN Veteran East Java

ABSTRACT

Jabon District is one of the sub-districts in Sidoarjo Regency which is still facing the problem of high stunting cases. Many factors can cause stunting, low access to nutritious food, vitamins, poor parenting, and low health awareness. The impact arising from stunting is the low quality of human resources, because Not only does it inhibit physical growth (stunted/stunted), but also inhibits brain development and low-thinking ability, thereby inhibiting future demographic bonuses. To overcome this, good governance actors (government, private sector, community) are needed in its implementation. These actors, namely the government of the Sidoarjo Regency Health Service and the Jabon Health Center are collaborating with other actors from the private sector (Perusahaan Gas Negara) and the community (Umsida). This study aims to determine the implementation of the principles of good governance in tackling stunting in Jabon District, Sidoarjo Regency. There are 8 principles of good governance according to UNDP, namely: 1. participation, 2. rule of law, 3. transparency, 4. responsiveness, 5. oriented to consensus, 6. justice, 7. effectiveness and efficiency, 8. accountability, 9. strategic vision. The type of research used is descriptive qualitative. The result of this research is that the implementation of principles of good governance has been implemented although there are still some principles that are not optimal. The conclusion of the implementation of the principles of good governance according to UNDP has been implemented and is still ongoing, but the resulting impact has not been maximally felt.

Keywords: *Good Governance, Prevention of Stunting*

A. INTRODUCTION

Indonesia is the fourth most populous country in the world after China, India, and the United States. The population of Indonesia to date has reached 269,000,000 people (Worldometers, 2019). As the population in Indonesia continues to increase, this is a challenge in itself regarding the quality of the human resources of Indonesian citizens. This is because human resources are the potential that exists in humans to realize their role as useful social beings. By paying attention to the quality of human resources, adaptive and transformative

social creatures can manage themselves and others. This is in line with an opinion (Sari, Heriyanto, & Noviardy, 2015) said that a quality human being is a person who always thinks positively, thinks about the future, and has the ability to himself. Therefore it is very important to pay attention to, manage the quality of human resources, especially the quality of human resources of Indonesian citizens so that they can contribute to Indonesia.

The form of creating quality human resources is by paying attention to health aspects. This is in line with an opinion (Apriluana & Fikawati, 2018) who said that one form of realizing human resources is paying attention to health factors. By paying attention to the health aspect, it will have a broad impact on other aspects of life, such as the level of economic success, the political system, public policies, and education regarding public awareness in implementing a healthy lifestyle. This is in line with what is mandated in Law Number 36 of 2009 concerning Health, which states that health is a state of health, whether physically, mentally, spiritually, or socially, which enables everyone to live productively socially and economically. So that every country must pay attention to the health of its citizens because the health factor itself can determine a developed or developing country.

Public health issues that are the main focus of the Ministry of Health of the Republic of Indonesia are the handling of stunting and maternal mortality (kesmas.kemkes.go.id, 2020). Stunting is a condition of failure to thrive in children under five due to chronic malnutrition, especially during the first 1,000 days of life (HPK). Stunting is a major threat to the quality of human resources, as well as a threat to the nation's competitiveness. This is because children who are stunted, not only have their physical growth disturbed (stunted/stunted), but also interfere with brain development, which of course will greatly affect ability and achievement at school, productivity, and creativity at productive ages. Children are the nation's assets in the future. You can imagine, what will the condition of Indonesia's human resources be in the future if there are currently many Indonesian children who suffer from stunting. This nation will not be able to compete with other nations in facing global challenges. (antaranews.com, 2018).

According to (Saputri & Tumangger, 2019) Efforts to prevent stunting are urgently needed, for example using massive outreach, its impact, and efforts to overcome it. Government initiatives, policy choices, stakeholder mobilization, public commitment, and resource allocation, application of sanctions, business continuity, and learning and adaptation are the dimensions of political will (Azizah, Mahmudah, & Kriswibowo, 2020). East Java Province has not been spared from various serious problems and must be addressed immediately, including one of which is the high number of stunting cases in East Java throughout Java.

Table 1. Cases of Stunting in Java Island

Territory	Prevalence (%)
East Java	32.8
Central Java	31.2
West Java	31
Banten	23.2
Special Region of Yogyakarta	21.4
DKI Jakarta	17.1

Source: Data processed by researchers based on Riskesdas 2018, 2020

The national prevalence for chronic malnutrition (stunting) based on the results of Basic Health Research (Riskesdas) which is conducted every 5 years, in 2018 for children aged 0 to 59 months in East Java reached 32.8%. This figure is higher than the national stunting prevalence, which is 30.8%. So that the problem of stunting needs special attention because its prevalence is still high and does not comply with the standards set by the World Health Organization (WHO), which is 20%. To be able to map the poor condition of stunting reduction in East Java, it is necessary to look at the data below. East Java recorded several areas of stunting cases in East Java. A total of 344,019 children under five suffer from stunting in East Java, as follows:

Table 2. Areas of Stunting Cases in East Java

Regency / City	Number of Toddlers
Sidoarjo	24,439
Banyuwangi	21,266
Sampang	19,309
Pasuruan	18,530
Probolinggo	17,906
Blitar	16,507
Malang	13,598
Nganjuk	13,345
Kediri	13,313
Jember	12,607
Jombang	12,111

Source: Data processed by researchers based on (e-PPGBM) radar surabaya.jawa pos.com, 2020

Based on the electronic data recording and reporting of community-based nutrition (e-PPGBM) above, it can be seen that Sidoarjo Regency is the region with the highest number of stunted children in East Java. This is also supported by data obtained by the author from the Sidoarjo Regency Health Office, namely that this year the Sidoarjo Health Service prioritizes areas that need more special attention regarding the problem of stunting. It can be seen that the coverage area of the stunting reduction intervention program in each sub-district which is the focus of the Sidoarjo Regency Health Office is as follows:

Table 3. Coverage of Stunting Reduction Areas

Sub-district	Number of Toddlers
Jabon	494
Candi	316
Buduran	208
Gedangan	448
Balombangendo	94

Source: Sidoarjo Regency Health Office, 2020

The data above shows several sub-districts along with the number of existing stunting cases. It can be seen that Jabon Subdistrict is a sub-district with the highest number of children under five with stunting, with 494 children under five. So it can be said that the case of stunting in Indonesia still needs seriousness in its handling. Stunting prevention is a form of effort that must and must be carried out by the government concerned, starting from the central, provincial to village levels. If there are no preventive efforts, the prevention of stunting can be fatal. According to (Helentina, 2019) stunting is a condition of failure to thrive in infants (0-11 months) and children under five (12-59 months) due to chronic malnutrition, especially in the first 1,000 days of life. Stunting is caused by multidimensional factors, including poor nutrition patterns, including the mother's lack of knowledge about health and nutrition before pregnancy and after delivery. Therefore, efforts are needed to prevent stunting, namely through the 1000 HPK movement. 1000 HPK starting from the time the fetus is 0 to 24 months old. The main objective of 1000 HPK is to prevent stunting with specific nutrition interventions aimed directly at target groups, namely young women, prospective brides, pregnant women, nursing mothers, and children aged 0-24 months. (Muthia, Edison, & Yantri, 2019).

Several studies have shown the risk caused by stunting, namely decreased immunity, so that children get sick easily (Norcahyanti, Pratama, & Pratoko, 2019), slow down brain development, causing a decline in cognitive abilities of children where intelligence levels are low, mental growth is stunted (Budiastutik & Rahfiludin, 2019), as well as an increased risk of degenerative diseases (Saputri & Tumangger, 2019). Considering the importance of prevention efforts, stunting prevention, the involvement of all parties, both individuals, cannot depend on the government alone, because stunting prevention is a serious problem that must be handled by all parties, both from the government, private, and community sectors.

Good governance or good governance is the most prominent central issue in the management of public administration in the current reform era (Sasundame, Tulusan, & Kalangi, 2016). Good governance arises due to the ineffective performance of the government, which has been trusted to carry out public affairs. Good Governance is the hope of society that demands the government to carry out good governance. This is in line with an opinion (Spiteri & Briguglio, 2018) who said "Highlight the importance of good governance in fostering trust in government" which means the importance of highlighting good governance in fostering trust in the government.

In this model, the government (state) is not the only actor, but there are two other actors outside the government, namely the private sector (businesses) and the community (civil society). According to (Rohman & Hardianto, 2019) The government must carry out services in terms of the maximum needs and desires of the community, but along with the times, the government cannot be alone but must involve other parties, namely the private sector and the community. This is done to be effective and efficient. So that the involvement of good governance actors is needed to optimize the implementation of stunting reduction.

The principles of good governance according to the UNDP (United Nations Development Program) in (Nugroho, 2018) There are nine principles, namely: participation, rule of law, transparency, responsiveness, consensus orientation, equity, effectiveness, and efficiency, accountability, strategic vision. (Budiarti & Suswanta, 2020) said, "Good Governance practices in this area should also be implemented well". So the implementation of the concept of good governance by involving stakeholders (government, private sector, community) should be implemented optimally and meet the needs of the community.

Therefore, the researcher will focus on the principles of good governance in tackling stunting and the researcher wants to fill in the research gaps that have never been done before regarding the implementation of the principles of good governance in the prevention of stunting in Jabon District, Sidoarjo Regency.

B. LITERATURE REVIEW

a. Public Policy

According to (Sapru, 2017:3) said, that The term "public policy" comprises two words. In the first instance, it is important to understand the concept of "public". We often use such terms as "public interest", "public sector", "public opinion", "public health" and so on. Although a public policy is made by a government in response to public problems and demand, it may be implemented by public or private actors or both. Public policy is ultimately made by the government even if the ideas or opinions come from the private actors or through the interaction between government and non-governmental forces. Next (Anggara, 2012:501) said, that policy is an attempt to understand and interpret:

1. What the government did (or didn't do) on an issue.
2. What can cause or can affect it.
3. What are the effects and impacts of these public policies?

b. Good Governance

According to (Rohman & Hardianto, 2019:74), The term government means that the role of government is more dominant than other parties in the exercise of government power. Meanwhile, the term governance refers to how the government in a country can distribute the administration of power, management of resources, and how to distribute the management of problems faced by society to other parties outside the government. In line with opinion (Sumaryadi, 2016:11) said governance has another meaning, not just government activities (government), but also activities outside the government. So it can be said that Good governance requires the public and the private sector to participate in the development process, as well as become a counterweight and supervisor, control

over various government policies in developing and realizing the principles of good governance. In good governance, there are several principles of good governance. According to UNDP (1997: 17) cited by (Nugroho, 2018:381), good governance has 9 main principles, as follows:

1. Participation

Its meaning is that all citizens have a voice in decision-making or other words are involved, either directly or through institutions that represent their interests.

2. Rule of Law

The existence of a rule of law and law enforcement that is fair without discrimination

3. Transparency

There is information disclosure, ease of information, clarity of information for the public who need related information

4. Responsiveness

There is speed /sensitivity in serving the public

5. Consensus Orientation

There is a joint effort between different interests for better implementation

6. Equity

There is no discrimination in providing services to the public

7. Effectiveness and efficiency

Of the public service process must be right on target by utilizing existing resources

8. Accountability

Stakeholders must be accountable for their performance

9. Strategic Vision

Stakeholders must have a broad and far-sighted view and tailored to the needs as needed

c. Stunting

Stunting or stunting is a condition where the child's height is short or very short when compared to children his age. This condition is measured by the length or height of the child growth standards from the WHO. According to (Olsa, Sulastrri, & Anas, 2017) defines a short or very short stature based on the index of Body Length for Age (PB / U) or Height for Age (TB / U) with a threshold (z-score) between -3 SD to <-2 SD. Meanwhile, according to (Teja, 2019), stunting or failure to thrive is a condition that describes a chronic undernutrition status during a child's growth and development since the beginning of life.

Lack of nutritional intake during the golden period or lack of nutritional intake obtained during the first 1000 days of life (HPK) is one of the causes of stunting. So it is necessary to have a 1000 HPK program to tackle stunting. The 1000 HPK movement is an effort to improve nutrition during pregnancy until the child is two years old.

C. METHOD

The research method used in this research is descriptive and qualitative. This study aims to describe the implementation of the principles of good governance in tackling stunting in Jabon District, Sidoarjo Regency. Furthermore,

according to (Suharsaputra, 2018:181) qualitative research or naturalistic inquiry is a research procedure that produces descriptive data in the form of written or spoken words from people and observable behavior. Another opinion (Sugiyono, 2018:9) states that qualitative research methods are research methods based on the philosophy of positivism. used to research natural objects where the researcher is the key instrument. To obtain data at this writing, research used several data collection techniques, namely observation, interviews, documentation, and triangulation. The informants in this study were selected using a snowball sampling technique consisting of the Head of Family Health and Nutrition of the Sidoarjo Regency Health Office, the Head of the Jabon Health Center Nutrition Installation, the Jabon Health Center Nutrition Executor, the UMSIDA community group intermediary, the Village community in Jabon District, the private intermediary of the State Gas Company.

So that in this study, the author aims to present data, analyze data, and describe a phenomenon. Then the author also tries to describe, analyze and interpret the "Implementation of the Principles of Good Governance in Combating Stunting in Jabon District, Sidoarjo Regency".

D. EXPLANATION

Based on the results that the researchers found in the field and based on the theory of the principles of good governance according to UNDP in (Nugroho, 2018) as follows:

a. Participation

In the concept of good governance according to (Nugroho, 2018:381) participatory or participation refers to the extent to which the government provides opportunities for stakeholders (private and public) to participate either directly or indirectly which can affect implementation in the field. In this study, the application of the principle of participation is described in two indicators, namely: (a) the involvement of stakeholders in the implementation of the 1000 HPK program, (b) what is the form of stakeholder involvement in the implementation of the 1000 HPK program. Each stakeholder participates differently, the government here is no longer present or not, willing or not involved in the implementation of the 1000 HPK program, but it is their duty and obligation as the main stakeholder in the 1000 HPK movement.

Sidoarjo Regency Health Office through the field of family health and nutrition has an innovation called SI CANTI (Sidoarjo Prevents Maternal and Child Mortality). Through this innovation, the Sidoarjo Health Office seeks to prevent stunting, because this innovation can monitor, condition pregnant women until their babies are born healthy, not stunting. In implementing innovation, SICANTI does not only involve the Sidoarjo Regency Health Office but also gets support from the private sector, namely CV. Natusi, then there was the involvement of NGOs from USAID Jalin, and the community from the University of Muhammadiyah Sidoarjo (Umsida). There are different roles in the prevention of stunting between the Sidoarjo Regency Health Office and the Jabon Health Center. If the Sidoarjo Regency Health Office puts more emphasis on management functions because it covers several sub-districts in Sidoarjo Regency.

Meanwhile, Jabon Health Center emphasizes more on service.

Furthermore, the involvement of the Jabon Health Center in the implementation of the 1000 HPK program is by creating the SEJIWA innovation (Save the Soul of Women and Children). This innovation is only available at the Jabon Puskesmas. In implementing innovation, SEJIWA involves cooperation across programs and sectors. Sejiwa itself has 2 program objectives, the first is Sejiwa Catin, Save the Soul of Women and Children through Bride-to-be counseling, this program aims to provide direction to the prospective bride and groom to be provided with education about reproductive health, pregnancy and to detect early whether from the prospective mother or Father, is there a disease or not, because if there is a disease, the sperm or egg cells produced will not be optimal and have an impact on the health of the fetus. This program focuses on pregnant women who meet the criteria of 8 thumbs up, namely: 1. The First contact is less than 12 weeks of gestation, 2. ANC /Interprofession, 3. Have potential blood donors, 4. Have participated in classes for pregnant women, 5. Minimum ANC is 4 times, 6. Not including 4T (too old, too young, too many children, too close to the children), 7. Attached a P4K sticker at home, 8. Have a BPJS (Jabon Health Center Faskes). Jabon Health Center will give rewards to pregnant women if all 8 criteria above are met, the reward is assisted in making birth certificates and family cards for free and provided with free shuttle facilities when giving birth using an ambulance for free.

Furthermore, community involvement in the implementation of the 1000 HPK program is with the community service program held by the University of Muhammadiyah Sidoarjo (Umsida) where they are determined to help the community in solving problems, especially around health, aka stunting. The role of Umsida, however, is not evenly distributed in all villages in Jabon District. Umsida only participates in Balongtani Village. In carrying out its role, Umsida involves community cadres, village midwives, groups of pregnant and lactating women, as well as babies and toddlers. The forms of participation include providing insight, education, knowledge about making nutritious food for pregnant women, nursing mothers, and children. Then help complete the facilities and infrastructure at the village posyandu that do not yet exist, are damaged, and so on.

Apart from community involvement from Umsida, there is also involvement from Kampung Anak Sejahtera (KAS). KAS itself is under the auspices of Food bank Of Indonesia (FOI) which is a non-profit social organization whose mission is to fight hunger in poor communities and improve nutrition, especially for children. The KAS program itself is to form a village that can meet children's food needs. The target of this program is to provide a variety of education about nutritional health, growth, and development, as many parenting styles as possible to the community in Jabon District to achieve children's welfare. The KAS program itself is only implemented in Tambak Kalisogo Village.

Apart from government and community involvement, there is also private involvement in the implementation of the 1000 HPK program. The involvement of the State Gas Company is a form or effort of cross-sectoral care in tackling stunting in Jabon District. The involvement of the private sector is also not evenly

distributed in the Village area in Jabon District, but only in Tambak Kalisogo Village. However, the role of the private sector is slightly different from the role of the government and the community which are directly involved in the implementation of the 1000 HPK program, while the private sector is not directly involved. PGN's private role is to inject funds that are expected to help fulfill the needs of target groups (pregnant women, breastfeeding mothers, infants, and toddlers) in fulfilling their nutrition.

b. Rule of law

Principles of the Rule of Law according to (Rondonuwu, Rompas, & Pombengi, 2015) is a condition that aims to create conditions where the law is binding on anyone. Law enforcement must be carried out without discrimination, fair and certain. In this study, the application of the principle of the rule of law is explained in three indicators, namely: (a) the implementation of the 1000 HPK program based on the applicable law or policy, (b) upholding human rights, (c) paying attention to the values that live in society. Researchers found that implementing the 1000 HPK program was in line with the applicable law. That is Law Number 36 of 2009 about health, Regulation of the Minister of Health Number 29 of 2019 concerning Overcoming Nutritional Problems for Children Due to a Disease, 2016 District Regional Regulation on Improving Nutrition and Providing Exclusive Breast Milk, and Implementation and Technical Guidelines Regulations.

When talking about regulations or policies that specifically address stunting or 1000 HPK that do not yet exist, this is still being pursued by the government concerned, namely the Sidoarjo District Health Office and the Jabon Health Center, all of which aim to prevent forms of human rights violations committed by the state. So it is necessary to have a legal arrangement related to stunting as a manifestation of the state's responsibility in upholding human rights, especially women and children. And so that the implementation of the 1000 HPK program can be maximized in its implementation.

c. Transparency

Transparency can be seen from three aspects, namely: (a) disclosure of information needed by the community, (b) ease of public access to information, (c) clarity of information provided to the public. Especially information relating to the implementation of the 1000 HPK program, such as that conducted by the Jabon Health Center through the innovation of one soul catin, and one soul with the thumbs, which contains eight fulfillment criteria that must be met by pregnant women, namely: a. first contact less than 12 weeks of gestation, b. ANC integrated/interprofessional, c. have potential blood donors, d. have been in a class for pregnant women, e. ANC at least 4 times, f. not including the 4T, g. attached the P4K sticker at home, h. has a BPJS (Jabon Health Center). Of course, at the beginning of the implementation of a soulful innovation, there was a need for massive outreach to the target group so that the public would know the aims, objectives, and benefits of this innovation. Transparency itself aims to create mutual trust between the government and the target group community.

Included in accessing information related to the implementation of one-on-one innovation, the head of the nutrition installation at the Jabon Community

Health Center provided all the information needed by the in-soul innovation target group (prospective mothers, pregnant women, breastfeeding mothers, children) easily. For example, routinely providing education, knowledge about how to implement one-on-one innovation to the community, usually, counseling is given during the posyandu schedule, or during consultation schedules. The community is also given the convenience of receiving information about one-on-one innovations with the presence of community cadres in each village, village midwives. The presence of community cadres that can encourage, support the activities of the Jabon Health Center can easily be done in the delivery of information to the target group.

Coupled with the current pandemic which requires everyone who does not have an urgent interest to stay at home, this has an impact on the habits of the innovation target groups who usually receive counseling, demo demonstrations, face-to-face education, with nutritionists at the Jabon Health Center to be transferred online. Likewise, conducting classes for pregnant women, which were usually carried out together before the pandemic, but now must be done online. But the Jabon Health Center nutritionist staff have provided these facilities through Instagram, as well as the Jabon Health Center's youtube channel, zoom, and most importantly these facilities are easy to access.

d. Responsiveness

Responsiveness according to (Rochmaditta, 2014) is the ability, organizational sensitivity to detect community needs, make plans, and implement them according to community needs. In this study, the application of the principle of responsiveness is described in two indicators: (a). responsiveness of stakeholders in implementing the 1000 HPK program, (b) the ability of stakeholders to provide services for the 1000 HPK program. In this case, the Sidoarjo District Health Office and the Jabon Health Center have a fast sensitivity in dealing with stunting problems. It can be seen from the innovations created which are useful for monitoring, knowing the progress of the target group so that there is not a single miss on matters relating to the implementation of 1000 HPK.

For example, an innovation from the Sidoarjo Regency Health Office in collaboration with other stakeholders (private and community) in creating SI CANTIK innovations (Sidoarjo Prevents Maternal and Child Mortality). Through this innovation, the Sidoarjo Health Office seeks to prevent stunting in its area. For this innovation to benefit the target group, the Sidoarjo Regency Health Office, especially in the field of family health and nutrition, continues to aggressively socialize posyandu cadres, target group communities directly in the sub-districts in Sidoarjo.

The innovation created by the Jabon Health Center called SEJIWA is also one of the efforts of the 1000 HPK program implementers to tackle stunting. There are two innovations, the first of which is Sejiwa Catin, namely to monitor the prospective bride and groom, pay attention to health before marriage, provide educational knowledge about nutrition to prepare for pregnancy, and so on. And there is also Sejiwa Jempol, which focuses on pregnant women, their development is continuously monitored starting from the fetus aged 0 until the baby is born in a healthy condition until the age of 2 years.

It is not only the responsiveness or speed of the government in overcoming stunting. But there was also a response from the private sector from the State Gas Company which assisted in the form of an injection of funds to the Tambak Kalisogo Village where the funds could be used to fulfill nutrition, balanced healthy food, vitamins, to be given to the target groups of the 1000 HPK program. Then there is also the sensitivity or speed response from the Umsida community group who carry out community service in Balongtani Village which aims to provide education to the target group regarding the use of nutritious food ingredients that can be processed with various kinds of creations. Then hold a class for pregnant women, a class for toddlers, as well as outreach education about pregnancy by inviting resource persons, and all other information related to 1000 HPK.

e. Consensus Oriented

Good governance is to facilitate, discuss what things are considered best for the target group. As there is a consensus in implementation in the field. In this principle, we want to know the joint efforts made by stakeholders in implementing the 1000 HPK program.

There is involvement among good governance actors in implementing the 1000 HPK program. Even though the government is the main actor in this matter, the government cannot work alone but must involve other actors. Based on the results of the study, it was found that the Sidoarjo Regency Health Office had specific and sensitive interventions. Specific interventions include cross-sectoral and programmatic interventions. Such as involving private companies, groups of non-governmental organizations, the agriculture agency, the education office, the social service. Meanwhile, sensitive intervention is a pure program carried out by the Sidoarjo Regency Health Office without involving other sectors. Likewise, the Jabon Health Center also involves village cadres who are indeed focused on stunting prevention. but the communication built by cadres with the Jabon Health Center is still lacking. Then there is the involvement of the Umsida community group that focuses on community service. As well as involving the private company Perusahaan Gas Negara.

f. Justice

Justice can be seen from two aspects, namely: (a) equal treatment by stakeholders, (b) accommodating the needs of the target group community. This principle emphasizes that stakeholders fully guarantee the rights and freedoms of each community of the target groups who receive services without any discrimination from other parties. Based on the research conducted, there is no discriminatory treatment by stakeholders to the community.

Stakeholders prioritize or prioritize the target group receiving the 1000 HPK program regardless of the community's background, social class, and so on. All target groups get their rights depending on their respective needs. For example, provision of additional food assistance (PMT), provision of vitamins, zinc, education on pregnancy and breastfeeding, education on parenting, etc. are provided fairly and equally by stakeholders.

g. Effectiveness and Efficiency

In this study, the principles of effectiveness and efficiency are described in

three aspects, namely: (a) accuracy of stakeholders in implementing the 1000 HPK program, (b) the resources used, (c) the impact of the 1000 HPK program. The implementation of this principle is expected that stakeholders can carry out their roles by predetermined plans, and use the best way to carry out their respective duties.

In carrying out their roles, each stakeholder has prioritized which areas have the highest number of children under five with stunting, target groups with problems who are vulnerable and have diseases, how to overcome them, all solutions have been mobilized by the stakeholders. However, the implementation is not optimal due to the lack of human resources or experts who are directly involved in the prevention of stunting at the Jabon Health Center. The community cadres involved are also slow to regenerate. Then the facilities and infrastructure are still inadequate, and there are still people who don't care about themselves so they rarely control it to the Jabon Health Center, so there is less supervision. So that planning regarding innovations with field implementation cannot go hand in hand.

h. Accountability

Accountability (Iswahyudi, Triyuwono, & Achsin, 2016) said, it means a sense of responsibility for policymakers, program implementers, and stakeholders involved in ensuring the success of the program in the field. The principle of accountability is described in three aspects, namely: (a) stakeholders are responsible for the success of the 1000 HPK program, (b) consistent with the ongoing program, (c) informing accountability to the community.

Based on the research results, it can be seen that stakeholders have responsibility for the implementation of the 1000 HPK program. The form of its responsibility can be seen from the innovation that continues to be created, implementing programs according to existing SOPs, being consistent with the sustainability of the program, conducting evaluations after implementing the program, and so on. Then there are certain times when the implementer of the Jabon Health Center reports their work responsibilities to the Sidoarjo Regency Health Office, such as reporting the number of stunting cases in Jabon District, reporting the accountability sheet as evidence that the implementer at the Jabon Health Center has truly carried out their obligations in serving the community, meet the needs of the community, especially the target group.

i. Strategic Vision

The strategic vision is a plan for future steps. In this principle, the sustainability of the 1000 HPK program for the future and beyond is carried out by stakeholders. For the government, the Sidoarjo Regency Health Service and the Jabon Health Center will continue to run, implement programs related to 1000 HPK, innovate according to the needs and conditions in the field. Then the hope is for the support of quality human resources, more because until now it is still lacking, and the completeness of other supporting facilities.

Also, until now there are no specific regulations, policies, or laws to combat stunting. This is what the main implementers of the prevention of stunting in the District of Jabon, Sidoarjo Regency will strive for. For the role of Umsida, who is now doing community service in Balongtani Village, in the future, it will be

added to other villages that need it and the programs can change according to the needs of the village. For the private role, the State Gas Company itself is only involved in a 1-year contract to be involved in combating stunting in Jabon District.

E. CONCLUSION

Based on the description of the research results that have been found by the researcher, the following conclusions can be drawn. The implementation of the principles of good governance in tackling stunting in the District of Jabon, Sidoarjo Regency carried out by the Sidoarjo Regency Health Office, the Jabon Community Health Center, the UMSIDA community group, and the State Gas Company have been quite good so far this is due to 1. Participation by all involved stakeholders. By their respective duties and functions in overcoming this stunting. Participation from the public and the private sector is not evenly distributed across all villages in Jabon District, but only in a few villages. Participation from the target group is still low. 2. The rule of law, as a basic guideline for stakeholders to carry out innovation by the regulations from the Ministry of Health and the Sidoarjo Regent Regulation. However, none of these regulations specifically addresses the prevention of stunting or the 1000 HPK program. 3. Transparency, carried out openly by conducting outreach, involving community cadres, village midwives in the process of delivering information from the center, and paying attention to the conditions of the target group community to make it easier to obtain innovative services provided. 4. Responsiveness, it can be seen that there is responsiveness, sensitivity, and speed by the stakeholders involved to create an innovation to combat stunting, by involving various cross-sectors and different programs. 5. Consensus oriented, it appears that there are joint efforts made by relevant stakeholders in the prevention of stunting. However, it is not fully optimized. 6. Justice, providing services regardless of the social status, economy, and background of the target group community. 7. Effectiveness and efficiency have not been fully implemented due to the lack of human resources and supporting infrastructure, which resulted in the resulting impact. 8. Accountability, the form of responsibility carried out by stakeholders can be seen from the innovations created, implementing the program according to the SOP, being consistent with the sustainability of the program, evaluating after implementing the program. 9. Strategic vision will continue by paying attention to conditions in the field and adjusting to the needs of the community, however, for Perusahaan Gas Negara there is no sustainable vision for the future. Implement the program according to the SOP, be consistent with the sustainability of the program, evaluate after implementing the program.

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