



COLLABORATION OF ACTORS IN THE NETWORK IN STUNTING PREVENTION PROGRAMS IN BULUKUMBA DISTRICT

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ABSTRACT

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The purpose of this study aims to analyze the collaboration of actors in the network in the stunting prevention program in Bulukumba district using qualitative research methods. The data collection method is by observation and document study. The data analysis method is data condensation, data presentation and conclusion drawing. The results of data analysis show that the number of children with stunting in Bulukumba district is 1740 cases spread over 20 sub-districts and there are 58 people scattered in various regional apparatus organizations in Bulukumba who are members of the stunting prevention team including the Health Office, Development Planning Agency, Regional Research and Development, Population control agency, family planning, Women's Empowerment and Child Protection, and others. Collaboration between actors in the network, such as face-to-face dialog, is carried out through stunting consultations and is stated in the MOU on the equality of stunting data and the commitment of the actors in stunting prevention programs.

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1. Introduction

The importance of developing the health aspect for the development of Human Resources causes stunting problems to become one of the problems in the health aspect that must be resolved to achieve the development of quality human resources. According to the World Health Organization (WHO), stunting is a developmental disorder in children caused by poor nutrition, repeated infections, and inadequate psychosocial stimulation. The lack of nutrients can be explained by three conditions, namely not having enough food, eating improper or unhealthy food, or not being able to eat properly. Therefore, stunting has a strong correlation with poverty because stunting is caused by underprivileged conditions. Based on data from the 2019 Indonesian Toddler Nutritional Status Study (SSGBI) the prevalence of stunting is at 27.7%. This means that about one in four children under five (more than eight million children) in Indonesia is stunted. In 2020 the prevalence of stunting decreased by 1.6% and was at 26.1%. In 2021 there will also be a decline and is at 24.4%. This figure is still very high when compared to the threshold set by WHO, which is 20%.

According to Latifa (2018),In the prevention of stunting, a comprehensive cross-sectoral collaboration is needed. Policies made at the central level must converge to the village level. The action does not only involve the health sector but also other related sectors. Management system based on community empowerment, increasing knowledge of balanced nutrition, sanitation and environmental hygiene [1].

Recent studies in public administration that prioritize the principles of governance in the implementation of government are very important things to do. This is based on the fact that the

government has not been able to show optimal performance. Governance is the involvement of all stakeholders in the process of determining and implementing public policies. Robert (2001) suggests that some actors or stakeholders need an interorganizational network approach to solve problems (problem solving) [2]. In Alwi (2018) Generally, an organization cooperates with other organizations because they see the great potential that the organization has [3].

According to Islamy in Saufi (2021) Collaborative governance is defined as a balance between resources and authority between parties who have interests and intervene to groups who have limitations so that there is a dependency nature in overcoming a problem through collective decisions and mutual agreements [4]. Donahue and Zeckhauser (2011) defines collaborative governance as a condition in which the government fulfills public goals through collaboration between organizations and individuals. Donahue said that there are three important aspects in collaboration, namely actors, commitment and openness [5]. Bryson & Crosby (2015) defined that the process and structure of cooperation in cross-sectoral collaboration must be effective. A structure that is open and not ego-centred will result in collaborative governance and help implement stakeholder agreements [6].

According to O'Leary and Bingham (2007) Collaboration is a concept that describes the process of facilitating and implementing involving multiple organizations to solve problems that an organization cannot or cannot easily solve alone [7]. Retno et. al defined that Focus collaborative governance on public policy and issues [8]. Sørensen and Torfing (2021) compares two competing definitions of collaborative governance, i.e., first, discussing the concept as an institution-driven collaborative interaction process between public and private actors and secondly removing references to public administrators and focusing on a group of stakeholders. engage in cross-border cooperation [9]. Collaborative governance requires leadership in an inter-organizational and multi-actor environment. Recent studies suggest the adoption of a public service ecosystem approach to incorporate all individuals, technologies, and institutions involved in the service delivery process (Petrescu 2019) [10].

One aspect of collaborative governance implementation that needs more attention is sustainability. Molenveld (2021) found that financial independence, institutionalization strong, and a small core group of volunteers is the most important configuration for sustainability [11]. So far, the government's attention in overcoming the stunting problem is regulated by issuing various policies, regulations and various other interventions. These policies include Law Number 36 of 2009 concerning Health, Presidential Regulation Number 42 of 2013 concerning the National Movement for the Acceleration of Nutrition Improvement, Regulation of the Minister of Health Number 23 2014 concerning Nutrition Improvement Efforts and other laws made to support stunting management, and Law Number 72 of 2021 concerning the Acceleration of Stunting Reduction. The problem of stunting is also part of the national priority program of the National Medium Term Development Plan (RPJMN) 2020-2024.

Bulukumba is one of the districts in South Sulawesi province with a stunting prevalence of 36.2% in 2018. Bulukumba is in 11th place as a district with a high prevalence of stunting out of 24 districts in South Sulawesi.

Various policies were carried out to accelerate stunting reduction in Bulukumba district, including holding a convergence workshop on the acceleration of stunting prevention and control in December 2019, a stunting mimic study in Enrekang Regency and various stunting prevention interventions by the Health Service. However, in 2021 the number of stunting cases based on data from the Bulukumba district health office was 1740 cases spread across 20 sub-districts in Bulukumba Regency. Therefore, Bulukumba is one of the loci for handling stunting from 17 regions in South

Sulawesi which is a priority in the Stunting Reduction Acceleration Program by involving various stakeholders.

Proses The collaborative process according to Ansell and Gash (2007) is a collaborative process that is cycle that depend on communication, trust, commitment, understanding and outcomes [12]. Ansell and Gash (2007) stated that there are 5 indicators in the collaboration process, including: first, Face to face dialogue, which means it is related to face-to-face dialogue or initial communication Among stakeholders for solving communication barriers and conflicting views in a process collaboration. Second, building trust, means trust that must be presented in the collaboration process, especially among stakeholders. So with trust, achievement collaboration will be more easily realized. Third, building commitment, which means relating to the responsibility and loyalty of the stakeholders involved in the collaboration process which aims to develop the potential for mutual benefits and is the best way to achieve the desired results. Fourth, shared understanding, means relating to a "common mission" or "common goal" among the stakeholders involved in the collaboration process. Fifth, temporary results, are related to small wins that can lead to a successful collaboration process. Emerson (2012) defines a similar thing that the collaboration process is an interaction which cyclical or iterative in nature consisting of principled engagement, shared motivation, and capacity to take action together.[13]

Khasanah et al (2021) argue that collaborative governance is very important because every party has limitations and weaknesses, only the government has the capability, network and resources. The problem in implementing the acceleration of stunting prevention is currently related to the ineffectiveness of stunting prevention programs. The coordination of the implementation of specific and sensitive nutrition interventions at all levels is not yet optimal in relation to planning and budgeting, and monitoring and evaluation. Not yet effective and efficient allocation and utilization of resources and sources of funds. Limited capacity and quality of program implementation. There is still a lack of advocacy, campaigns and dissemination related to stunting, and various prevention efforts. [14]

In order to overcome some of the obstacles in the implementation of collaborative governance, Scott and Merton (2021) discusses the role of goal commitment and how it can work when we understand the social and psychological dynamics of collaborative governance. Efforts to deal with stunting in Bulukumba Regency use collaboration between various stakeholders, therefore researchers are interested in researching the collaboration of actors in the network in stunting prevention programs in Bulukumba Regency [15].

2. Research Methods

In this study, the author uses a descriptive qualitative approach. The research was conducted on related agencies that are responsible for stunting prevention programs in Bulukumba Regency. These include the Regional Development Planning, Research and Development Agency (Bappeda), the Health Office, the Population Control Agency, Family Planning, Women's Empowerment and Child Protection and other regional apparatus organizations involved in stunting prevention. Data collection is done by observation and document study. The data was analyzed using several steps according to the theory of Miles, Huberman and Saldana (2014), namely analyzing the data in three steps: condensing the data, presenting the data, and drawing conclusions or verification. Data condensation refers to the process of selecting, narrowing, simplifying, summarizing [16]

3. Results and Discussion

The number of stunting in Bulukumba district based on data from the Bulukumba health office in 2021 showing in this table 1

TABLE 1
QUANTITY OF STUNTING IN BULUKUMBA DISTRICT

| No | Public health center | Very short | Short | Number of Stunting |
|----|----------------------|------------|-------------|--------------------|
| 1 | Gattareng | 1 | 37 | 38 |
| 2 | Ponre | 49 | 217 | 266 |
| 3 | Bontonyeleng | 123 | 223 | 346 |
| 4 | Caile | 15 | 25 | 40 |
| 5 | Ujung loe | 68 | 183 | 251 |
| 6 | Palangisang | 12 | 31 | 43 |
| 7 | Manyampa | 1 | 2 | 3 |
| 8 | Bonto Bahari | 26 | 49 | 75 |
| 9 | Bonto Tiro | 18 | 71 | 89 |
| 10 | Batang | 17 | 65 | 82 |
| 11 | Herlang | 4 | 16 | 20 |
| 12 | Karassing | 0 | 24 | 24 |
| 13 | Kajang | 10 | 32 | 42 |
| 14 | Lembanna | 0 | 3 | 3 |
| 15 | Tana Toa | 13 | 40 | 53 |
| 16 | Tanete | 1 | 6 | 7 |
| 17 | Salassae | 15 | 62 | 77 |
| 18 | Bonto Bangun | 23 | 38 | 61 |
| 19 | Balibo | 31 | 163 | 194 |
| 20 | Borong rappoa | 13 | 13 | 26 |
| | Total | 440 | 1300 | 1740 |

Resource : data from the Bulukumba health office in 2021

Based on table 1, it shows that Bontonyeleng is a sub-district with the largest number of stunting sufferers, namely 346 child. While Lembanna is the sub-district with the least number of children with stunting, namely 3. Therefore, a stunting prevention team as formed

Actors in the network that play a role in the stunting prevention program consist of directors, implementers, sensitive intervention services and specific interventions with the coordinator, namely the Head of the Health Service. The field of behavior change and family assistance with the coordinator, namely the head of the Family Planning, Family Resilience and Welfare Division. The field of coordination, convergence and planning with the coordinator is the secretary of the Regional Development Planning, Research and Development Agency. Data, money and knowledge management.

Based on the collaboration process proposed by Ansell and Gash in Retno et al (2021):

a. Face to-face dialogue

All collaborative governance built on the existence of "dialogue between stakeholders". This dialogue is a process, which is oriented towards the birth of an agreement. This stakeholder dialogue is usually carried out to identify opportunities by putting forward a narrative that there will be a "mutual benefit" situation for stakeholders if they can collaborate.

The face-to-face dialogue on stunting prevention in Bulukumba district has been executed on March 2022 by holding a stunting conference as the third action in the stunting reduction intervention which aims to convey the results of the situation analysis and the design of the stunting reduction intervention plan in Bulukumba Regency. The stunting conference held by the Bulukumba District Health Office in the context of stunting prevention involves other agencies including the population control department, family planning, women's empowerment and child protection, the development of drinking water management systems and residential environmental sanitation, the Central Statistics

Agency, and other regional apparatus organizations that involved in stunting prevention in Bulukumba district

b. Buit trust

Collaborative leaders must be able to build trust among stakeholders. Building trust is inseparable in face-to face dialogue. So to build trust, it is carried out with face-to-face dialogue between actors in the network through stunting consultations and meetings to analyze the stunting situation in Bulukumba Regency. In the prevention of stunting in Bulukumba district, building trust is important so that the coordination between actors in the network can be carried out properly. By involving various actors, not only the health department in tackling stunting indicates that the early stages of successful collaboration can occur in terms of building trust.

c. Commitment to the collaborative process

The existence of conditions of high interdependence among stakeholders is likely to increase commitment to collaboration. Commitment to collaboration of actors in the network for stunting prevention programs in Bulukumba district is stated in the MOU on the similarity of stunting data and stunting consultation activities as the third action, apart from analyzing the situation, it is also coupled with the signing of a statement of commitment of all actors responsible for stunting prevention.

d. Common understanding

At some point, stakeholders need to be able to develop a common understanding of what can be achieved. This shared understanding can be in the form of a clear common goal, a clear definition of the problems faced together and a shared understanding of the value to be achieved in collaboration. Based on presidential regulation Number 72 of 2021 concerning the acceleration of stunting reduction, in order to optimize the implementation of stunting prevention involving various actors in the network, a stunting reduction acceleration team was formed. The stunting reduction acceleration team in Bulukumba district is stated in the Regent's Decree Number 188.45-115. The team was formed so that each agency understands its duties and functions in the stunting management program.

e. Intermediate result

Collaboration is more likely to continue when the results of the goals and benefits of collaboration can be felt even though it is still small as an intermediate (intermediate) result of the collaboration process. Small results (small win) this can be a driving force in building trust and commitment with stakeholders. The provisional result of the stunting prevention program in Bulukumba Regency is the emergence of attention from actors to make stunting handling a priority, no longer carried out by the health department itself.

4. Conclusions

Based on the results of the research above, it can be concluded that the collaboration process between actors in the network in the stunting prevention program in Bulukumba Regency is still running. High stunting problems require actors in the network to collaborate so that stunting reduction can be implemented. collaboration between actors in the network through face-to-face, building trust, commitment to the collaboration process, general understanding and interim results in stunting prevention illustrate the importance of collaboration in solving public problems. Research on collaboration and networking is expected to continue to grow with the increasing complexity of existing public problems.

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