



Evaluation of the Stunting Program at the Margototo Health Center, Lampung East District

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Abstract: Stunting is a condition of failure to thrive in children under five due to chronic malnutrition, especially in the first 1,000 days of life. Stunting can affect brain growth and development. Children with stunting have a greater risk of suffering from chronic diseases in adulthood. This study aims to analyze the evaluation of the implementation of the stunting program at the Margototo Health Center, East Lampung Regency. This research is a program evaluation research using a mixed method (Mix Method) with a sequential explanatory design where quantitative data analysis is carried out at the initial stage, then qualitative data analysis is carried out. The program evaluation method uses the context-input-process-product (CIPP) evaluation model. Results study shows that in terms of context, the stunting program has been implemented according to the planned objectives and is right on target. In the input aspect, namely the lack of human resources in assisting, the lack of a budget that supports program implementation. In the process aspect of program implementation, there were no significant obstacles, and the process of implementing the stunting program went according to plan. In the product/output aspect, the stunting program has reached the expected target indicators, and recording and reporting have been going well. And the results of the implementation of the stunting program are shown by the results of mothers' knowledge about stunting and the attitudes of mothers who have stunted toddlers towards stunting events.

Keywords: Cadre assistance; Program evaluation; Stunting

Introduction

Stunting is a nutritional problem in toddlers in Indonesia, and the results of the 2018 Basic Health Research (Riskesdas) show that the reduction in the prevalence of stunting in toddlers at the national level is 6.4% over 5 years, from 37.2% (2013) to 30.8% (2018) (Kemenkes RI, 2018).

Based on the results of the 2021 National Level Indonesian Nutritional Status Study (SSGI), there are 5 provinces that have nutritional problems in the Acute category (Stunted <20% and Wasted ≥ 5%), namely Lampung Province, Bangka Belitung Islands, Riau Islands, DKI Jakarta and the Regions Yogyakarta Special (Kemenkes RI, 2021).

In 2018 East Lampung Regency became one of the 100 priority districts/cities for stunting intervention (TNP2K RI, 2017).

Based on data from the 2018 Riskesdas Lampung Province, it shows that stunting cases in East Lampung Regency are 24% (Tim Riskesdas, 2018). The prevalence of stunting under five in Lampung Province is 18.5%, and the prevalence of stunting in East Lampung Regency is 15.3% (Kemenkes RI, 2021).

Based on the results of stunting publication reports obtained from the East Lampung District Health Office from 34 Community Health Centers in East Lampung District, Margototo Health Center has the highest ranking of stunting cases for two consecutive years with stunting prevalence in 2020 of (13%) and (14%) in 2021 (Dinkes Lamtim, 2021).

Secondary data from the Kesgazi section of the East Lampung District Health Office in 2021, the percentage of stunting that is still high is in Metro Kibang District by (14%), then Purbolinggo (5%), then Mount Protector (4%). Meanwhile, the lowest percentage of stunting was

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in Melinting and Bandar Sribawono Districts (0.2%) (Dinkes Lamtim, 2021).

Based on the evaluation report of the Kesgaga Section of the East Lampung District Health Office in 2022 the highest prevalence of stunting under five was Sukadana District (14%), Metro Kibang District (13%), and North Raman District (10%). Meanwhile, the lowest prevalence of stunting under five was Pasir Sakti District (0.1%), Bumi Agung District (0.3%), Melinting District (0.5%). To find out the number of stunting cases in East Lampung Regency, it can then be compared with the results of the Indonesian Nutrition Status Survey (SSGI) which will be carried out in 2022. It is possible that the SSGI results data will only be released in 2023 (Dinkes Lamtim, 2022).

With stunting cases in East Lampung Regency increasing, in 2021 the East Lampung Regency Government will create a program to prevent and control stunting called the "Stunting Program" which is a specific nutrition intervention effort in preventing stunting, especially for families at risk of stunting, namely families with young women, prospective brides, pregnant women, mothers with babies and toddlers aged 0-59 months. This program is implemented by all Community Health Centers in East Lampung Regency, including the Margototo Health Center which has the highest number of stunting cases among the 33 Community Health Centers in East Lampung Regency in 2021. The Stunting Program is a program implemented by cadres in the working area of the East Lampung District Health Center.

Cadre who provided assistance to families at risk of stunting or target groups in East Lampung Regency were previously given training or provision of knowledge about stunting, namely through Interpersonal Communication Orientation (KAP) activities for cadres to target groups in an effort to prevent and control stunting in East Lampung Regency. This KAP strategy uses a family approach with the aim of creating changes in people's behavior towards a better direction and that supports reducing the prevalence of stunting in each region (Kemenkes RI, 2021).

The involvement of cadres in overcoming stunting is very important because they are people who are close to mothers who have stunted toddlers compared to health workers in Puskesmas. It's just that sometimes cadres cannot convey government messages or programs to the community because of limited knowledge of cadres. Therefore, cadres need training that can improve their ability to convey health messages to the public (Hamzah et al., 2021).

To get a quality and sustainable health program, evaluation activities are needed. Program evaluation

which is a form of activity that aims to obtain information about the results of implementing a program to assess whether the activity is carried out in accordance with the plans made previously, and whether all inputs are in accordance with the needs and whether this program gives the results and impact expected by the program maker. Then the information obtained in the program evaluation can be used as a reference in making the right decisions regarding the programs that have been implemented (Kurniati, 2016; Ambiyar et al., 2019).

Looking at the overview of the implementation of this stunting program, a program evaluation model is used, namely the Context, Input, Process, and Product (CIPP) evaluation model. The CIPP model is an evaluation model that views the evaluated program as a system (Darodjat et al., 2015).

The CIPP evaluation model was developed by Daniel Stufflebeam in 1966. Stufflebeam stated that the CIPP evaluation model is a comprehensive evaluation model that has a formative function and a summative function. The formative function of evaluation is to provide information to improve and develop the program while the summative function of evaluation is to consider to determine the success or continuation of the program. Each component in CIPP evaluation has a different assessment focus, namely: Context Evaluation The purpose of context evaluation is to find out the goals, and objectives owned. Input Evaluation aims to determine human resources, infrastructure, and supporting equipment, as well as the funds/budgets needed. Process evaluation (Process Evaluation) is carried out to find out information and compile reports on the implementation of program planning. This evaluation provides feedback or input to stakeholders to assess the progress of the program. Product evaluation at this evaluation stage aims to identify the results of program implementation, both short-term and long-term results. This evaluation measures the success of the program based on the objectives that have been set. The results of the product evaluation will be input for stakeholders to determine the sustainability of the program (Stufflebeam et al., 2014).

The uniqueness of this model is in every aspect of evaluation related to decision makers (decision) related to the planning and operation of a program. The advantage of the CIPP model is that it provides a comprehensive and comprehensive evaluation format at every stage of evaluation such as at the context evaluation stage, input, process, process/ output. Where evaluation is carried out as a process that describes, obtains useful information to make an alternative

decision related to the sustainability of a program (Stufflebeam et al., 2014).

Study it aims to analyze the results of program implementation from the perspective of Context, Input, Process, Product using the evaluation model developed by Stufflebeam (Stufflebeam, 2003).

Method

This study is a program evaluation research using a mixed method (Mix Method) with a sequential explanatory design where quantitative data analysis is carried out at the initial stage, then qualitative data analysis is carried out. The program evaluation method uses the context-input-process-product (CIPP) evaluation model.

Method This study aims to describe the description of the knowledge and attitudes of mothers who have stunted toddlers obtained from primary data. And analyze the evaluation of the stunting program with an evaluation model context-input-process-product (CIPP).

Sample in this study as many as 189 mothers who had stunting were selected use Purposive sampling technique. And the inclusion criteria in this study were mothers who had stunted toddlers in the working area of the Margototo Health Center and were able to read and write. And the main informant, namely Ka. UPTD of the Margototo Health Center, Health Promotion Officers and PM of the Health Center, Health Center Nutrition Officers, Village Midwives, Cadres. And the triangulation informants were the Head of Health Promotion and the PM of the East Lampung District Health Office, mothers who have stunted toddlers in the working area of the Margototo Health Center.

For questionnaire, tested the validity of 12 questions of knowledge and 11 statements attitude by using Pearson Product Moment correlation. Also obtained the value of r count is one and r count > r table, this supports the validity of the instrument. Cronbach's alpha value > 0.6, which is equal to 0.866 for knowledge and 0.372. This result indicates that the questionnaire is reliable. And guidelines for in-depth interviews conducted with key informants covering aspects of Context, Input, Process, Product/Output, Outcome, while the triangulation informants cover aspects of Process, Product/Output, Outcome.

Data collection was carried out through questionnaires which were distributed directly between 17 January and 2 February 2023 in the working area of the Margototo Public Health Center, East Lampung Regency (Margototo Village, Kibang Village, Purbosembodo Village, Margajaya Village, Jaya Asri Village, Sumber Agung Village, Margasari Village). And

through in-depth interviews and observations made to the main informants and triangulation informants.

The data were analyzed by calculating the frequency distribution of the characteristics of the respondents and descriptive statistics to describe the average value of the knowledge and attitudes of the respondents as well as being carried out qualitative data analysis on the results of interviews and observations.

This research was approved by the Health Research Ethics Committee of the Faculty of Public Health, Diponegoro University with ethical number No: 438/EA/KEPK-FKM/2022.

Result and Discussion

Quantitative

Characteristics of Respondents

The ages of the respondents were between 21 and 50 years, with 81 (42.9%) aged 21-30 years and 31-40 years, while 41-50 years 27 (14.3%). Respondents' occupations were 146 (77.2%) IRT, 31 farmers (16.4%), 8 teachers (4.2%), and 4 entrepreneurs (2.1%). As well as the education of the respondents, namely elementary school 14 (7.4 %), Junior High School 70 (37%), High School 96 (50.8%), and Bachelor 9 (4.8%) The total number of respondents 189selected by purposive sampling technique (Table 1).

Table 1. Characteristics of Respondents

Characteristics	N (%)	Means (sd)
Age		1.71 (0.492)
21-30 Years	81 (42.9%)	
31-40 Years	81 (42.9%)	
41-50 Years	27 (14.3%)	
Work		1.31 (0.655)
IRT	146 (77.2%)	
Farmer	31 (16.4%)	
Teacher	8 (4.2%)	
Self-employed	4 (2.1%)	
Education		2.53 (0.704)
SD	14 (7.4%)	
Junior High School	70 (37%)	
Senior High School	96 (50.8%)	
Bachelor	9 (4.8%)	

Abbreviation: sd: standard deviation

The from results distribution of questionnaires distributed to mothers who had to stunt under five, totaling 189 respondents in the work area of the Margototo Health Center which was analyzed using descriptive statistical techniques showed that the value of knowledge about stunting and mother's attitude was categorized as good if the value was 75-100%, 56-75% Sufficient, and Less with a value of <50%, namely mothers who have good knowledge as many as 186 (98.4%) and enough knowledge as many as 3 (1.6%). As

well as for the attitude statement questionnaire, namely mothers who behaved well 1 (0.5%), and who behaved sufficiently 188 (99.5%) (Table 2).

Table 2. Category Value

Questionnaire	Frequency (%)	Means (sd)
Knowledge		87.22 (9.155)
Good (75-100%)	186 (98.4%)	
Enough (56-75%)	3 (1.6%)	
Less (< 50%)	-	
Attitude		64.83 (3.557)
Good (75-100%)	1(0.5%)	
Enough (56-75%)	188 (99.5%)	
Less (< 50%)	-	

The results of the study show that mothers who have stunted toddlers at the Margototo Health Center have good knowledge about stunting. This is because all mothers who have stunted toddlers in the working area of the Margototo Health Center have been provided with assistance by cadres or have implemented a stunting program.

It also shows that the knowledge of parents regarding nutrition can assist in improving the nutritional status of children so that children can achieve appropriate growth and development. Children with stunting conditions will easily experience health problems both physically and psychologically (Hasnawati et al., 2021).

Knowledge is an important factor in shaping the personal body. Knowledge-based on understanding will foster a positive attitude in efforts to prevent stunting to address nutritional problems in children aged 0-23 months (Arnita et al., 2020).

The role of parents, especially mothers, is very important in meeting the nutritional needs of children. Good knowledge possessed by mothers, especially about nutrition, is needed by mothers in fulfilling food needs and being able to make a varied and balanced food menu according to nutrition in the stages of child development. The level of one's knowledge can affect the attitude and behavior in doing an action. Information about stunting and education for prospective mothers and mothers of toddlers from health workers is needed so that mothers can know the characteristics of stunting so that they can intervene optimally so can prevent stunting from an early age.

The results of the study using the chi-square test showed that knowledge ($p=0.013$) and actions ($p=0.198$) of mothers had a relationship with the incidence of stunting in children aged 24-59 months (Princess, 2019).

And from the results of the attitude statistical descriptive results show that mothers who have stunted toddlers in the working area of the Margototo Health Center have an adequate attitude in dealing with the

problem of stunting in their children. This shows that the stunting program in the work area of the Margototo Health Center is implemented as expected.

Of the various attitudes carried out by mothers, one of them is the mother's attitude in terms of giving exclusive breastfeeding and breastfeeding until the age of 2 years, so that it can be one of the efforts to prevent stunting. The analysis of other studies shows that there is a significant relationship between attitudes and efforts to prevent stunting in toddlers where $p\text{-value} = 0.030$ ($p < 0.05$) (Arnita et al., 2020).

Results study Others also show that more than half (54%) of pregnant women have good knowledge about stunting and more than half of pregnant women have good attitudes toward preventing stunting (54%). (Kristiyanti et al., 2021).

Qualitative

Regency Lampung Timur has 34 Foster Health Centers, one of which is the Public Health center Margototo which is the target or location in this study. This is because the Puskesmas is a Puskesmas that has the highest number of stunting cases among other Puskesmas. And also the Margototo Health Center has implemented a stunting program which is carried out by assisting families at risk of stunting in the work area of the Margototo Health Center. Therefore, from programs that are already running and have not been evaluated, the researchers conducted program evaluations using the CIPP evaluation model as seen from the context, input, process, and product evaluations.

Model evaluation CIPP focuses on program issues in context evaluation which includes program planning, goals, and objectives. Input evaluation includes the availability of human resources, funds, facilities, and infrastructure. And process evaluation includes the planning process and program implementation. Meanwhile, product evaluation includes the effectiveness of the stunting program. And in this study look at the outcome or results of program implementation. This evaluation indicator can describe how the stunting management program is running so that it can reduce the problem of stunting toddlers in the East Lampung Regency, especially the Margototo Health Center.

The final stage of this evaluation looks at the outcomes/results of program implementation to know the impact of program implementation. Is the program implemented as expected, and do program recipients show good behavior when compared to before the program was implemented? At this stage, the results are explained in a description (description) and judgment (assessment) (Ambiyar et al., 2019).

Characteristics of Informants

Inside informant This study consisted of 8 people, each of which was divided into 5 main informants and 3 triangulation informants who were selected by purposive sampling technique.

a) *Main Informant Characteristics*

The main informants in this study were 5 people consisting of the Head of the Margototo Health Center (1 person), the Health Promotion Officer (1 person), the Nutrition Officer (1 person), the Village Midwife Coordinator (1 person), and the `Health Cadres

Coordinator (1 person). All key informants consisted of officers working in the working area of the Margototo Health Center. The age range of the main informants was 38 to 50 years with 1 male informant and 4 female informants. And four informants are State Civil Apparatus (ASN) who work at the Margototo Health Center for more than 16 to 30 years, as well as one health cadre who works in the working area of the Margototo Health Center. The informant's last education history is one bachelor's degree and three Diploma, one senior high school student: (Table 3).

Table 3. Main Informant Characteristics

Informant	Age (years)	Gender	Last education	Work	Working Period (years)
IU 1	50	Man	S1	Ka. UPTD	29
IU 2	46	Woman	DIII	Promkes Officer	25
IU 3	51	Woman	DIII	Nutrition Officer	30
IU 4	38	Woman	DIII	Village Midwife	16
IU 5	42	Woman	Senior High School	Health Cadre	10

b) *Triangulation Informant Characteristics*

The triangulation informants in this study consisted of 3 people, namely the Head of the Health Promotion Section and the PM of the East Lampung District Health Office (1 person) who is 51 years old, last graduated

from Masters, and the mother who has stunted toddlers (2 people) with each age 38 and 41 years old with high school education and working as a housewife (IRT). (Table 4).

Table 4. Characteristics of Triangulated Informants

Informant	Age (years)	Gender	Last Education	Work	Working Period (years)
IT 1	51	Woman	S2	ASN	30
IT 2	38	Woman	Senior High School	IRT	-
IT 3	41	Woman	Junior High School	IRT	-

Triangulation informants are groups that provide information that is used as a cross-check of the facts obtained in the field. Head of the Health Promotion Section and PM of the East Lampung District Health Office as leaders regarding program implementation and also as program coordinators in handling stunting cases through community empowerment at the District level, Mothers who have stunting toddlers in the work area of the Margototo Health Center as the program's target group and are expected to feel benefits from implementing the program.

1) *Context Evaluation*

Evaluation of the context seen in the implementation of the stunting program at the Margototo Health Center is planning program and program goals. The program planning carried out at the Margototo Health Center in East Lampung Regency was carried out by means of a stunting consultation which involved nutrition workers as the person in charge of the nutrition program, and health promotion officers as the person in charge of the program in community

empowerment, and the head of the Puskesmas as the director of the stunting program who served as supervisor of program implementation. , as well as related cross-sectors, such as for kopimcam, and village heads. The aim of implementing this program is to reduce the incidence of stunting in the work area of the Margototo Health Center, and this program has targets, namely families at risk of stunting consisting of families who have pregnant women, teenage girls, and toddlers aged 0-59 months, as well as mothers who have stunted toddler.

"..yes this program aims to reduce stunting cases."(IU 1)

"Yes, before this program runs, it is planned first, holding meetings such as stunting consultations and mini-workshops to discuss program planning such as who wants to be involved, then how to implement it." (IU 3)

"..the program targets pregnant women with Chronic Energy Deficiency (KEK), as well as mothers who have stunted children" (IU 2)

"... so far the stunting program implemented at the Margototo Health Center has been on target. And every month it is also reported to the Department of its activities. (IT 1)

The results of the stunting program planning are toddler monitoring activities at the Posyandu, then assistance to families at risk of stunting, and nutritional counseling at the Puskesmas.

Study regarding the evaluation of the CIPP model, a lot has been done to see the sustainability of a program. The indicators in the implementation of the stunting program which include planning, program goals, and objectives have been implemented.

This is in line with research showing that needs in a program are, standard planning, targets or goals, goals or long-term needs, and development of missions (Birgili et al., 2021)

Matter This also explained by other research which explains that the preparation of work program planning must be explained openly regarding implementation, and the human resources involved (Simorangkir et al., 2022).

2) Inputs Evaluation

The results of interviews on input evaluation, as seen from Man (HR), Money (Funds), Material (facilities and infrastructure), and Machine (Equipment) that support the implementation of this stunting program are as follows:

"...The human resources involved are actually still lacking, but what else can we do, because of the limited human resources in our health center." (IU1)

"... yes, sometimes we village midwives are involved, if the cadres accompany us, but sometimes we don't either." (IU 4)

"... right, from 2020-2021, village funds are still focused on Direct Cash Assistance (BLT), madam, so support for this activity is still lacking, especially since the funds from the BOK Puskesmas have also been dropping for a long time, ma'am, at the end of the year, but we are still trying to keep this program running, Miss,". (IU 1)

"..we already have posyandu for all, ladies and gentlemen, and if there are those who have difficulty with the distance to go to the Puskesmas, we can also help with the Anthropometry Kit miss from the Office, a tool for measuring height, Miss." Each of us Community Health Centers has a Poskesdes sist, so the residents are not far away if they want treatment." (IU1)

"..yes, if you say it's not enough, you don't have enough staff, because we are only 5 people in 1 village, and it's a bit difficult for us to assist the stunting family, Miss. I want to ask for more members, said the village head, sir, there are no funds Miss, to increase

honorarium us, yes when it comes to honorarium, it's actually not enough, Miss, but what else can we do, the village people said the funds weren't enough." (IU 5)

"...yes, I also can't say that the problem is human resources and funds because indeed we in the regency also have a budget deficit, but I salute this puskesmas even though there is a budget deficit, we are still trying to keep this program running. (IT 1)

Evaluation of input or input focuses on the needs of the Human Resources involved, supporting funding, and supporting facilities and infrastructure (Fan et al., 2022).

The need for human resources involved in implementing the program is felt to be insufficient, this is due to the limited human resources, as well as the limited funds that support program implementation. However, the existing facilities and infrastructure are sufficient to support the implementation of the program.

This is in line with research which shows that limited human resources must be updated or supplemented so that the services provided can cover all targets (Luib et al., 2022).

Result evaluation on input evaluation is also in line with research conducted by the university Bangladesh which shows that limited resources and inadequate facilities are the main problems in improving the quality of Bangladeshi university higher education (Kader, 2016).

The results of other studies show that activities or programs that involve a lot of human resources also require a lot of funding as full support. And after feedback from CHC members, the project team started providing financial support to facilitate group meetings (Bardosh et al., 2023).

3) Process Evaluation

The results of interviews conducted with informants who saw how the process of planning, implementing, monitoring, and evaluating the stunting program activities was as follows:

"... yes, the first one is Ms, all toddlers are weighed, then their height and head circumference are measured, then when it's done, it will be found out which ones are stunted and which are not, then the data collection is carried out with the village midwife, and cadres, after the data collection, assistance will be carried out, Miss. (IU3)

"...yes, the activities are like, the cadre accompanies pregnant women who are KEK, ensures that pregnant women take blood supplement tablets, for mothers who have stunted toddlers ensure that mothers provide nutritious and balanced food for their children, Miss, then their cadres can also I'll give you counseling, now if someone needs a consultation, usually the cadres tell them to go to the Puskesmas, Miss." (IU 2)

"... yes, we are assisting you, before you measure it using the anthropometric kit, ma'am, what is measured is Weight for Age (BB/U), Height for Age (TB/U), then the data is collected, then it is received goes to the homes of each child who is stunted, then do the mapping, yes, continue to assist, then provide PMT from the village, yes, usually raw materials, such as eggs, milk, biscuits for pregnant women, yes, for toddlers there is stunting sometimes given raw materials, sometimes cooked ingredients, like rice, vegetables and side dishes, and I'm not sure Miss, and only given one month, Miss, the same for vitamin A for toddlers, but that's every February and August, Miss". (IU 5)

"...yes his accompaniment That's four times a month, miss, then later the results will be reported to me and the cadres." (IU4)

"...yes, I did data collection at first, so the cadres came to my house, then said they wanted assistance, it's called the stunting program, for pregnant women and mothers who have stunted children, yes, sometimes they are also given food assistance, sometimes they are also given material assistance so raw Miss. (IT 2)

"...Later, when they are accompanied, usually pregnant women or mothers who have stunted children who want to know more about their health problems, we order them to go to the health center to consult with a nutrition officer or a consultant with a midwife, Miss." (IU5)

"...For the Margototo Health Center, almost all villages carry out the stunting program. Yes, Margototo's cadres are active and miss, so the target to assist the target group has been achieved, and also counseling, education about stunting using the KAP technique which was taught to the cadres during the KAP training. (IT 1)

"..Yes we are during this conducts monitoring by way of direct visits with cadres, by directly observing the implementation of the assistance carried out by cadres." (IU 1)

"..Yes, the cadres report to the village midwife, later the village midwife reports to the puskesmas, and Yes, Miss. Reports are made every month and sent to the Health Service, Miss." (IU 2)

"...Yes, all activities are recorded and reported to us, the village midwife, and then reported to the person in charge of the program at the Puskesmas, Miss." (IU 4)

".. after doing the assistance, then we report every month to the midwife, Miss." (IU 5)

"..Yes, if it's a report, the Margototo Health Center routinely reports to the officer's office, we also have KAP monitoring at Lokus stunting village." (IT 1)

Evaluation of the program implementation process addressed to see the suitability of the implementation of activities with the plan (Yaswinda et al., 2022).

The stunting program at the Margototo Health Center is running well, such as providing assistance, counseling, education, and providing assistance. And all processes are carried out according to the specified schedule.

This is in line with research which shows the results that the process is the suitability of the implementation of activities with planning. Process evaluation was carried out to determine what was carried out in the activities against the planning carried out for each learning outcome for 15 students (Meiklejohn et al., 2023).

The results of other studies also explain that process evaluation is carried out to provide a continuous assessment of the implementation of activities. In addition, an open survey is given to students, instructors, and operators after the completion of each program module (Kim et al., 2022).

4) Product Evaluation

Based on the results of interviews conducted with informants who saw the impact and effectiveness of the program and saw the outcomes/results of implementing the stunting program, information was obtained:

"... yes, the stunting program activities which are carried out directly to the homes of KEK pregnant women and mothers who have stunted toddlers show a positive impact, Miss. It means that the people in the working area of the Margototo Health Center are very happy with this stunting program, Miss. So I think it's effective, Miss. this stunting program is implemented." (IU 1)

"..yes, because it's a bit difficult to get rid of this stunting case, because the period is long, judging from the age of 2 to 5 years right miss, so it's a long time anyway. So yo, if possible, this stunting program will continue until there are no more stunting cases, Miss." (IU3)

"... yes, we always go to the Puskesmas to keep trying, how can East Lampung be free of stunting?" Hopefully, with this stunting program, the stunting rate can be reduced, Miss. (IT 1)

"... yes, I'm happy to miss, wong was visited by his house, then given food assistance, given knowledge to cadres, not midwives, yes, before I didn't know that my child was stunted, yes, I consider it normal, Miss, the important thing is the child you can still play to Miss, now we are or what is stunting Miss." (IT 2)

"if you can help with food and house visits, you can do more, Miss, so that women like me will understand, Miss." (IT 3)

"..Yes, it's effective, madam, because I saw the exercise for pregnant women, which wasn't crowded before, so

they came, who didn't want to take their child to the Posyandu, Miss. (IU 4)

"..so the mothers now understand what stunting is, then how to prevent it, Dean I can guarantee you, almost 100% of the women in the working area of the Margototo Health Center already know everything about stunting. (IU 1)

".. Because mothers know what stunting is, Miss." (IU 3)

"..And I also think that mothers know more about stunting, Miss." (IU 4)

"..I think yes, miss. When I had a visit to the village at MMD, almost all the residents there knew what stunting was." (IT 1)

"..Yes Miss, because there is assistance from these cadres I understand what stunting is, so why can my child be stunted" (IT 2)

The product evaluation stage is a stage evaluation for measuring success programs according to the target set (Fatmawati et al., 2021).

Evaluation product also aims to identify desired and undesired outcomes and to measure their success in meeting targeted needs (Russon et al., 2018).

This matters in line with research showing that the effectiveness of evaluation products must be below 30%. By looking at the results of the four CIPP aspects and what needs to be improved, especially from the context, process, and product aspects (Muawanah et al., 2022).

Results study others also explained that product evaluation in the nursing education program provides knowledge to nursing students to be able to think critically about the preparation of students to treat patients in critical conditions in improving patient recovery, through the Nursing Education program (Lippe et al., 2018).

So as with previous research explained that assistance to families at risk of stunting is an effective strategy for empowering the community to increase the readiness of family members to prevent the risk of stunting (Saputra et al., 2020).

Achievements Public health center in implementing the program has reached the expected target, such as assistance being carried out to all target groups and PMT activities for pregnant women with KEK already running and being given according to the target. Unfortunately, stunting cases at the Margototo Health Center are still quite high, this is due to limited human resources in assisting families at risk of stunting. And this is also due to the funding or financial system that is still not supportive of program implementation, related to problems with the timing of disbursement of funds, as well as the proportion of the use of funds, especially from village funds. However, the Puskesmas will continue to make efforts so that the Margototo Puskesmas program is free of stunting in the future, as

well as the results of interviews with the Head of the Puskesmas, information obtained that after the stunting program was implemented.

Likewise, researchers explained that good mothers' knowledge can prevent the family and their children from nutritional problems, one of which is knowledge about feeding their children to prevent stunting. Because feeding is a factor that is significantly related to the incidence of stunting in children (Saputra et al., 2020).

Conclusion

The results of this study show that in the context aspect, the stunting program has been implemented in accordance with the planned objectives and on target. In the input aspect, there is still a lack of human resources in providing assistance, namely the number of cadres who are members of the Community Assistance Cadre (KPM), this is due to the lack of budget that supports the implementation of the stunting program, due to a delay in time in disbursing the budget. In the aspect of the process for program implementation, there are no significant obstacles, the process of implementing the stunting program is running as planned. In the product/output aspect, the stunting program has reached the expected target indicators, recording and reporting have run well. And the results of the implementation of the stunting program are shown by the results of maternal knowledge about stunting and the attitude of mothers who have stunting toddlers towards the incidence of stunting.

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Author Contributions

Conceptualization, Data Curation, Formal Analysis written Ida Rahayu who is the correspondent. Funding acquisition by the Health Human Resources Development and Empowerment Agency (BPPSDM Health). Investigation, Methodology, Project administration, Resources, Software by Ida Rahayu. Supervision, validation by Ida Rahayu, Syamsulhuda Budi Musthofa, Apoina Kartini. Writing-original draft by Ida Rahayu. Writing-review & editing by Ida Rahayu, Syamsulhuda Budi Musthofa, Apoina Kartini.

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Conflicts of Interest

The author states that there is no conflict of interest that occurs in this research.

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