

The Effectiveness of *Electronic Human Development Worker (E-HDW)* in Managing Stunting Rates in Rangkah Kidul Village, Sidoarjo District

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ABSTRACT

Objective: This study aims to describe and analyze the effectiveness of *Electronic Human Development Worker (E-HDW)* in managing stunting rates in Rangkah Kidul Village, Sidoarjo District through three main indicators, including E-leadership, Information Network Infrastructure, and Information Management. This e-HDW was developed to assist human development cadres (KPM) in recording, monitoring, and reporting stunting target data. **Method:** This study uses a qualitative method with a descriptive type. Data collection techniques are carried out through observation activities in the field, interviews with related parties, and collection of documents as information support materials. **Result:** As a result of the research on the E-leadership indicator, the village government has provided active support through training and provision of facilities for the use of E-HDW. The information network infrastructure is considered quite adequate, although there are still technical glitches such as server problems and system maintenance. In the information management indicators, the data in the E-HDW is stored and managed quite well, but information related to children's growth and development has not been presented completely and is not as accurate as data from the health center. **Novelty:** The novelty in this study focuses on the direct application at the village level as well as findings regarding the difference between child growth and development data displayed by E-HDW and manual health data from health centers, which can be used as evaluation material for future development, as well as providing a real picture of the challenges of applying digital technology in handling stunting in villages.

INTRODUCTION

Technological developments to date are taking place very rapidly around the world, bringing Indonesia to be carried away into the flow of change, both in terms of searching and receiving information [1]. This change has had a great influence on the government's work system, especially in terms of public services. One of the transformations that occurred was the shift from a paper-based administration system to an electronic administration system. The purpose of this change is to create public services that are more effective, efficient, and able to respond to the needs of the community quickly and precisely. E-Government is an information technology-based system implemented by the government to support the performance of the apparatus and improve public services. The implementation of E-government in various countries aims to encourage efficiency, transparency, and ease of access to public services [2].

The implementation of E-Government in Indonesia is strengthened by Presidential Instruction No. 3 of 2003 which emphasizes the use of information technology to encourage efficiency, effectiveness, transparency, and accountability to realize good governance [3]. Indrajit, 2006 explained that *E-Government* is the use of IT

by the government that aims to build more effective relationships with the community, the business world, and interested parties through internet-based public services [4].

One of the important sectors directly affected by the implementation of *e-Government* is the health sector. One example is the application of electronic systems in health services. Health services aim to ensure the fulfillment of the needs of individuals and communities in overcoming various health-related problems [5]. As written in Law Number 36 of 2009, health is a balanced physical, mental, spiritual, and social state, so that a person can live productively, both socially and economically. Every individual has the right to health services as part of efforts to improve the quality of health. These services play an important role in realizing more efficient, precise, and targeted health development [6].

Stunting is still one of the serious issues in the health sector, with a high rate in Indonesia compared to other countries. If not addressed immediately, stunting can have an impact on various aspects of development, such as economic slowdown, increasing poverty, and social inequality. Children who grow up healthy and get a good education have a great chance of becoming a productive generation. On the other hand, stunting can reduce a child's IQ by up to 10–15 points, reduce learning achievement, and reduce potential income in adulthood by up to 20% [7]. Based on data from the Indonesian Toddler Nutrition Status Survey (SSGBI), the prevalence of stunting decreased to 30.8 percent in 2018, and decreased again to 27.7 percent in 2019. After that, based on data from the Ministry of Health, the prevalence of stunting had reached 24.4 percent according to SSGBI. However, SSGI data in 2022 shows a decrease to 21.6 percent. Meanwhile, in Sidoarjo Regency in 2022, the Ministry of Health of the Republic of Indonesia shows that the stunting rate in Sidoarjo Regency is 16.1%. This figure of 16.1% is quite significant, considering that stunting can affect children's physical growth and intelligence in the long term. In addition, the stunting rate has increased compared to 2021 which was at 14.8%. This 1.3% increase shows that the handling of stunting in the area still needs serious attention [8]. Various interventions have been carried out, but the stunting rate in Indonesia is still at the threshold of 20% set by the WHO (World Health Organization). This condition shows that the handling of stunting in Indonesia has not been running optimally, and this problem remains an important challenge that must be prioritized by the government [9].

To understand why stunting is such a crucial and difficult challenge to handle, it is important to know the causes and long-term effects of this condition. The main cause of stunting is a lack of nutritional intake and health conditions, such as infectious and non-infectious diseases, which cause children's energy and nutrient needs to be not optimally met [10]. Children who are stunted become more susceptible to disease and experience decreased productivity in the future [11]. Stunting has a short-term impact in the form of a decrease in children's learning ability due to a lack of cognitive development. In the long run, this condition can affect the quality of life when children grow up, such as limited access to education, job opportunities, and a decent income. In

addition, stunting can also increase the risk of obesity later in life, which has the potential to trigger non-communicable diseases such as diabetes, high blood pressure, and cancer [12]. Therefore, children who experience stunting often face obstacles in the development of their brain and body. Until now, stunting is still an important global problem to be addressed immediately, and has been set as one of the main targets for improving world nutrition until 2025 [13].

In accelerating the reduction of stunting, the government utilizes digital technology by developing village-level applications. One of them is E-HDW, which was created by the Ministry of Villages with the support of the World Bank. This e-HDW is intended to assist Human Development Cadres (KPM) in monitoring the implementation of the stunting prevention convergence program. KPM itself is a village cadre who plays an important role in reducing stunting rates through various integrated activities under the guidance of the Community and Village Empowerment Office [14]. E-HDW is a digital solution that makes it easier for KPM to record and report stunting data through features such as My Tasks, Mapping, Diagnostics, Rembuk, Reports, and Media. The report is prepared every three months and annually in accordance with PKM No. 193/PMK.07/2018 [15]. E-HDW is specially used by KPM in villages in stunting prevention programs, through registered Android phones [16].

The use of E-HDW helps KPM have more time to advocate, assist residents, and develop stunting prevention programs with the village government. On the other hand, it also makes it easier for the central and regional governments to develop valid and integrated data-based policies. Referring to Law No. 6 of 2014, villages have the authority to prepare stunting handling programs, so that the active role of the village is very influential in reducing stunting rates [17].

As a tangible form of the village government's role in stunting prevention, Rangkah Kidul Village has carried out the active use of E-HDW and carries an important responsibility in managing its use, because it must ensure that the data collection and monitoring process for target families runs smoothly as part of efforts to improve public health. The following is data on the number of toddlers at the Posyandu of Rangkah Kidul Village, including the number of toddlers who have experienced stunting in the last three years:

Table 1. Stunting Data in South Rangkah Village

Yes		2022	2023	2024
1.	Number of Toddlers	143	154	167
2.	Number of Stunting Toddlers	10	10	7

Source: 2025 research results

Based on Table 1, it can be seen that the number of toddlers in Rangkah Kidul Village from 2022 to 2024, including data on toddlers who are stunted. In 2022 and 2023,

10 stunting toddlers were recorded each, while in 2024 the number decreased to 7 toddlers. Rangkah Kidul Village started using E-HDW in 2022. In each village, including Rangkah Kidul village, there is only 1 Human Development Cadre (KPM) to operate E-HDW. The following is the appearance of the E-HDW sub menu:

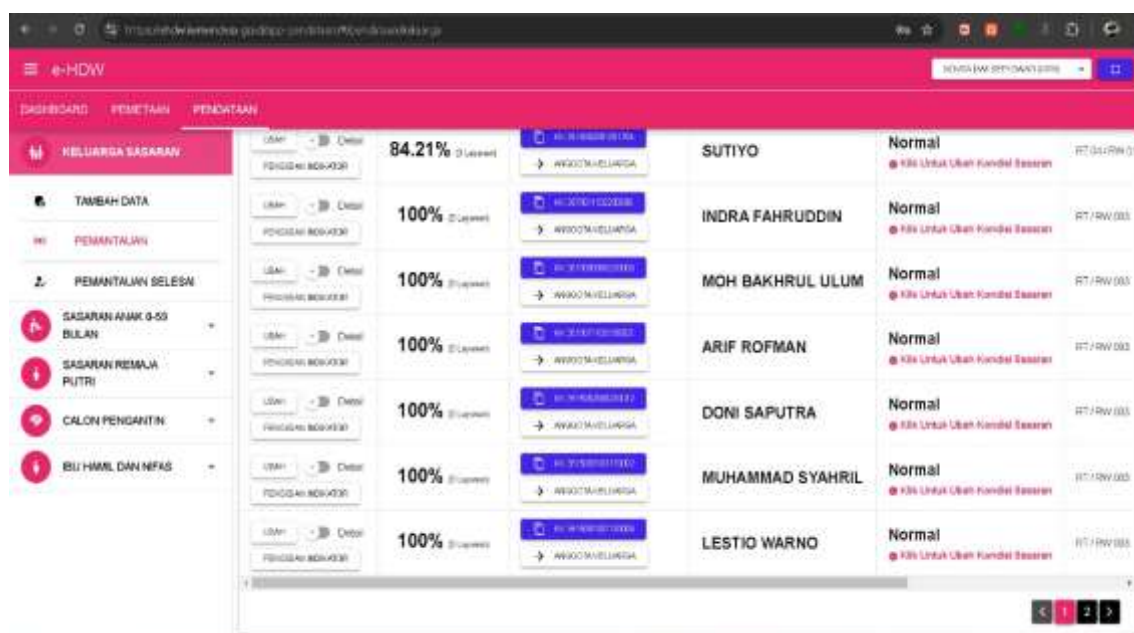


Figure 1. Sub Menu View *Electronic Human Development Worker* (E-HDW)

Based on figure 1 above, it shows a display related to E-HDW, where there are various features of E-HDW ranging from mapping and data collection, and in the data collection section there are several sub-menus ranging from adding data, monitoring, in the monitoring section there is an age description in E-HDW, namely targeting children, targeting adolescent girls, prospective brides and also pregnant women and postpartum women.

There have been several previous studies on the effectiveness of the implementation of stunting prevention applications. The first research was conducted by Siti Marfuah and colleagues (2024) with the title "The Effectiveness of the Elsimil Application (Electronic Ready for Marriage and Ready to Pregnancy) in Stunting Prevention at the Family Planning Extension Center of Pandawan District, Hulu Sungai Tengah Regency". This study aims to evaluate the effectiveness, supporting factors, and efforts that can be made to increase the effectiveness of Elsimil applications. The results show that the Elsimil application is quite effective in supporting stunting prevention in the region. However, there are still obstacles such as the lack of understanding of the application by the officers, inadequate facilities, and server interruptions that often occur [18].

Second, in a study conducted by Febianty Putri, Isna Muthmainna and team (2023) which examined "The Effectiveness of the Jago Ceting Program (Jagongan Prevent Stunting) in Rangkah Village, Tambaksari District, Surabaya City". The purpose of this study is to assess the effectiveness of the Jago Ceting program in efforts to handle and prevent stunting. The results of the study show that this program is quite successful

because it has run in accordance with the target, which is to reduce the stunting rate as part of the Surabaya Zero Stunting program. This program also has a positive impact on improving public health. However, in its implementation, a number of improvements are still needed, such as preventing the emergence of new cases, strengthening the implementation of the program, and increasing the intensity of activities so that the results are more optimal [19].

Third, in a study by Nurjana and colleagues (2024) entitled "The Effectiveness of E-HDW Application Innovation Communication in Increasing the Prevalence of Stunting Toddlers in Bengkalis Regency". The focus of this study is to analyze the effectiveness of communication in the use of the E-HDW application as a medium for disseminating information related to stunting reduction efforts. The results show that the E-HDW application has been used effectively in supporting the reporting and information distribution process. This effectiveness can be seen from various aspects, such as ease of use, message content and format, delivery media, information sources, and punctuality. As a digital solution, this application is very helpful for villages in data collection, monitoring, recording, and reporting on stunting prevention efforts from the village to the district level, while supporting the achievement of national targets [16].

Based on the explanation that has been described above, it shows that there are still obstacles that cause the effectiveness of E-HDW to be said to be maximum, this is due to the lack of ease of access to E-HDW and frequent maintenance or novelty, and also the delivery of information is still incomplete. Therefore, the researcher will analyze and describe concretely the effectiveness of *Electronic Human Development Worker* (E-HDW) in the Management of Stunting Rates in Rangkah Kidul Village, Sidoarjo District by using the theory according to Nahrawi in hardiansyah (2011:117), namely E-Leadership, Information Network Infrastructure, and Information Management.

RESEARCH METHOD

This study uses a descriptive approach that aims to collect and describe information in depth through direct observation and information from respondents regarding the effectiveness of the use of *Electronic Human Development Worker* (E-HDW) in managing stunting rates in Rangkah Kidul Village, Sidoarjo District. The location of the research is in Rangkah Kidul Village, Sidoarjo Regency. The author uses the purposive sampling technique, which is the selection of subjects based on certain criteria, with the aim of obtaining as much information as possible from various relevant parties and exploring the data that is the main foundation in this study [20][21]. The informants in this study are Mrs. Novita Dwi Setyowati as a Human Development Cadre at the Rangkah Kidul Health Command and Mr. Eko Teguh Surachman as a representative of the Rangkah Kidul village government. Data collection in this study was carried out through three methods, namely observation, interviews, and documentation, utilizing primary and secondary data. Primary data was obtained directly from observations in the field, interviews with resource persons, and related

documentation. Meanwhile, secondary data is obtained from various references such as journals, scientific articles, official documents, and mass media reports relevant to the research topic. The focus of this research is Effectiveness *Electronic Human Development Worker* (E-HDW) in the Management of Stunting Rates in Rangkah Kidul Village, Sidoarjo District. which will be measured using the theory by Nahrawi in Hardiansyah (2011:117), covering three aspects, namely E-Leadership, Information Network Infrastructure, and Information Management. To analyze the data, the researcher uses an analysis model from Miles and Huberman (1994), which consists of several stages: data collection, summarizing or reducing data, presenting data in an easy-to-understand form, and drawing the final conclusion from the findings [22].

RESULTS AND DISCUSSION

Results

Effectiveness comes from the word *effective*, which can be interpreted as a condition for the success of a person or a party in achieving a pre-planned goal. In other words, effectiveness shows the extent to which the results achieved are in line with expectations. In an organizational context, effectiveness is very important because it is the key to success. Before carrying out activities efficiently, we must affirm that the steps taken are appropriate and in accordance with the goals we want to achieve [23][24]. This study measures the effectiveness of the *Electronic Human Development Worker* (E-HDW) application in managing stunting rates in Rangkah Kidul Village using three indicators from Nahrawi's theory in Hardiansyah (2011), namely: E-Leadership, Information Network Infrastructure, and Information Management.

1. E-Leadership

E-Leadership refers to a form of leadership that emphasizes the use of information technology to support rapid and effective decision-making. The Rangkah Kidul Village Government provides support in the implementation of the E-HDW application, including the provision of operational tools and technical training for cadres. The device is handed over to the operator who is in charge of managing the application in stunting data collection. Training on the use of E-HDW has been facilitated at the sub-district level, and village cadres are also involved in the activity. The training is more focused on technical aspects so that the implementation of recording and reporting runs smoothly in the field. Coordination is carried out with the posyandu in the implementation of the application. However, the involvement of the health center is still limited because this application is under the authority of the Ministry of Villages, not the direct health sector.

The following is a picture related to joint training in the use of *E-HDW*:



Figure 2. Joint Training on the Use of E-HDW
Source: South Rangkah Village Government

2. Information Network Infrastructure

The readiness of network infrastructure is an important factor in the success of digital systems such as E-HDW. The village government provides two internet networks to support E-HDW operations, namely IndiHome (50 Mbps) and MyRepublic (30 Mbps), which are placed at the village hall. This connection is used for data processing activities in the village office environment. Although the infrastructure has been prepared, some cadres use personal connections more often due to the limited time to access the village hall regularly. In addition, in the implementation of applications in the field, technical problems such as server errors and maintenance were still found that were not informed in advance.

3. Information Management

Information management includes the process of storing, processing, and presenting data so that it can be used as a basis for decision-making. In this case, the E-HDW application is used to record basic data of the target family such as pregnant women, toddlers, and brides-to-be. The data is stored digitally with a system designed to maintain confidentiality and cannot be accessed by unauthorized parties. As a form of backup, manual recording is still carried out in parallel to anticipate data loss. However, the data displayed is still limited. The information available on the application generally records the child's attendance at the posyandu, without including details of physical conditions such as weight and height. Some more complete growth and development data is available at the health center, and has not been integrated into the E-HDW system. This is evidenced by the image below regarding the display of E-HDW information:

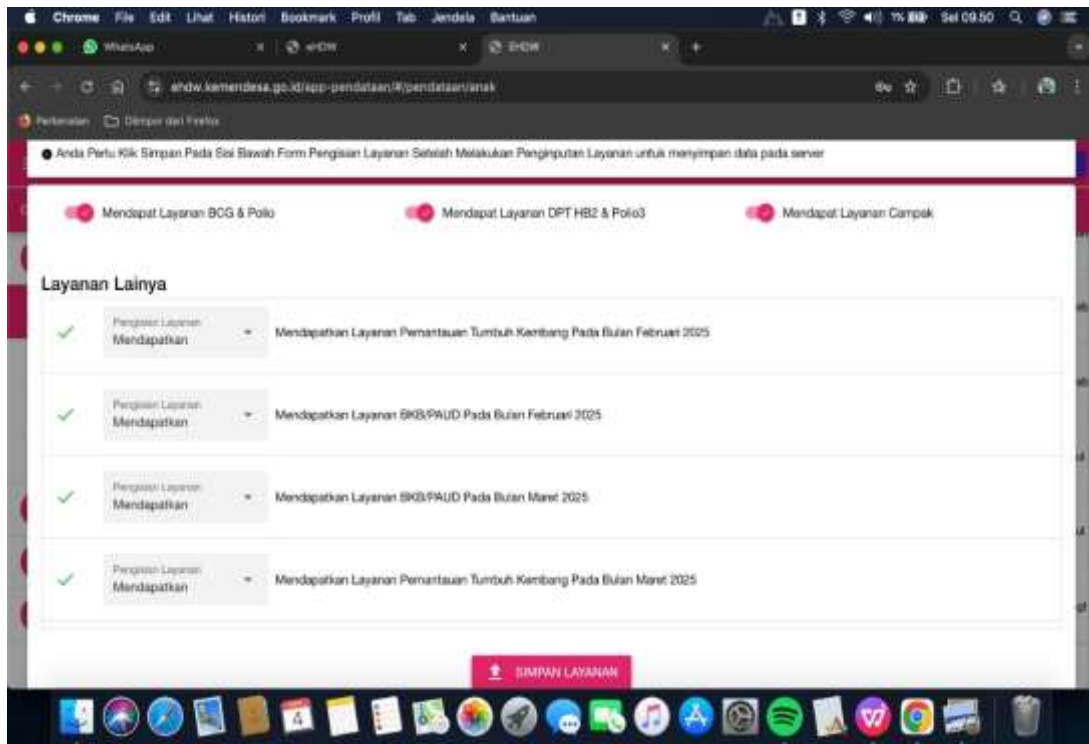


Figure 3. E-HDW Information Display
Source: South Rangkah Village Government

Discussion

Based on the survey results on the E-Leadership indicator in the implementation of E-HDW in Rangkah Kidul Village, it shows quite good performance. The implementation of this application has been facilitated through the provision of devices, technical training, and operational support to ensure that the application can be used functionally by field officers. This action shows a commitment to the use of information technology in public services, as explained in the concept of E-Leadership according to Nahrawi in Hardiansyah (2011), which emphasizes the importance of adaptive leadership to digital transformation. Technical training held at the sub-district level has been the first step in increasing the capacity of application users, especially in terms of recording and reporting stunting data. Although the training has been carried out, cross-sectoral coordination, especially with health workers from health centers, has not been carried out optimally. This shows that the role of E-Leadership still focuses on internal and technical aspects, not yet fully achieving more strategic cross-sector integration. These findings are in line with a study conducted by Ida Syafriyani (2018), which emphasizes that effective digital leadership must include collaboration across work units, understanding technology, and long-term orientation towards public services [25]. Therefore, to optimize E-Leadership, it is necessary to expand coordination networks and closer synergy with other stakeholders in the field of village health.

From the results of the information network infrastructure indicators in Rangkah Kidul Village, it can be categorized as quite adequate, with the availability of two high-speed internet networks from two different service providers. This condition shows an

awareness of the importance of guaranteed technological facilities to support the operation of the E-HDW application. Nahrawi's theory in Hardiansyah (2011) states that a good information infrastructure includes aspects of access availability, efficiency, and network quality as part of the success of digital information systems. Although the network is technically available, its utilization is not optimal. The use of private networks by officers outside the village office is an indicator that the system is not yet flexible for users who work on mobile. In addition, technical glitches such as system errors and unscheduled maintenance also hinder the smooth work process. This situation illustrates that infrastructure readiness needs to be supported by system management that is responsive to field dynamics. These results are in line with the study of Kristina E.T. Lobho et al. (2024), which states that the digitalization of health programs will not run effectively without the support of stable, affordable, and able infrastructure that is able to respond quickly to technical constraints [26]. Therefore, even though the provision of the network has been implemented well, strengthening the managerial aspects and technical policies is key to ensuring the sustainability of the application utilization as a whole.

Based on the results of the information management indicators in the E-HDW application, it has met basic standards in terms of data security and systematic recording. Information related to intervention targets such as pregnant women, toddlers, and brides-to-be is recorded in the system, with a recording procedure that prioritizes privacy and is supported by manual recording as a data backup. This concept is in accordance with the principles of information management described by Nahrawi in Hardiansyah (2011), namely accuracy, sustainability, and data protection. However, problems arise in terms of the completeness of the data content. The information in the application only records the child's attendance at the posyandu without including growth indicators such as weight and height. In fact, these indicators are important as the basis for stunting policy making at the village level. This difference in data content causes the application to not be fully used as a decision support system based on actual health data. The insynchronization between the data in the E-HDW application and the data of the health center shows the need for a more comprehensive integration of information systems. This finding is supported by the research of Yemiranda Naomi Sihombing et al. (2025), which concludes that the inaccuracy of information content in digital systems is the main obstacle in the effectiveness of digital health services. Therefore, improving the depth and quality of data content is an important agenda in strengthening the strategic function of the E-HDW application.

Based on the results of the discussion of the three indicators, it can be concluded that the implementation of E-Government through the E-HDW application in Rangkah Kidul Village has shown quite good efforts, especially in terms of technical support and infrastructure provision. The village government has provided devices, internet networks, and technical training to support application operations. This reflects the awareness of the importance of digital transformation in public services, especially in

efforts to manage stunting data. However, the implementation of this program still faces a number of obstacles. One of them is the limited cross-sector coordination, especially with the health center, which causes the integration of health data to be not optimal. In addition, technical disruptions to systems and cadres' reliance on private networks suggest that infrastructure readiness needs to be balanced with more responsive technical management. The E-HDW application is also not able to display detailed data on children's growth and development, so its function as a data-based decision-making tool has not been optimal. The mismatch between the needs of the field and the content of the application is a challenge in itself, especially in the context of the quality of the data displayed. Although the system has helped the process of recording basic interventions, it has not fully met the analytical needs needed for comprehensive stunting monitoring. This shows that the success of E-HDW is determined not only by the existence of a digital system, but also by institutional support, cross-sector data integration, and the strengthening of the information content provided by the application. This research provides an understanding that the effectiveness of digital applications in village health services cannot be separated from the collaborative commitment between village officials, cadres, and health workers. For this reason, there is a need for strategic steps to strengthen coordination, improve technical infrastructure, and ensure that the information system used can provide accurate, complete, and in-depth data according to the needs of the stunting reduction acceleration program at the village level.

CONCLUSION

Fundamental Finding : This study highlights the effectiveness of *the Electronic Human Development Worker* (E-HDW) application in Rangkah Kidul Village through three indicators of e-Government success according to Indrajit, namely E-Leadership, Information Network Infrastructure, and Information Management. First, the implementation of E-HDW received active support from the village government through cadre training, provision of supporting tools, and cross-sector coordination. Second, the network infrastructure in the village has been prepared quite well, supported by two internet providers, but it is still constrained by technical problems. Third, the information management system in E-HDW is considered quite secure and structured, but the quality of the data is not accurate, especially child growth and development data which is not always in accordance with the data of the health center. This has an impact on the effectiveness of monitoring and decision-making in stunting reduction programs. **Implication :** The results of this study show that the success of the use of E-HDW is influenced by active village leadership, readiness of technological infrastructure, and the skills of cadres in operating the system. Implicitly, other villages that want to adopt E-HDW need to ensure regulatory and budgetary support, strengthening human resource capacity, and data validation that is consistent with health facilities to support more accurate and sustainable stunting monitoring. **Limitation :** This study has limitations in a qualitative descriptive approach with purposive sampling techniques, which only

involves certain informants from elements of the village government and cadres. This limits the generalization of the findings broadly. In addition, the absence of quantitative data and long-term analysis makes the effectiveness of E-HDW statistically unmeasurable over time. **Future Research** : Based on existing limitations, it is recommended that further research use a mixed approach and be carried out comparatively in several different areas. Future research can also add longitudinal analysis to see the effect of E-HDW implementation on stunting reduction in the long term, as well as evaluate the quality of the data and its impact on the effectiveness of the program at the village level.

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