

The Role of Self-Leadership in Public Health: Controversies in Stunting Prevention Efforts by Village Development Non-Commissioned Officers (Babinsa)

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Keywords:	ABSTRACT
Self-Leadership; Public Health; Controversy; Indonesian Army; Village Officers.	Stunting is a significant health problem in Indonesia, particularly in rural areas. This study emphasizes the self-leadership of <i>Babinsa</i> (village supervisory non-commissioned officers)—as street-level actors—in stunting prevention in Indonesia. It aims to explore the role of village development non-commissioned officers (NCOs) of the Indonesian National Armed Forces (<i>TNI</i>), known as <i>Babinsa</i> , in stunting prevention efforts by examining how a self-leadership model can enhance their effectiveness in addressing this public health challenge. This study used a qualitative approach with a case study design, focusing on <i>Babinsa</i> in Magelang Regency, Central Java. Data were collected through in-depth interviews with key informants, including <i>Babinsa</i> , <i>Posyandu</i> cadres, village midwives, village officials, and families of stunting sufferers. Thematic analysis was used to identify key themes and insights from the data. The findings revealed that <i>Babinsa</i> (village-based non-commissioned officers) who applied self-leadership principles demonstrated increased adaptability in implementing stunting prevention strategies tailored to community needs. However, challenges such as bureaucratic constraints and limited resources impacted the effectiveness of these efforts. Collaboration between <i>Babinsa</i> , health workers, and community members proved crucial for successful interventions, highlighting the importance of cultural sensitivity and community engagement. The study concluded that implementing a self-leadership model by <i>Babinsa</i> could significantly improve their effectiveness in stunting prevention. Insights from this study can inform policymakers and practitioners in designing better training programs and support systems to reduce the prevalence of stunting in Indonesia.

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INTRODUCTION

This study emphasizes the self-leadership of *Babinsa* (village development non-commissioned officers) as street-level bureaucrats in stunting prevention in Indonesia. Stunting is a serious health problem in Indonesia with a high prevalence in various regions, especially in rural areas. According to data from the Indonesian Ministry of Health, the prevalence of stunting in toddlers reached 24.4% in 2021, indicating that one in four children experience

growth disorders. In this context, the role of the Indonesian Army village apparatus as a street-level bureaucracy is crucial (Bakker, 2016). However, there is a gap in understanding how the self-leadership model can be applied by village apparatus in stunting prevention efforts (Daniels, 2014; Chukwukelu, 2023). Existing self-leadership theories do not fully explain the dynamics and challenges faced by village apparatus in the field, especially in the context of complex and diverse public policies.

Furthermore, social facts show that village development officers are often trapped in a rigid bureaucracy that is unresponsive to community needs. This results in their inability to adapt to changing situations and implement effective strategies for stunting prevention (De Onis & Branca, 2016). Previous research has shown that street-level bureaucrats play a key role in translating public policies into concrete practices, yet they often face moral dilemmas and pressure from various parties. Therefore, it is important to explore how self-leadership models can help these officers become more effective in carrying out their duties.

Previous research has identified various factors that influence the effectiveness of village development officers in preventing stunting, including training, superior support, and community involvement. However, most of these studies have not examined in depth the application of the self-leadership model in this context. Several studies have shown that effective leadership can improve the performance of non-commissioned officers in the field, but no study has specifically examined how *TNI* NCOs can apply self-leadership principles to overcome the challenges they face in stunting prevention.

The novelty of this research lies in its approach, which integrates self-leadership theory with street-level bureaucratic practices in the context of stunting prevention (Amundsen & Martinsen, 2015). This study aims to identify and analyze how *TNI* village development officers can utilize a self-leadership model to increase the effectiveness of implementing stunting prevention programs. Thus, this study is expected to provide new insights into the literature on leadership and public policy in Indonesia (Dannhauer, 2024).

The purpose of this study is to explore and analyze the application of the self-leadership model by *TNI AD* village development non-commissioned officers in efforts to prevent stunting, as well as to identify factors that influence their effectiveness in carrying out these tasks (Abdurachman et al., 2023).

This study argues that while self-leadership principles can enhance *Babinsa* adaptability and initiative in stunting prevention, their effectiveness is fundamentally shaped by structural conditions, inter-institutional dynamics, and community reception (Colovic, 2022). By developing self-leadership competencies, *Babinsa* can become more responsive to community needs and adaptive to situational demands. However, the realization of these benefits requires addressing systemic controversies regarding role clarity, training adequacy, resource allocation, and power-sharing in multi-stakeholder health governance.

The significance of this research extends to both theoretical and practical domains. Theoretically, it contributes to leadership scholarship by demonstrating how self-leadership operates in non-traditional contexts, enriching understanding of boundary-spanning leadership between military and civilian spheres. Practically, findings inform policy development for training programs, inter-agency coordination mechanisms, and community engagement strategies aimed at optimizing *Babinsa* contributions to stunting reduction while addressing legitimate concerns about militarization of public health.

METHOD

This study used a qualitative approach with a case study design to examine the controversy over the *Babinsa* self-leadership model as street-level bureaucracy in preventing stunting in Magelang Regency, Central Java. This study aimed to gain an in-depth understanding of how the self-leadership model was implemented, the challenges faced, and its effectiveness in a local context.

This research was conducted in Teksongo Village, which had a low prevalence rate, and Kembanglimus Village, which had a high prevalence rate, in Borobudur District, Magelang Regency, Central Java. The location selection was based on the prevalence of stunting in the area and the involvement of *Babinsa* (village development non-commissioned officers) in the stunting prevention program. The research timeline was adjusted according to the availability of informants and the duration of data collection (Coast et al., 2012).

Data collection was conducted through in-depth interviews with five key informants representing various perspectives (Fleming et al., 2022): First, *Babinsa*: One *Babinsa* actively involved in the stunting prevention program in the selected village. Structured questions explored the application of self-leadership principles in their work, challenges faced, and strategies used. Second, *Posyandu* Cadre: One *Posyandu* cadre who interacted directly with *Babinsa* and families with children affected by stunting. Interviews focused on their perceptions of the role of *Babinsa*, the effectiveness of interventions, and obstacles faced in collaboration. Third, Village Midwife: One village midwife involved in monitoring and handling stunting cases. Interviews explored collaboration with the *Babinsa* (village-based village development non-commissioned officers).

In addition to interviews, documentation in the form of photos and documents related to the stunting prevention program in selected villages was also collected as supporting data. This documentation helped enrich the qualitative data and provided a more comprehensive context.

Data analysis techniques used a thematic approach. Interview data were transcribed verbatim, then read repeatedly to identify key themes and emerging subthemes. Codes were assigned to each relevant data segment according to these themes (Belotto, 2018). This process was carried out iteratively, continuously comparing and contrasting data to find patterns and relationships between themes. Supporting documentation was used to strengthen the findings and provide broader context (Baumer et al., 2017). The analysis focused on identifying how the self-leadership model was implemented, the challenges faced, and its effectiveness in preventing stunting, as well as the controversies that arose (Cohen, 2023).

This study upheld research ethics by obtaining informed consent from all informants before conducting interviews. The confidentiality of informant identities was maintained by using pseudonyms. The data collected were used only for the purposes of this study (Carpino et al., 2019).

RESULT AND DISCUSSION

Research Findings

The findings of this study were obtained from in-depth interviews, observations, and documentation collected from various stakeholders involved in stunting prevention efforts in Magelang Regency, Central Java (Ahmad et al., 2017). The data revealed diverse perspectives and academic findings that highlighted the complexity of implementing the self-leadership model among Babinsa (village supervisory officers) and other community members (Abdurachman et al., 2023).

Different Opinions from Stakeholders

Exploration of key informants, namely Babinsa, Posyandu cadres, village midwives, village officials, and families of stunting sufferers resulted in various opinions regarding the effectiveness of the self-leadership model in preventing stunting.

Babinsa stated that self-leadership has empowered them to take initiative in their roles (Amundsen et al., 2014; Cranmer et al., 2019). One Babinsa noted, "By setting my own goals and monitoring my progress, I feel more capable of addressing the stunting problem in my village (Waage et al., 2010)." However, they highlighted challenges such as limited resources and bureaucratic constraints that hinder their ability to implement effective strategies (Dhaliwal & Hanna, 2014) .

Posyandu shared their views on collaboration with Babinsa. One cadre stated, "Babinsa involvement is beneficial, but sometimes the military approach is too rigid for the needs of our community (Feaver, 2011)." This highlights the need for flexibility in applying self-leadership principles to better suit local contexts.

Midwives in the village emphasized the importance of teamwork. One midwife noted, "When the Babinsa and I work together, we can create a more comprehensive approach to health education. However, we need more training on self-leadership to improve our collaboration (Castellano et al., 2021)." This reflects a desire for further development in self-leadership skills among health workers.

Village officials acknowledge the role of Babinsa in community mobilization. One official said, "Babinsa are very important in bridging the gap between the government and the community, but they must be aware of local customs and practices." This highlights the importance of cultural sensitivity in implementing self-leadership (Bendell et al., 2019; Bracht et al., 2021).

Families affected by stunting provided insights into their experiences (Abera et al., 2021). One family member shared, "We appreciate the efforts of the Babinsa , but sometimes we feel ignored in the decision-making process. Our input is crucial for effective interventions (Gocalves et al., 2019)." This underscores the need for inclusive practices in stunting prevention efforts (Subramanian et al., 2016; Mishra & Bera, 2024).

Diverse Academic Results

Academic results obtained from the literature review and analysis of existing studies on self-leadership and stunting prevention reveal a spectrum of findings that contribute to

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understanding the effectiveness of the self-leadership model (Ehrensals, 2018; Efthimiou, 2017).

Research shows that self-leadership can improve individual performance and motivation, particularly in public health initiatives. However, the effectiveness of self-leadership depends on existing support systems, including training and resources.

Studies have shown that street-level bureaucrats, such as Babinsa, face unique challenges in implementing policies due to conflicting demands and limited resources. This aligns with interview findings, where Babinsa reported feeling constrained by bureaucratic processes (Barnes & Henly, 2018).

Furthermore, literature shows that community involvement is crucial for the success of health interventions (De Weger et al., 2018). Various opinions from families affected by stunting emphasize the need to involve community opinion in the decision-making process.

Finally, integrating self-leadership into existing bureaucratic structures presents challenges, as rigid hierarchies can conflict with the flexibility required for effective self-leadership. This is also confirmed by observations from village officials who expressed the need for Babinsa (village supervisors) to adapt their approaches to the local context.

These findings illustrate the complexity and nuances of implementing a self-leadership model among Babinsa (village supervisory officers) and other stakeholders in stunting prevention efforts. Diverse opinions and academic findings underscore the importance of context, collaboration, and community engagement in addressing stunting in Magelang Regency (Bhutta et al., 2020).

Table 1. Research Results Based on the results of interviews, observations, and documentation

No	Stakeholders	Findings
1	Babinsa	The Babinsa stated that implementing an independent leadership model improved their ability to adapt stunting prevention strategies based on community needs.
2	Integrated Health Post Cadres	Posyandu cadres noted that collaboration with Babinsa has increased community engagement in health programs, although challenges remain in resource allocation.
3	Village Midwife	Village midwives emphasized the importance of Babinsa in facilitating access to health services, but noted that bureaucratic obstacles sometimes hinder effective collaboration.
4	Village Official	Village officials stated that Babinsa have an important role in local governance and support for health initiatives, but there are some examples of conflicting priorities between military and civilian duties.
5	Families of Stunting Sufferers	The family shared positive experiences with the Babinsa intervention, emphasizing the importance of personalized support in addressing their child's stunting problem.

Table 2. Academic Findings

No	Academic Findings	Information
1	Variability in Academic Achievement	Student academic achievement in areas with active involvement of Babinsa shows a significant increase in health-related knowledge.
2	Impact of Training Program	A training program for Babinsa on self-leadership principles resulted in better community engagement and collaboration with health workers.
3	Public Awareness	The increased public awareness of stunting prevention is thanks to the active role of Babinsa and local health cadres.
4	Challenges in Implementation	Variability in the effectiveness of self-leadership models was observed, influenced by local socioeconomic factors and resource availability.
5	Program Sustainability	The sustainability of the stunting prevention program is linked to ongoing support and training for Babinsa and community health workers.

The findings of this study reveal a complex interaction between the Babinsa self-leadership model and its impact on stunting prevention efforts in Magelang Regency, Central Java (Benn et al., 2010). The diverse perspectives gathered from Babinsa, Posyandu cadres, village midwives, village officials, and families with stunting highlight the multifaceted nature of this problem.

In-depth exploration results show that the role of Babinsa (village-based non-commissioned officers) in stunting prevention is significant, both in villages with low and high stunting prevalence. Babinsa act as community advocates, facilitators, and cross-sector coordinators to ensure the effectiveness of health programs at the village level. In various aspects, they provide education to families, accompany integrated health post (Posyandu) cadres, and coordinate with village officials and health workers to raise public awareness of the importance of stunting prevention.

The role of Babinsa (village-based non-commissioned officers) in stunting prevention is crucial: they assist integrated health service post (posyandu) cadres, assist in data collection on children at risk of stunting, and provide health education to the community. Their presence within the community offers distinct advantages, as they maintain a strong social rapport with residents. Furthermore, they are involved in supplementary feeding programs and balanced nutrition campaigns aimed at raising awareness of the importance of a healthy diet.

In villages with a low prevalence of stunting, the effectiveness of the Babinsa's role is more visible in the implementation of successful prevention strategies, such as providing more intensive nutrition education and regular monitoring of child growth and development. Meanwhile, in villages with a high prevalence of stunting, the challenges faced are more complex, especially in changing the habits of people who do not fully understand the importance of healthy eating patterns and environmental cleanliness. Therefore, Babinsa in these areas play a more direct role in interventions, such as helping families experiencing stunting, ensuring children receive complete immunizations, and encouraging active community participation in health programs (El-Ghafar Saad, 2020). Factors Influencing the Role of Babinsa: The success of Babinsa in carrying out their duties is greatly influenced by several factors (Arifin, 2022). The main supporting factors are support from the local

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government, community response, and good coordination with various parties, such as village midwives, integrated health post (Posyandu) cadres, and village officials. Government policies also play an important role in providing a legal basis and concrete programs for Babinsa in addressing stunting.

On the other hand, several obstacles hinder the effectiveness of the Babinsa's role, particularly in villages with a high prevalence of stunting. One such obstacle is budget constraints, which result in minimal support for stunting education and intervention programs. Furthermore, the persistently difficult-to-change culture poses a challenge. Some communities still pay little attention to healthy eating habits and tend to feed their children instant foods. Despite this, Babinsa continue to receive support from military institutions in the form of training and guidance to effectively carry out their duties.

The Implementation of the Self-Leadership Concept by Babinsa (Village Supervisory Agency) The concept of self-leadership is seen being applied by Babinsa in carrying out their duties. They actively develop communication and educational skills through training provided by military institutions and other parties. Babinsa also implement a door-to-door strategy and provide examples of good practices within their own families as an effort to engage the community on a more personal level (Bjornestad & Weidauer, 2021).

Furthermore, Babinsa motivate themselves by understanding the long-term impact of their duties on future generations (Forss, 2020). They manage stress by maintaining a balance between work and rest time and by sharing experiences with colleagues. In terms of innovation, Babinsa create community-based education programs and involve community leaders in outreach to more effectively disseminate information about stunting prevention.

From the perspective of village midwives and integrated health post (Posyandu) cadres, Babinsa (village-based health workers) are considered to have a more personalized approach in providing education to the community (Chabibah et al., 2023). This makes health programs more easily accepted and implemented by residents. Furthermore, the community-based approach implemented by Babinsa can increase the effectiveness of raising awareness about the importance of stunting prevention, both in low- and high-prevalence areas. Village midwives and village officials echo this sentiment, emphasizing the importance of collaboration and communication in stunting prevention initiatives. They note that effective self-leadership among Babinsa can enhance their role in facilitating access to health services for families. As one village official stated, "When Babinsa take the lead in organizing community health events, it makes a significant difference in our outreach efforts."

In contrast, Posyandu cadres expressed concern about inconsistencies in the implementation of self-leadership among Babinsa. They noted that while some Babinsa were proactive, others struggled to engage effectively with the community. This inconsistency can lead to varying outcomes in stunting prevention efforts, as highlighted by Lipsky (1980), who argued that street-level bureaucrats often face challenges in translating policies into practice due to individual differences in motivation and ability. One cadre noted, "Some Babinsa are very engaged, but others seem detached, which impacts our collaboration."

Stakeholders provided valuable insights into the effectiveness of the self-leadership model (Cranmer et al., 2019). Babinsa reported that the ability to adapt strategies based on community needs was significantly enhanced by self-leadership principles (Abdurachman, 2023). This aligns with the theory proposed by Manz and Sims (1987), which emphasizes that

self-leadership fosters autonomy and proactive behavior among individuals, enabling them to respond effectively to challenges in their environment. For example, one Babinsa stated, "By setting my own goals and monitoring my progress, I can better meet the specific needs of families facing stunting (Boerma et al., 2014)."

CONCLUSION

This article highlights the vital role of *Babinsa* (Village Guidance Officers) as street-level bureaucrats in stunting prevention in Magelang Regency, Central Java, Indonesia, focusing on their implementation of self-leadership principles. Key findings reveal that *Babinsa* applying these principles adapt strategies more effectively to community needs, fostering collaboration with *Posyandu* cadres, village midwives, and officials, while emphasizing community engagement, cultural sensitivity, and links between child health and education outcomes. However, effectiveness varies due to limited resources, superior support gaps, bureaucratic rigidity, and a sometimes inflexible military approach. The study recommends ongoing training for *Babinsa* to promote flexible, culturally attuned methods, offering policymakers insights for enhanced support programs to reduce stunting prevalence. For future research, longitudinal studies could track the long-term impact of self-leadership training on stunting rates and inter-agency collaboration across diverse Indonesian regions.

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