Child Nutrition Problems in Indonesia

Basic Health Research (Riskesdas) 2010 mentioned that children under 5 years old (toddler), 18% of them were under weight, 5% were malnourished, and 13% were undernourished, meanwhile national prevalence of obesity in children under five based on weight and height had reached 14%.1

The double burden of malnutrition was characterized by coexisting of under-nutrition along with obesity, had created many nutrition problems in Indonesia. Malnutrition in children might not optimize their physical and brain development, and lead to become underweight and stunting. If that problem wasn’t resolved it could cause the potential loss of young and smart generation to being incompetence and unproductive in the future. Meanwhile, over-nutrition could lead to obesity and was associated with various degenerative diseases, such as diabetes mellitus, hypertension, hypercholesterolemia and heart disease.

In addition, data limitations caused the government and nutritionists face difficulties in addressing the right health program. The existing data to combat nutritional problems were only available for children aged 0 month to 5 years and it didn’t cover the required overall data till 18 years of age. Meanwhile the children aged 6 to 18 years had more complex problems.

SUMMARY

The nutrition and health program was implemented at Kampung Badran, Jetis District, Yogyakarta, and had three pillars program, namely (1) improving child nutritional quality, (2) revitalizing the Early Childhood Education (ECD/PAUD) institute, and (3) empowering women’s economy. Kampung Badran was chosen to become the target area because there were many children under five in the community who suffered from malnutrition (malnourished and undernourished). Mothers and children under five in Kampung Badran were the beneficiaries of this program.

Sarihusada and PKPU started their partnership in 2009 and conducted a community empowerment program in Badran area, Jetis, Yogyakarta. Until 2014, the partnership had educated more than a thousand
of group members, revitalized PAUD activities from once a month to three times a week, helped build PAUD facility, increased knowledge and skills of teachers and managers of PAUD, developed lesson manual and made the PAUD as one of the pilot project in Yogyakarta.

In addition, the program had increased the awareness of mothers about balanced nutrition and thus lower the children malnutrition problem. Before the program came to an end, Sarihusada had built a community center called Rumah Srikandi program as the part of the post-program sustainability.

The partnership between both organizations from 2009 to 2014 was based on the shared vision to improve the community’s quality of life through improvement nutrition and health quality; and improve the quality of PAUD quality; and increase the economic quality.

THE PARTNERS

Sarihusada (www.sarihusada.co.id) was established in 1954 as an initiative between Government of Indonesia and UNICEF to address the national problem of nutritional deficiency on children. Along the journey, it had endured several changes of ownership and in 2007, Sarihusada had joined as the subsidiary of Danone Group with its headquarter in France.

Over its sixtieth year, Sarihusada had more than 1,000 employees throughout Indonesia and operates its production facilities in Yogyakarta and Klaten, Central Java to produce various nutritional products for mothers and children.

In marketing its products, Sarihusada ensures compliance with the Danone Charter’s internal marketing ethics. The code refers to the ethics and principles of World Health Organization’s International Code of Marketing of Breast-Milk Substitutes (WHO Code) and subsequent relevant World Health Assembly resolution.

Sarihusada also works with health practitioners, nutritionists, policy makers and other stakeholders to provide necessary education in nutrition as well as mother and child health.

Pos Keadilan Peduli Umat/PKPU (www.pkpu.or.id) is a social nonprofit organization engaged on humanitarian rescue, rehabilitation and community development. It was established in 1999 as humanitarian organization. Later on, in 2001 PKPU was decided by the government as the National Amil Zakat Institution, to collect, distribute and manage alms giving. In 2008, PKPU was officially registered in the UN Economic and Social Council (Ecosoc) for “Special Consultative Status”, which has the privilege to participate in the social and economic consultative activities convened by the UN.

INITIATING THE PARTNERSHIP

Sarihusada and PKPU initially partnered in a disaster emergency program sometimes in 2006, rebuilt the employee’s houses damaged by the earthquake in Yogyakarta. From that project, both organizations continued with another partnership on child nutrition improvement (malnourished and undernourished) in five villages in Klaten, Central Java in 2008 – 2009.

Upon completion the Klaten program, Sarihusada invited PKPU to partner in a nutrition improvement program in Kampung Badran Yogyakarta with a more comprehensive approach. This program was implemented from 2009 to 2014.

IMPLEMENTING THE PARTNERSHIP

Sarihusada started the program by communicating the Municipality of Yogyakarta, and introduced the Nutrition Improvement program which also include the quality improvement of the health, PAUD, and economic empowerment. The program can work well together with the program of Yogyakarta City. The introduction received good response from the City and subsequently agreed on Kampung Badran as the program area with the consideration that the village has high cases of child nutritional problem that needs to be addressed.

After the program area was set, Sarihusada conducted a baseline study to have the mapping and data of the children’s nutritional status, condition of PAUD and economic activities of local communities.

After the study, Sarihusada invited PKPU to develop a plan of action with three objectives, namely improving nutritional quality of the under-five children, revitalizing PAUD institution, and empowering the women economy.

The facilitator team of PKPU conducted various trainings and coaching to nurture and educate the mothers to become the cadres on nutrition with the knowledge of exclusive breastfeeding, nutrition in
maternal, fussy eating and health problems from malnutrition.

Later on, Sarihusada with PKPU and the community built a facility for PAUD and provided a skill training for the mothers to support the family economic independence. The skills taught during the economic empowerment activities were batik painting, recycle crafting, baking, and others.

They also encouraged the villagers to farm and grow vegetables and fruit in small plot of land. They also educated the mothers with balanced nutrition for under-five, and those with malnourished children were getting intensive assistance in Pondok Gizi to meet the nutritional needs, until the child was well nourished. Posyandu conducted various activities once in a month such as education on nutrition, to process food properly to keep the good nutritional content and to process cheap but healthy and nutritious food.

To ensure the program sustainability, at the end of the program Sarihusada built a Rumah Srikandi community center where assisted community still could keep continuing their activities by themselves and independently after Sarihusada and PKPU have left.

From the beginning of the program, the Municipality has played an important role in cross-sectoral coordination, such as with the Health Office. The Municipality was actively involved for seeking solution by visiting the program area and communicating with the community in Kampung Badran. This gave a positive impact to increase the public trust for this program.

RESULT

Until 2014, the partnership has educated more than a thousand of group members, revitalizing PAUD activities from once a month to three times a week with the attendance rate of 77% (approximately 500 people), and become one of the pilot PAUD in Yogyakarta. In addition, the program has also increased the mother awareness about nutrition to 90% (from 465 mothers) and reduce the problem of the undernourished and malnourished to almost 80% (or around 166 children). Rumah Srikandi was finally inaugurated by the Mayor of Yogyakarta in September 2014 as a community learning center to support the community sustainability.

CHALLENGES AND LESSONS LEARNED

The challenge was on how to make the community attain economic independence, and how to keep the activities continue when donor assistance is no longer available. Companies usually have time and funding limitations to support the community in achieving their independence. For Sarihusada, the key to a successful program is to find the balance between the community needs and the existing potential so the community is not very depending on other party.

Furthermore, Sarihusada has partnered with PKPU to bridge the communication between the company and the government to gain recognition and support for their CSR activities. Sarihusada facilitated in funding and providing expert team in line with its core business.

Independence is a strategic issue in program development. Since the beginning, Sarihusada has already planned this issue and it was also part of the program objectives when the assistance was over. The establishment of the Rumah Srikandi program in the beginning, has succeeded in encouraging the community to make a change for their own good toward the program independence.

One of the key successes of the program is the leadership factor, particularly form the Neighborhood Association (RW) which involved actively in the program activities including when managing the cadres, motivating the community to be actively come to the Posyandu. The selection of program area and prioritizing the leadership that was able to move the society to work together in improving their own health and welfare.
FUTURE PLANS

For future plans, Sarihusa da and PKPU noted several things to be done, namely (1) continue improving cadres’ skills and knowledge, (2) partner with other organizations to support the activities of Rumah Srikandi program, (3) develop a special book documenting the lessons learned of Rumah Srikandi program, (4) conduct workshops, seminars or other form of activity to disseminate the program success among the corporate stakeholders, (5) establish Rumah Srikandi program as the learning center for the implementer of CSR programs, thus it benefits not only the community of Kampung Badran but more wider community, and (6) maintain good relations between Sarihusada and the program beneficiaries upon program completion to maximize achievements that have been gained so far.

Catatan Kaki

i. Detailed information on the World Health Assembly can be found at http://www.who.int/nutrition/publications/code_english.pdf

Reference


About this Case Study

This one is one of the series of the case studies based on the presentations by the partners at HBRI Partnership Forum. HBRI Partnership Forum is one of the activities of CCPHI, a project funded by the Ford Foundation.

This case study is based on presentation by Endah Prasetioningtias, Community Development Specialist of Sarihusada and Akhta Suhendra, Head Division of PKPU Yogyakarta Program at the 26th of HBRI Partnerships Forum. Dian Rosdiana prepared the study in consultations with Sarihusada and Pos Keadilan Peduli Umat (PKPU).

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