





TOWARDS A FUTURE IN INDONESIA WITHOUT CHILD UNDERNUTRITION

Managing Child **Wasting** and Reducing the Prevalence of Child **Stunting**

KEY TAKEAWAYS:

- The children of Indonesia face grave risks of undernutrition with high rates of child wasting and stunting.
- Across the country, wasting threatens children's survival, growth, and development, with severe wasting having the highest mortality rate among all forms of undernutrition.
- Child wasting and stunting share common risk factors, and having one type of undernutrition increases the risk of developing the other form. A child who experiences both wasting and stunting is more than 12 times more likely to die than a healthy child.
- The Government of Indonesia has committed to tackling undernutrition, with targets to reduce stunting and wasting prevalence, and scale-up wasting treatment.
- Urgent, collective efforts are now required to reach these targets. Programmes should deliver essential nutrition actions to prevent wasting and stunting, and to treat severe wasting when preventive actions fail.

What is at stake?

An estimated one in 12 Indonesian children aged under five years are wasted and one in five are stunted.

Stark differences in prevalence estimates are noted between provinces, ranging from 11.9 per cent in Maluku to 2.8 per cent in Bali. Stunting and wasting result from poor nutrition in utero, poor nutrient intake in early childhood and/or infection and disease. These forms of undernutrition have severe consequences and threaten the health, lives and long-term development of infants and young children throughout the country.





Stunting refers to a child who is too short for his or her age. Children affected by stunting can suffer severe irreversible physical and cognitive damagee that accompanies stunted growth. The devasting consequences of stunting can last a lifetime and even affect the next generation.



Wasting refers to a child who is too thin for his or her height. Wasting is the result of recent rapid weight loss or the failure to gain weight. A child who is moderately or severely wasted has an increased risk of death, but treatment is possible.

Both wasting and stunting lead to severe long-term impacts. Children with wasting have weakened immune systems, increasing morbidity risks and are far more likely to die than their well-nourished peers. Stunting leads to cognitive impairment, poor educational performance, low adult wages, lost productivity and an increased risk of nutrition-related chronic diseases in adult life. Wasting and stunting are inextricably linked; they share common causes and risk factors and the two forms of undernutrition also impact one another. A wasted child is three times more likely to become stunted than a healthy child and a child with stunting is 1.5 times more likely to become wasted than their well-nourished peers. Having both forms of undernutrition is even more deadly — a child with both wasting and stunting is more than 12 times more likely to die than a healthy child.

Wasting and stunting occur early in life with many children (20-30 per cent) meeting the definitions of being wasted or stunted even from birth (including being born with low birth weight). This sets them on a negative trajectory of

If we fail to significantly reduce the number of children affected by undernutrition, wasting and stunting will continue to limit the extent to which Indonesia can reduce child mortality and morbidity and improve our society at large.

-

inadequate growth and development, which will impact the rest of their lives and highlights the need to focus on interventions during the first 1,000 days of life (from conception to two years). The detrimental impact of wasting and stunting on individuals, communities and societies is severe.

Undernutrition stunts potential and wastes lives in Indonesia, but it doesn't have to. Scaling-up proven nutrition interventions and tackling both forms of undernutrition together — through common prevention strategies and ensuring the treatment of wasting — will allow children to escape these preventable deaths and long-term negative outcomes.



The economic benefits of doing so are profound - it is estimated that scaling-up wasting treatment to 90 per cent coverage worldwide would generate a US\$4 economic return per dollar invested, resulting in over US\$25 billion in additional economic productivity over the course of these children's lifetime.

The need to act now is even more urgent. The backdrop of nutrition has changed with new emerging threats, including climate change, health epidemics such as the COVID-19 pandemic (which has severely impacted

food supply chains, income generation opportunities and access to health services in the country), and the current global political landscape posing critical challenges to the nutrition of children for generations to come. The need to act to reduce the prevalence of wasting and stunting has never been more urgent. If we fail to significantly reduce the number of children affected by undernutrition, both wasting and stunting will continue to limit the extent to which Indonesia can reduce child mortality and morbidity, and improve our society at large.

What is the Government of Indonesia already doing to tackle undernutrition?

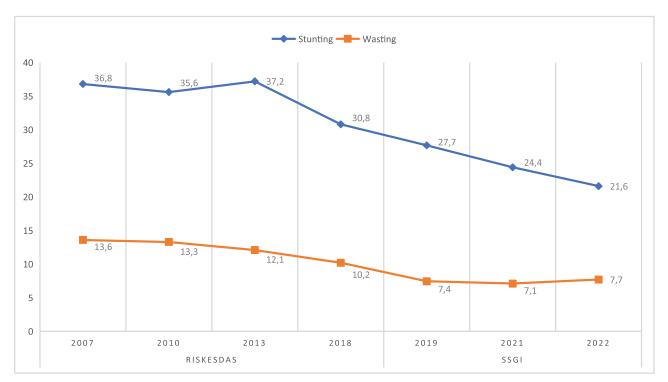


Figure 1. Undernutrition Status in Indonesia

The Government of Indonesia has committed to tackling stunting and wasting, setting ambitious targets to achieve by 2024 and 2025. These include:

- Ending all forms of malnutrition, including achieving global targets on wasting: World Health Assembly (<5% by 2025) and Sustainable Development Goals (<3% by 2030);
- Reducing child stunting from 30.8 per cent in 2018 to 14 per cent in 2024 (as outlined in the 2017 National Strategy to Accelerate Stunting Prevention and the National Medium-Term Development Plan 2020-2024);
- Reducing child wasting from 10.2 per cent in 2018 to 7 per cent in 2024 (as outlined in the National Medium-Term Development Plan 2020-2024) and including the treatment of

moderate and severe wasting as two key nutrition specific interventions to accelerate the country's efforts to reduce stunting;

- Providing treatment to 90 per cent of severely wasted children by 2024 as outlined in the Presidential Decree (no. 72) on Stunting Reduction Acceleration;
- Having at least 60 per cent of primary health-care centres providing Integrated Management of Acute Malnutrition (IMAM)¹ services by 2024, as committed to by the Ministry of Health; and
- Reducing low birth weight to less than 10 per cent, increasing the rate of exclusive breastfeeding to at least 60 per cent, increasing the coverage of treatment services for severely

wasted children to 90 per cent and improving child health by achieving universal health coverage for 98 per cent of the population by 2025, as part of the country-level Global Action Plan (GAP) on Child Wasting Roadmap developed by the Government of Indonesia in 2021, with support from UNICEF and other United Nations partners.

To support achieving these targets, much work is already in progress, driven by strong political commitment. The Ministry of Health has already started to scale-up access to treatment of severe wasting within all provinces, and nutrition sensitive programmes have been expanded with a focus on preventing stunting in all provinces.

¹ The IMAM approach enables children to receive treatment suited to their nutritional and medical needs through: community engagement to identify wasted children as early as possible, support for those moderately wasted with supplementary foods, home-based treatment for severely wasted children without medical complications, and inpatient care for acutely wasted children with medical needs. This approach enables more than 90 per cent of children with wasting to be successfully treated at home. For more information on the IMAM approach, see the policy brief 'Scaling up the Integrated Management of Acute Malnutrition (IMAM) – a life-saving programme to prevent and treat child wasting to reduce child stunting in Indonesia.'

What do we still need to do to improve undernutrition in the country?

Now just one years away from 2025, we need urgent, collective action to accelerate work to achieving these commitments, with new ways of working to ensure that children growing up in Indonesia live long and prosperous lives.

Action in four key areas is needed:

1. Increase public awareness on wasting and its links to stunting Initiatives to strengthen public awareness around wasting should be prioritized, focussing on how this form of undernutrition links to stunting, as well as how to identify wasting early and where to go to receive treatment when prevention

efforts fail.

2. Develop joint prevention strategies and ensure the universal coverage of IMAM services

IMAM services should continue to be rapidly scaled up, with quality and coverage, as a core component of stunting prevention efforts and an integral part of health system interventions. Bringing treatment as close to communities as possible, and intensifying actions to promote the early identification of wasting within family and community platforms, is essential.

3. Secure predictable, adequate and harmonized funding

National targets for wasting and stunting can only be achieved with adequate, predictable and harmonized financial resources and budgets. Substantial investments are needed to meet the national and global targets for wasting and stunting reduction.

4. Promote collective action across sectors

The evolving nature of child undernutrition demands a multifaceted response. Activating the five key systems — food, health, water and sanitation, education and social protection — and supporting them to become nutrition sensitive, has the greatest potential to prevent wasting and stunting.

There is no magic bullet to address child undernutrition sustainably. We will only meet the challenge by continued action to protect child nutrition and

secure a future where the right to nutrition is a reality for every child. With a relatively small additional investment for combined approaches, preventing both stunting and wasting and treating wasting when prevention efforts fail, we could have an exponential reduction in child deaths and poor growth outcomes in Indonesia.

Acknowledgment: This document was prepared by Natalie Sessions (Consultant), with technical guidance and contributions from Blandina Rosalina Bait, Julia Suryantan and Mamadou Ndiaye from UNICEF Indonesia.

UNICEF Indonesia acknowledges the contributions for policy, programme design and implementation from the Ministry of Health and Ministry of National Development Planning/Bappenas.

Editor: David Challenger | Layout: Andri Ruay

For more information about any of the details highlighted in this report, please contact: Blandina Rosalina Bait | Nutrition Specialist | bbait@unicef.org

Citation: UNICEF and The Ministry of Health.

Towards A Future In Indonesia Without Child Undernutrition.

Managing Child Wasting and Reducing the Prevalence of Child Stunting, Jakarta, 2023

References

- 1. Indonesia Nutritional Status Survey (SSGI) 2022.
- 2. Schoenbuchner, S. M., et al., 'The relationship between wasting and stunting: a retrospective cohort analysis of longitudinal data in Gambian children from 1976 to 2016', 1 August 2021, https://pubmed.ncbi.nlm.nih.gov/30753251/.
- 3. Thurstans, S., et al., 'The relationship between wasting and stunting in young children: A systematic review', 5 September 2021, https://pubmed.ncbi.nlm.nih. gov/34486229/.
- 4. McDonald C.M., et al., 'The effect of multiple anthropometric deficits on child mortality: meta-analysis of individual data in 10 prospective studies from developing countries', 20 February 2013, https://pubmed.ncbi.nlm.nih.gov/23426036/.
- 5. Mertens, A., et al., 'Child wasting and concurrent stunting in low and middle-income countries',11June2020,www.medrxiv.org/content/10.1101/2020.06.09.20126979v1. article-info.
- Olofin, I., et al., 'Associations of suboptimal growth with all-cause and cause-specific mortality in children under five years: a pooled analysis of ten prospective studies', 29 May 2013, https://pubmed.ncbi.nlm.nih.gov/23734210/.
- 7. UNICEF, 'Severe Wasting: An overlooked child survival emergency', May 2022, www. unicef.org/media/120391/file/Severe per cent20wasting per cent20report.pdf.



United Nations Children's Fund (UNICEF)

World Trade Center 2, 22nd Floor, Jl. Jend. Sudirman Kav. 31, Jakarta, 12920, Indonesia. Tel: +62 21 5091 6100

Email: jakarta@unicef.org Website: www.unicef.or.id

Ministry of Health

Directorate General of Public Health Directorate of Nutrition and Mother and Child Health Adhyatma Building, 7th Floor Jl. HR Rasuna Said Block X.5 Lot 4-9 Kuningan, Jakarta, 12950, Indonesia.

Tel: +62 021 5221227

Website: https://gizikia.kemkes.go.id/