



Launching a Multi-Sectoral Platform to Accelerate Stunting Prevention in Indonesia

GSURR Forum, March 19 2019

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Program Introduction

Stunting in Indonesia

High Growth & Spending

- Indonesia has made significant gains in economic growth and poverty reduction in the past decade.
- Government estimates it spends almost Rp. 60 trillion (approx. \$4 billion) on stunting-related interventions.

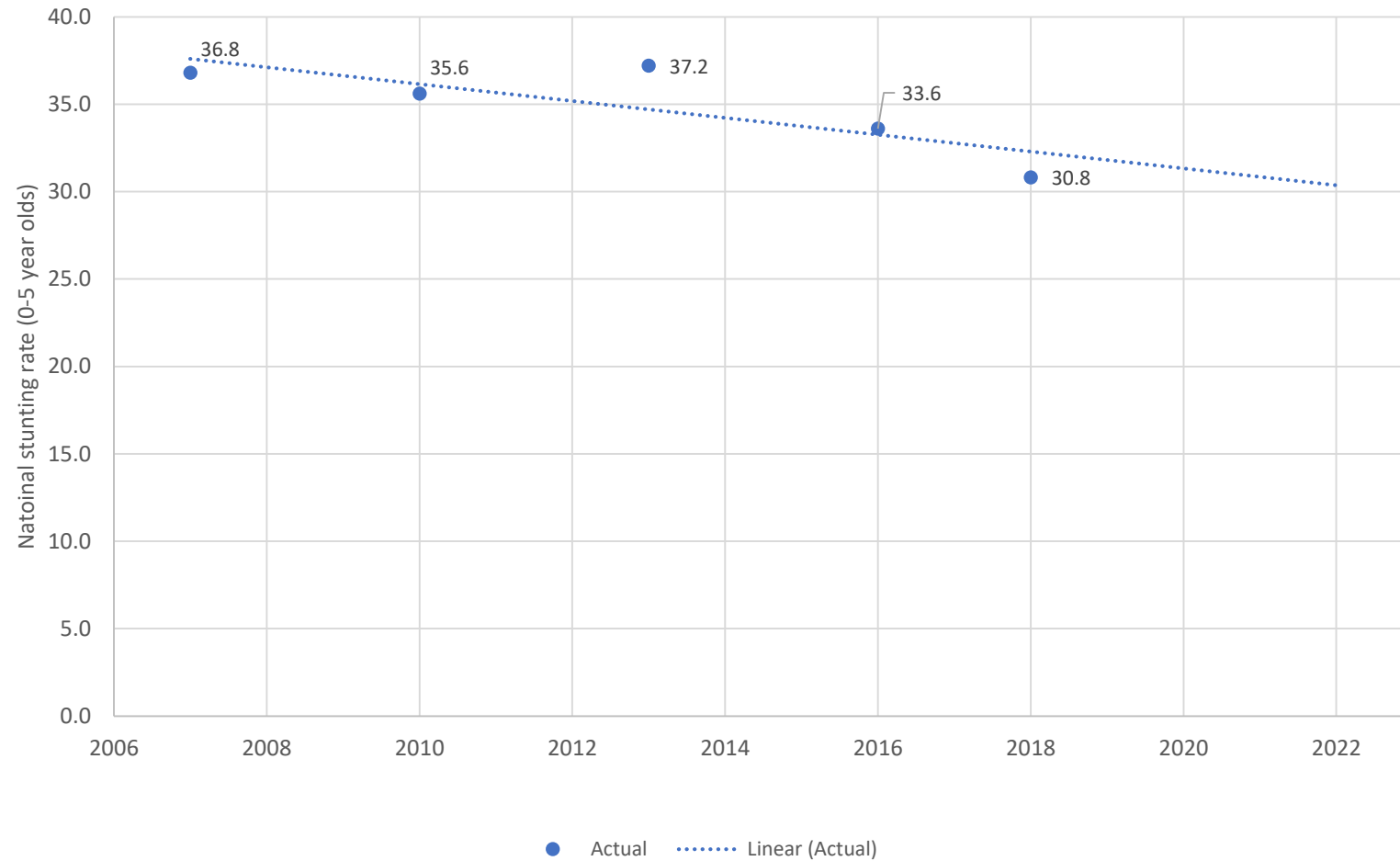
Poor Outcomes

- But Indonesia's rates of stunting and malnutrition are at crisis levels, and its child development outcomes are poor.
- Convergence of priority nutrition-specific and nutrition-sensitive interventions on households with pregnant mothers and children under two is very low.

Management Problems

- The convergence of nutrition interventions on millions of households with pregnant mothers and children under two dispersed across 6,000 islands requires coordinated action at the central, district and village level.

Slow stunting reduction

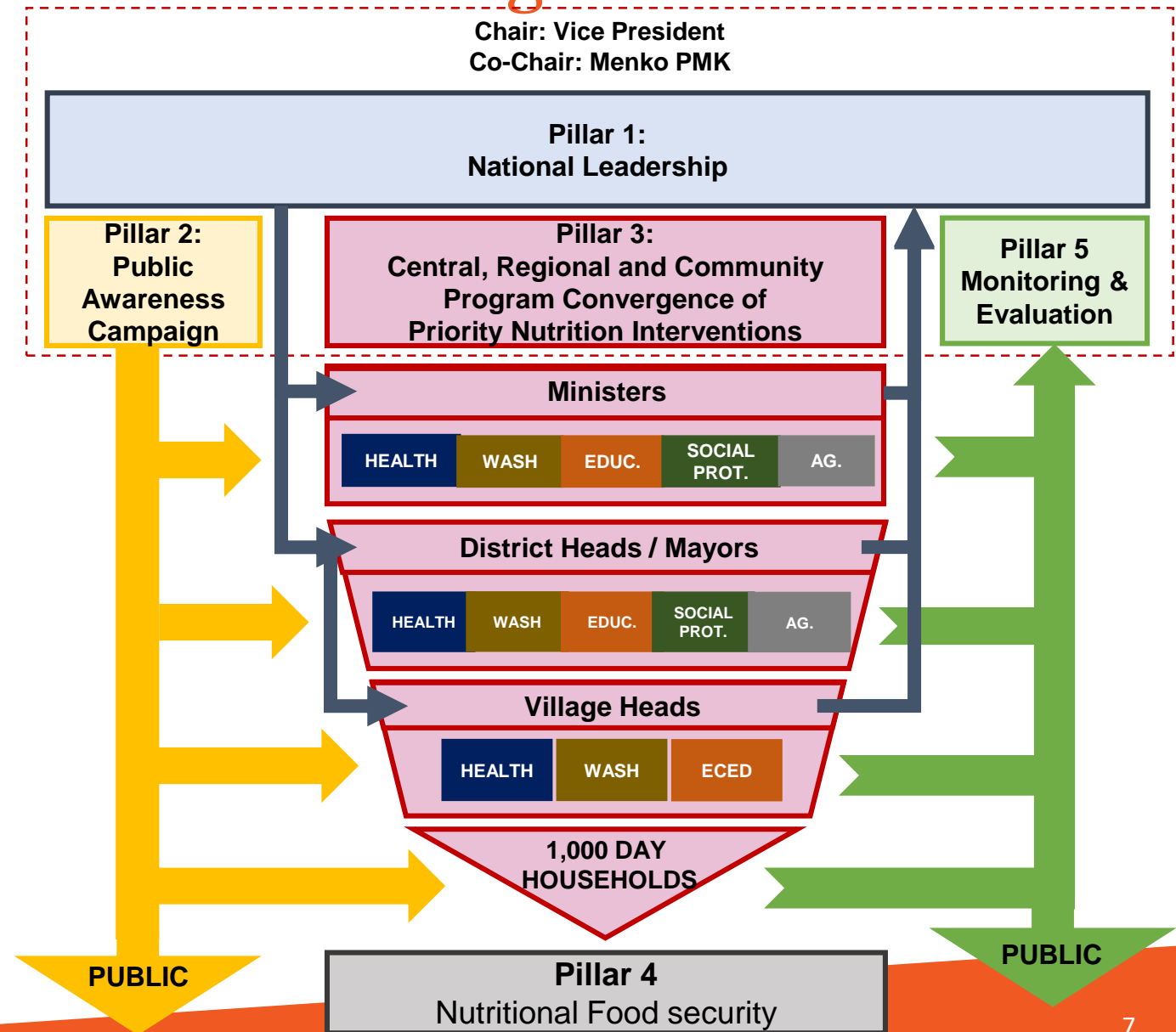


Stunting is the only area in which Indonesia lags behind other Lower Middle Income countries

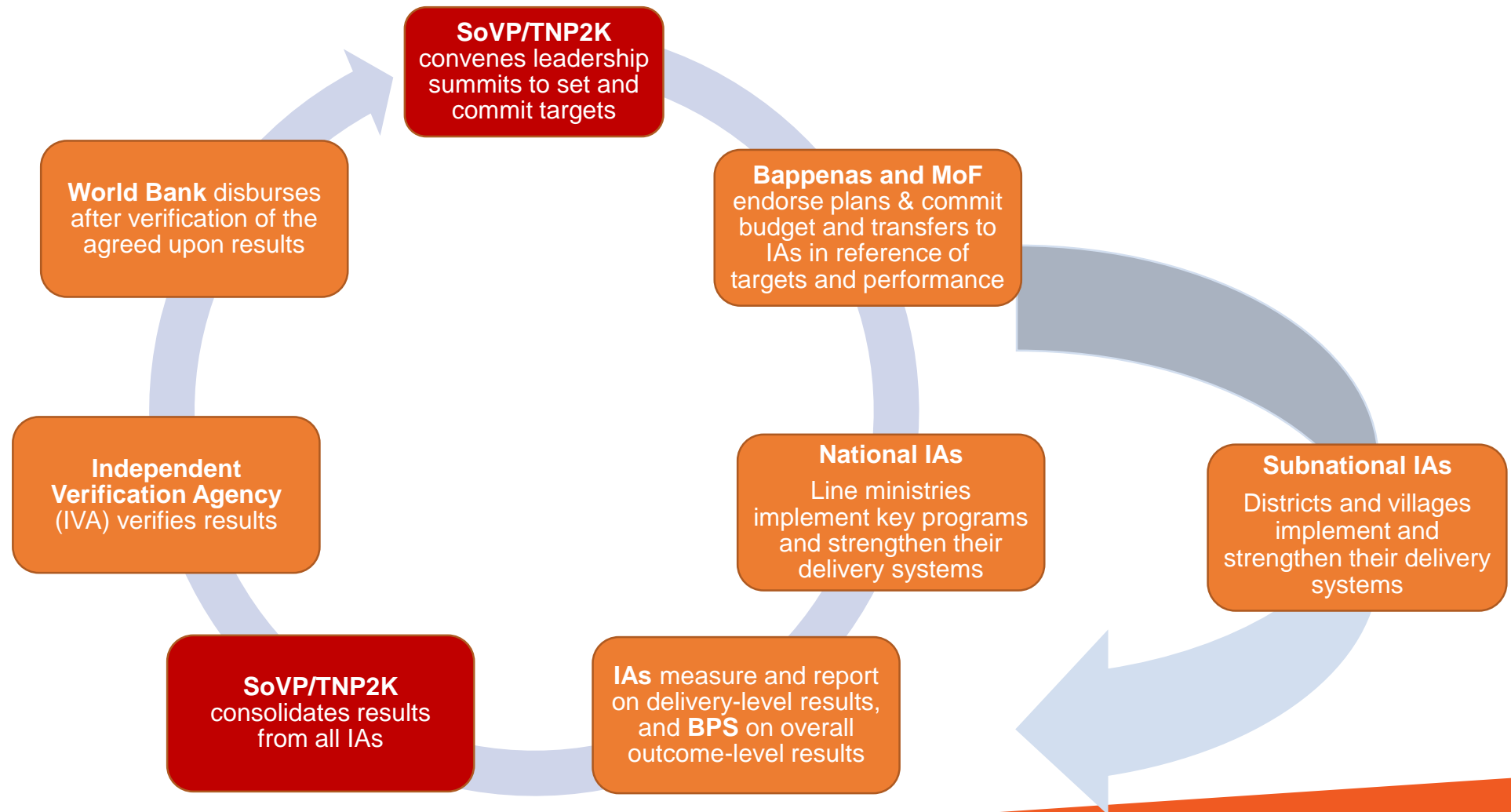
| Indicator | Indonesia | Low Income | Lower Middle Income | Upper Middle Income | High Income |
|--|---------------|---------------|---------------------|---------------------|---------------|
| | Male + Female | Male + Female | Male + Female | Male + Female | Male + Female |
| HCI Component 1: Survival | | | | | |
| Probability of Survival to Age 5 | 0.971 | 0.925 | 0.960 | 0.980 | 0.991 |
| HCI Component 2: School | | | | | |
| Expected Years of School | 12.3 | 7.8 | 10.2 | 11.8 | 13.1 |
| Harmonized Test Scores | 403 | 363 | 392 | 430 | 508 |
| HCI Component 3: Health | | | | | |
| Survival Rate from Age 15-60 | 0.828 | 0.744 | 0.810 | 0.855 | 0.920 |
| Fraction of Children Under 5 Not Stunted | 0.664 | 0.658 | 0.735 | 0.867 | 0.923 |
| Human Capital Index (HCI) | 0.53 | 0.38 | 0.48 | 0.58 | 0.74 |

National Strategy to Accelerate Stunting Prevention

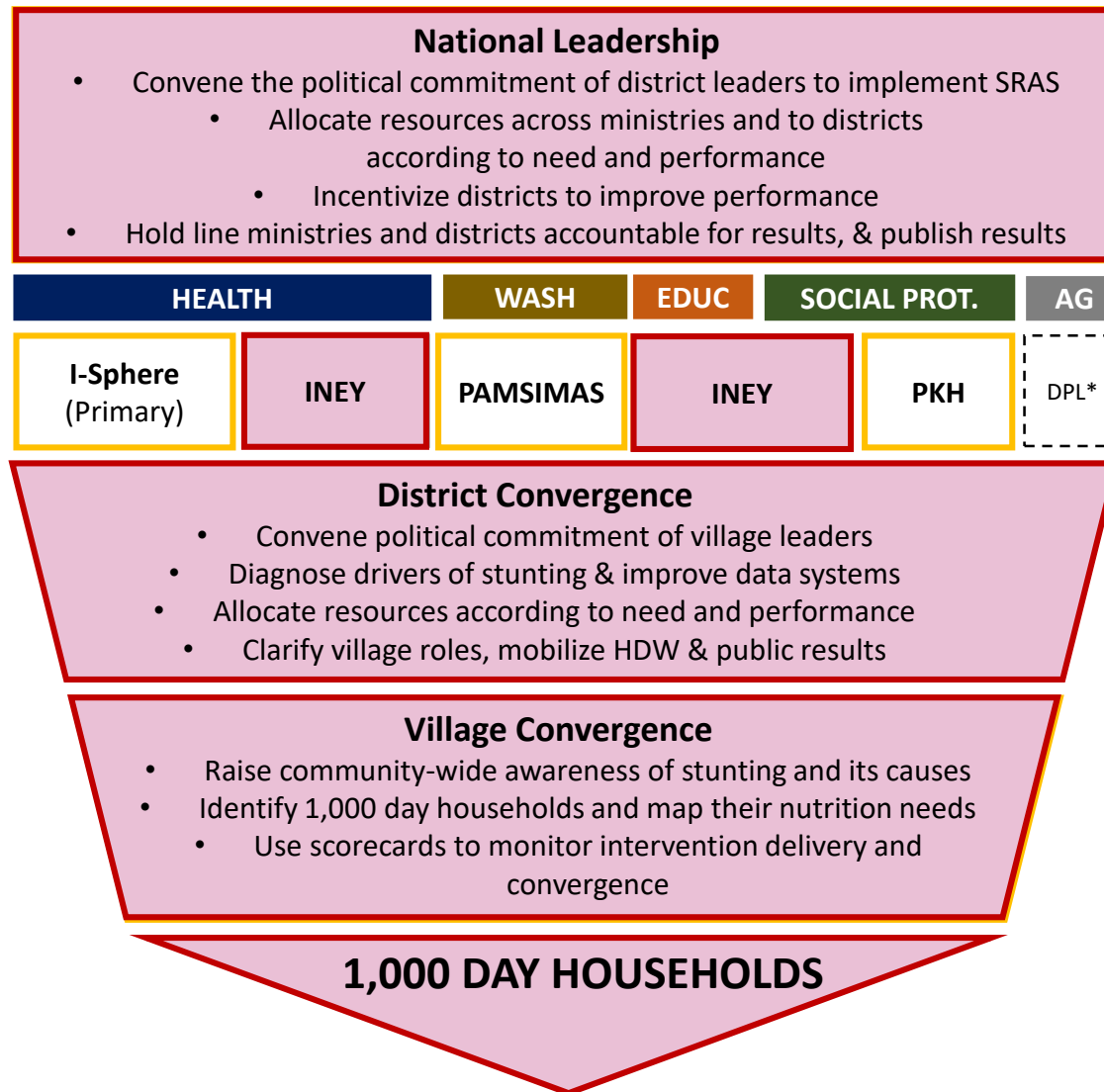
- Vice President launched the National Strategy in August 2017
- Led by the President and Vice President
- Commits 23 ministers to increase the impact of \$14.6 billion of government spending over four years by converging priority nutrition interventions on 1,000-day households
- Ambitious scale from 100 districts in 2018 to all 514 by 2021
- Drew on global knowledge including Peru's success



INEY establishes a results-based cycle of prioritization, monitoring, accountability and learning



“Whole-of-Bank” support for the National Strategy



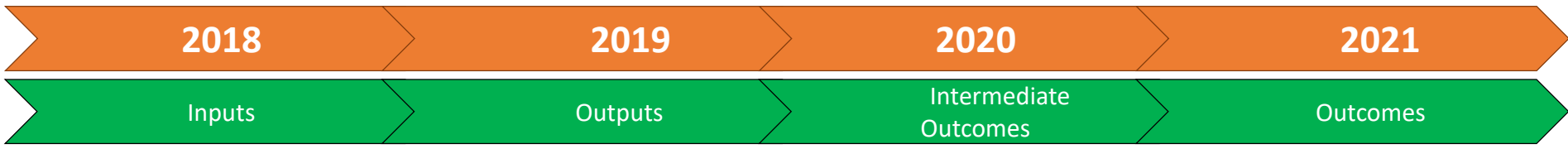
- Existing operations in WASH and Social Protection sectors
- Complement primary health care operation in preparation
- Built on national CDD platform (Village Law & Generasi project)
- Built on Generasi ECED Frontline Pilot
- Active cross-GP PASA portfolio
- Possible DPL to include food sector reforms

DLIs mechanism to incentivize coordination, collaboration, alignment & accountability

| Results Area | Disbursement-linked Indicators (DLI) | Lead agency(ies) |
|---|--|----------------------|
| 1. Strengthening national leadership | DLI 1: Public commitment of priority district leaders to accelerate stunting prevention | SoVP |
| | DLI 2: Tracking and performance evaluation of national spending on priority nutrition interventions | MoF & Bappenas |
| | DLI 3: Timely publication of annual national and district stunting rates | BPS |
| 2. Strengthening delivery of national sector programs | DLI 4: Priority districts delivery of nutrition-sensitive professional development program for ECED teachers | MoEC & MoV |
| | DLI 5: Nutrition-sensitivity of the food assistance program (BPNT) | MoSA |
| | DLI 6: Priority districts implementation of locally adapted IPC activities | MoH |
| 3. Strengthening convergence of district activities | DLI 7: Predictability and results orientation of fiscal transfers that support convergence | Bappenas, MoF & MoHA |
| | DLI 8: Performance of districts in targeting priority nutrition interventions to 1,000-day households | SoVP & BPS |
| 4. Converging village service delivery | DLI 9: Villages empowered to identify 1,000-day households and converge intervention delivery | MoV & MoF |
| | DLI 10: Village convergence of nutrition interventions on 1,000-day households | SoVP & MoF |

Strategic Implementation Support

Program Results Chain by Year



1. Strengthening national leadership

Stunting delivery unit

Annual stunting summits

Increased district leadership to reduce stunting (DLI 1)

Budget tagging guidelines (DLI 2)

Quarterly and semester program performance reports (DLI 2)

Increased public saliency, improved monitoring, debottlenecking and learning

Annual anthropometric survey guidelines (DLI 3)

Timely publication of district stunting rate (DLI 3)

2. Strengthening delivery of national sector programs

ECED curriculum reform (DLI 4)

ECED professional development program roll out to Priority Districts

Increased nutrition capacity of ECED teachers (DLI 4)

BPNT menu change (DLI 5)

Nutrition-sensitive BPNT rolled out to Priority Districts

Increased access to nutrition food assistance (DLI 5)

National integrated BCC strategy and implementation plan (DLI 6)

Integrated district BCC campaign strategies

3. Strengthening convergence of district activities

Fiscal transfer reform (RKP & Juknis 2019) (DLI 7)

Timely announcement of indicative allocations, financing gaps filled & low volatility (DLI 7)

Increased delivery of BCC programming (DLI 6)

Provincial TA pools established

Provincial TA delivered to priority districts

4. Converging village service delivery

DD reporting change and HDW guidelines (DLI 9)a

Expansion of HDW to support village planning and coordination

Increased capacity of villages to identify target beneficiaries, map needs and monitor convergence (DLI 9)

↑ targeting of nutrition interventions to 1,000-day households (DLI 8)

↑ simultaneous utilization of priority nutrition interventions by 1,000-day households in priority districts (DLI 10)

Three phases of implementation support

- **Phase 1 (2018) – System reforms and setup**
 - Generasi Human Development Worker pilot to test modified convergence scorecard, training and incentive arrangements
 - DAK Pilot to explore how districts can use conditional transfers to improve resourcing and prioritization
 - Transitional TA pool in selected provinces (to support districts), innovative approach to capacity building and performance assessments
 - Support establishment of national results monitoring and performance follow up mechanisms
- **Phase 2 (2019) – Debottlenecking and adjustment**
 - First round of process evaluations
 - First round of performance reviews
 - Urban assessment
- **Phase 3 (2020-2021) – Adjustment and organizational learning**
 - First year of outcome results (district and village)
 - Organizational Knowledge Sharing

Example 1 – Convergence of frontline service delivery

- **Systemic weakness:** Lack of incentives and tools to track convergence of frontline service delivery
 - Inadequate coverage and quality of community-based growth promotion activities.
 - Lack of prioritization of health and nutrition spending in Dana Desa (Village Fund)
 - Roll out of innovative tools such as Village Convergence Scorecard and Child Length Mats to empower communities and parents to take actions to tackle stunting.
- **INEY entry point:** DLI 9 and DLI 10 incentivize villages to mobilize Human Development Workers and track improvement in the convergence of priority nutrition interventions
 - DLI 9 focuses on supporting villages in identifying 1,000-day households mapping priority needs and systematically reporting on village convergence.
 - DLI 10 incentivizes the actual improvement in the convergence of priority services and promote coordination and collaboration across sectors and levels of government

Example 2 – Weak results orientation of planning and budgeting process

- **Systemic weakness:** weak results-orientation
 - Overly focused on input and compliance rather than outputs and results,
 - Fragmented information systems (KRISNA & SPAN),
 - Little focus on performance review (effectiveness and efficiency) in the allocation of annual budget resources
 - Insufficiently programmatic, i.e. centered on spending units
 - Spending at national and subnational levels are not evaluated together, even where they contribute to the same intervention – lead to inefficiencies
- **INEY entry point:** DLI 2 seeks to strengthen budget challenge function
 - Requires government to annually evaluate the spending on stunting interventions, and demonstrate how this evaluation has influenced subsequent budget allocations.
 - Initially focused on (i) efficiency and effectiveness of outputs and (ii) geographic targeting to priority districts, later including correlation with (iii) intermediate outcomes.

Reflections & Discussion

How did this happen?

- **Early problem definition:** significant investment in stunting interventions but poor outcomes = management problems
- **CMU leadership:** JYK and CD led engagement at the highest levels = multiple implementing agencies
- **Existing engagements:** multi-sectoral engagement on CDD and existing LG and WASH platforms = cross-GP task team
- **Resources:** management, trust funds and staff on the ground with operational know how = responsive
- **Multisectoral preparation approach:** VP office leadership structured around service delivery, not sectors = single multi-sectoral operation

Questions for discussion

- Are there opportunities to build on CDD in other HCP Early Adopter countries?
- How can we best use LG and CDD platforms to strengthen frontline nutrition interventions delivery?
- In highly decentralized countries, what levers are available to central governments to influence better performance in delivery of key services?
- How can we foster collaborative implementation support work across GPs?