

NUTRITION FINANCING WEEK

Nutrition for Growth (N4G) Side Event Series

Leading by Example: A Conversation on How to Achieve N4G Financing Goals

January 24th 2022- 8:00- 9:30 am EST



NUTRITION FINANCING WEEK

Nutrition for Growth (N4G) Side Event Series

Welcome and Opening Remarks



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The Network of Health Systems

Juan Pablo Uribe

**Global Director of Health Nutrition
and Population, World Bank and
Director, Global Financing Facility**



Overview of the Week

Date and Time	Session
January 24th- 8:00 am -9:30 AM EST	Leading by Example: A Conversation on How to Achieve N4G Financing Goals
January 25th- 8:00 am- 9:30 AM EST	Optimizing Health Financing Levers for Nutrition: Commitment to action
January 26th 7:00 am- 8:30 AM EST-	The fizzy potential of fiscal policies for nutrition: How taxes and other tools can encourage healthy diets
January 26th 9:00- 10:30 AM EST	Allocative efficiency analysis for more nutrition for the money: Country experiences with Optima Nutrition
January 27th 7:30- 9:00 AM EST	Nutrition-Responsive Public Financial Management: Strengthening Financing and Accountability for Results
January 27th- 9:15- 10:00 AM EST	Making the N4G financing goals a reality: Translating commitment to action



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Session Objectives

Objective 1: Present a broad overview of nutrition financing and introduce key strategic action areas and emerging country initiatives on financing and accountability to drive results

Objective 2: Unpack the key strategic action areas on financing and accountability that will be further explored in the subsequent deep-dive webinars in the week

Meera Shekar

Global Nutrition Lead

World Bank Group



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Nutrition Financing Week

Webinar 1: Leading by Example: A conversation on on How to Achieve N4G Financing Goals

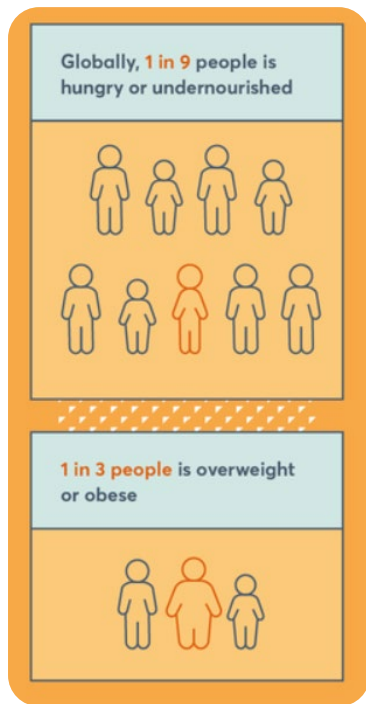
The Mantra:

**More Money For Nutrition,
More Nutrition for the Money**

Meera Shekar @meerashekar_wb
Global Lead, Nutrition
World Bank Group

Why do we care about nutrition?

- 149 million stunted children under 5
- 2 billion overweight or obese individuals
 - >70% in Low- and Middle-Income Countries
- Negative effects on human capital and productivity
- ***Investing in nutrition is not only a moral imperative, it is an economic imperative too!***
 - Businesses collectively lose \$130 billion – \$850 billion a year through malnutrition-related productivity reductions, equivalent to 0.4% – 2.9% of the combined GDP*
 - Anemia is estimated to reduce economic output by an additional 0.8% of GDP on average*
 - More on economic impacts of obesity (<https://data.worldobesity.org/economic-impact/>)

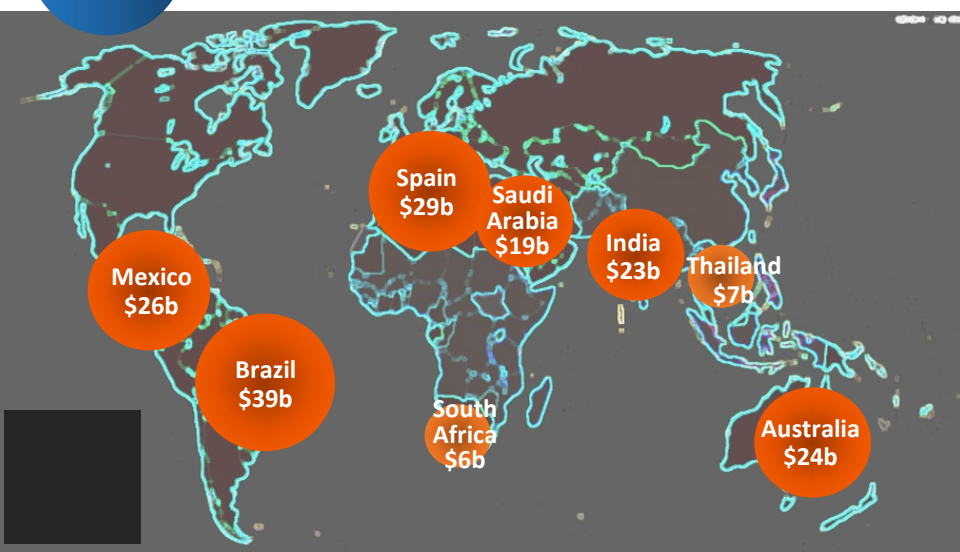


*Source: Wellesely et al, 2019 *The Chatam House*

ECONOMIC COSTS OF OBESITY

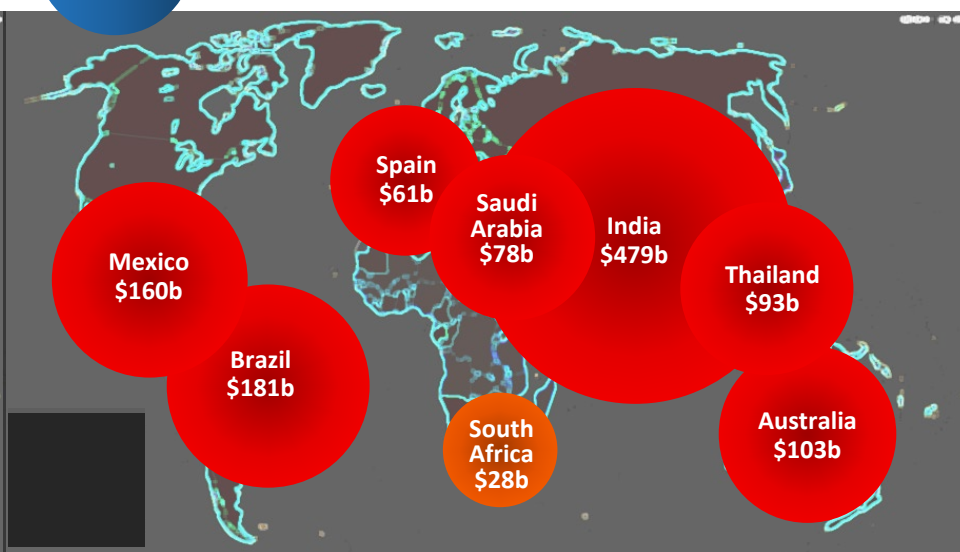
2019

1.8% of GDP



2060

3.6% of GDP

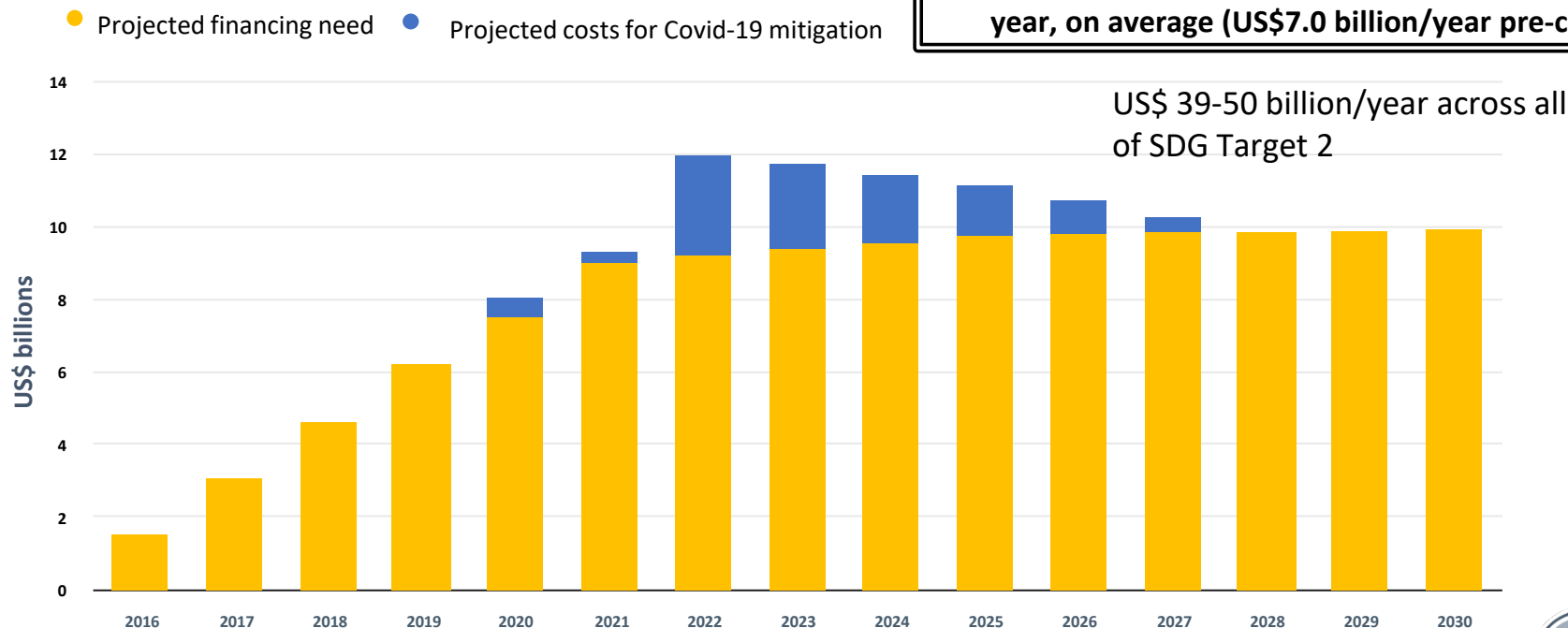


Additional costs associated with INCREASED WATER USE & CARBON EMISSIONS

The financing needed to meet nutrition targets has grown

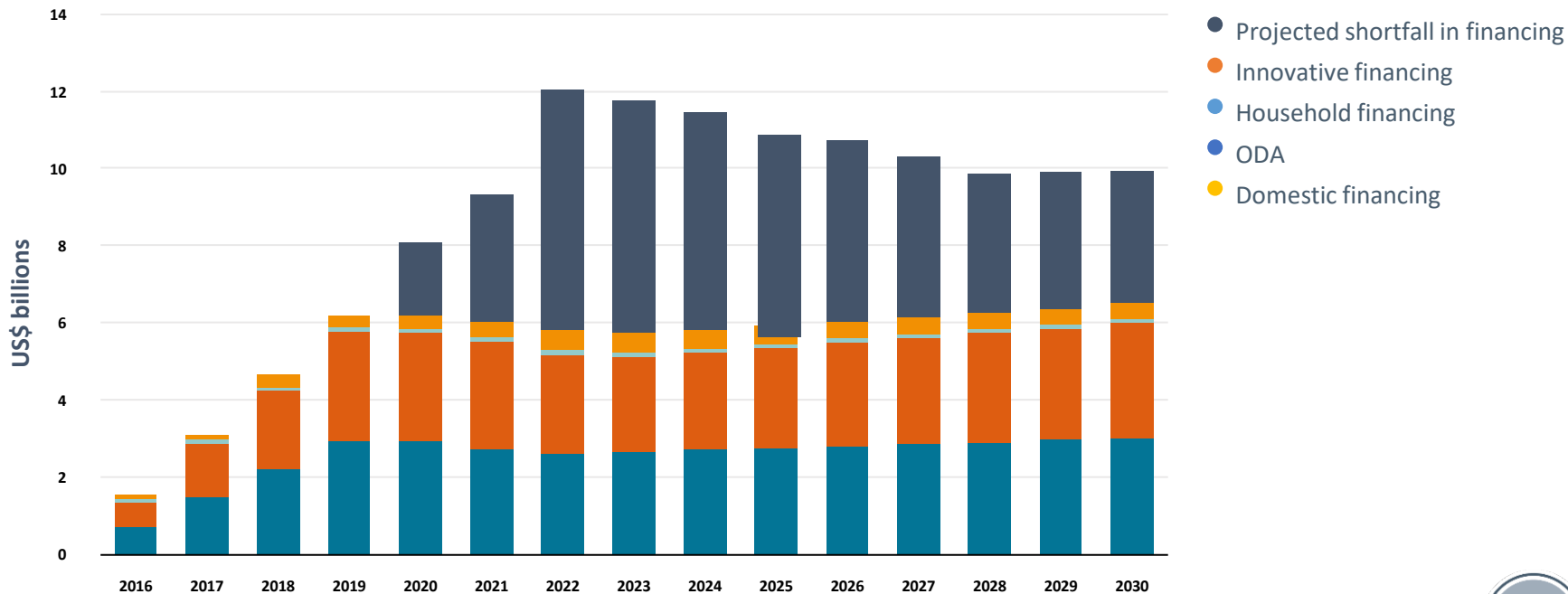
Updated preliminary estimates of financing needs

Estimated needs now approximately US\$10.8 billion a year, on average (US\$7.0 billion/year pre-covid)

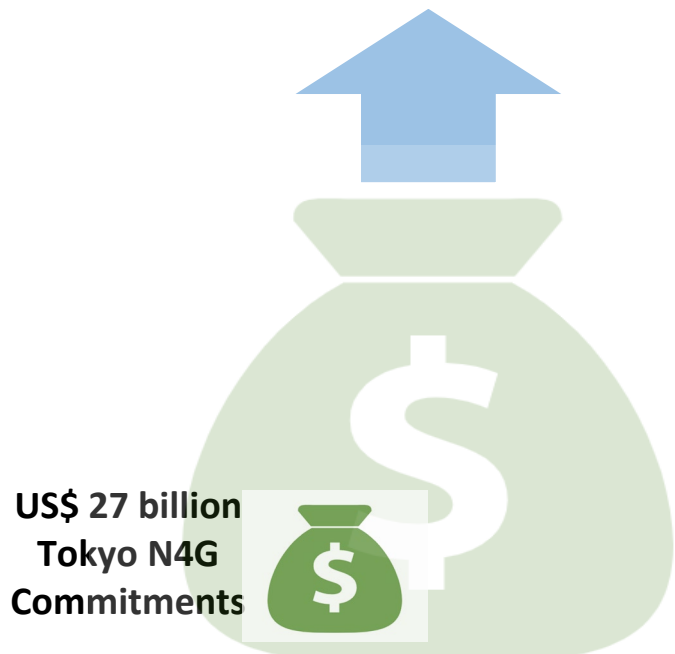


Financing for nutrition has been consistently inadequate

Projected share of financing by source, and estimated gap



***We urgently need:
More Money For Nutrition AND More Nutrition for the Money***



How do we get there?

Realizing the **MANTRA** of nutrition financing

MORE \$ FOR NUTRITION

- **Domestic financing for nutrition**
- **Traditional aid & concessional loans**
- **Leveraging UHC resources for nutrition**
- **Catalytic & innovative financing including non-traditional sources**
 - Repurposing agriculture subsidies
 - Social bonds
 - Leveraging venture capital
- **Fiscal policies**
 - Diet-related taxes
 - SDG bonds
 - Sovereign bonds

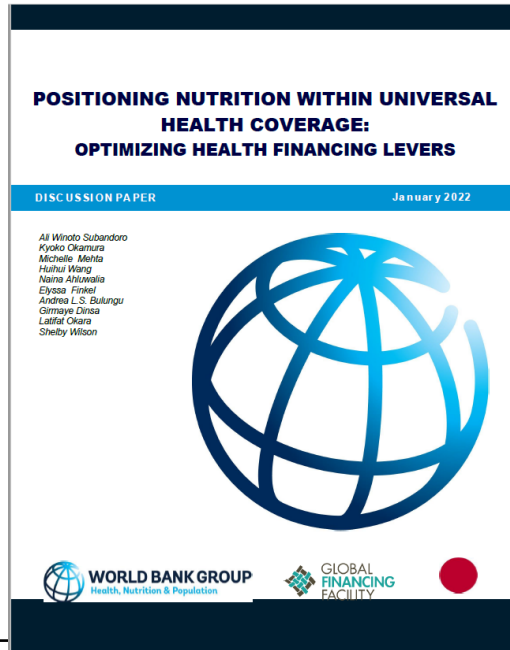
MORE NUTRITION FOR THE \$ SPENT

- **Evidence-based planning**
 - Optima Nutrition
 - Costed plans
- **Nutrition-responsive PFM**
 - Nutrition Public Expenditure Reviews (N-PERs)
 - Nutrition budget tagging and tracking
- **Financial & fiscal levers**
 - Health financing levers
 - Taxation for healthier consumption

Data & data systems for accountability

‘without data you are flying blind’

Example: a new Japan-supported report shows how countries can strategically leverage the UHC platform for nutrition



▶▶ Optimizing health financing levers of:

- Revenue raising
- Pooling
- Purchasing

Maximizing impact with the same money ▶▶



Thank you!

Session Overview

- Welcome, Technical Overview and Housekeeping
- Panel Discussion of 3 Themes with Q&A
- Final Remarks, Preview of Tomorrow's Session, Close the Day



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Albertha Nyaku

Program Director Nutrition R4D



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Session Focus – 3 Themes

Theme 1: Prioritization of Nutrition Investments

Theme 2: Optimizing Financing and Fiscal Levers for Nutrition

Theme 3: Accountability and Data Driven Financing



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Theme 1: Prioritization of Nutrition Investments



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Theme 1: Prioritization of Nutrition Investments



Suprayoga Hadi

**Deputy for Human Development Policy
and Development Equity**
Office of the Vice President of Indonesia



Jonathan Akuoku

Nutrition Specialist
World Bank Group



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Indonesia Experience: Implementing Stunting Prevention Acceleration During Covid 19 Pandemic

Dr. Suprayoga Hadi

Deputy for Human Development Policy and Development Equity
Secretariat of Vice President Office

Jakarta, 24 Januari 2022

Indonesia Context: Stunting Prevention Acceleration & Covid 19 Pandemic



Stunting Prevention Acceleration

- *Indonesia has implemented stunting reduction since 2018 based on the National Strategy* (investment case), by adopting evidence-based interventions. *In 2018, stunting prevalence in children under 5 is 30,8%*
- The National Strategy implementation *coordinated by Office of Vice President* and involve various ministries at the central level, there are at least 9 key Line Ministries and 14 supporting Line Ministries
- The implementation also involve 34 provinces, 514 districts and 84,000 villages
- *The key strategy is convergence* among intervention, starts from planning, budgeting, implementing, monitoring and evaluation.
- The target is *to reduce stunting prevalence from 30,8% in 2018 to 14% in 2024.*



Covid 19 Pandemic Situation

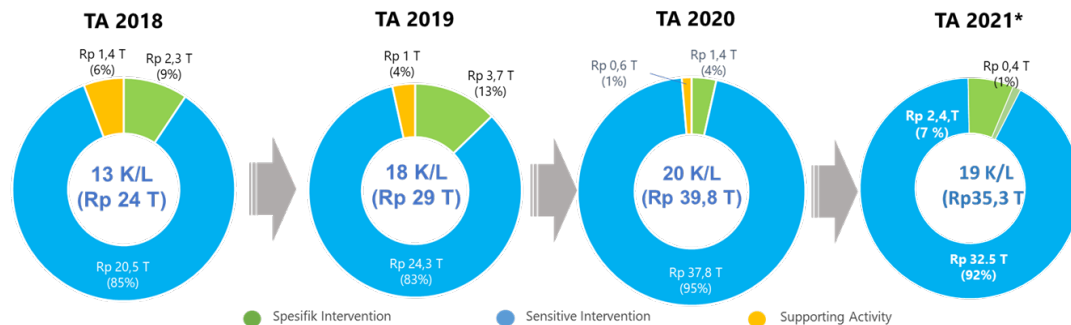
- The Pandemic started in March 2020. The case spread in all 514 districts. Vaccination has been started in January 2021 and continuing until now.
- *The pandemic has impact to the economic aspect and also to the services at the community level:*
 - 2,56 million people loss their job and 24,3 million people decrease their work hour
 - Poverty rate increase in 2020
 - Almost 80% of Village Health Post/Posyandu reported suspension/closure,
 - 40% of PHC facility/Puskesmas ceased operation, growth monitoring at Community Services Postdecrease 12,6%*
 - Coverage IFA Tablet Distribution to adolescent decrease 47,3%*

Data source:

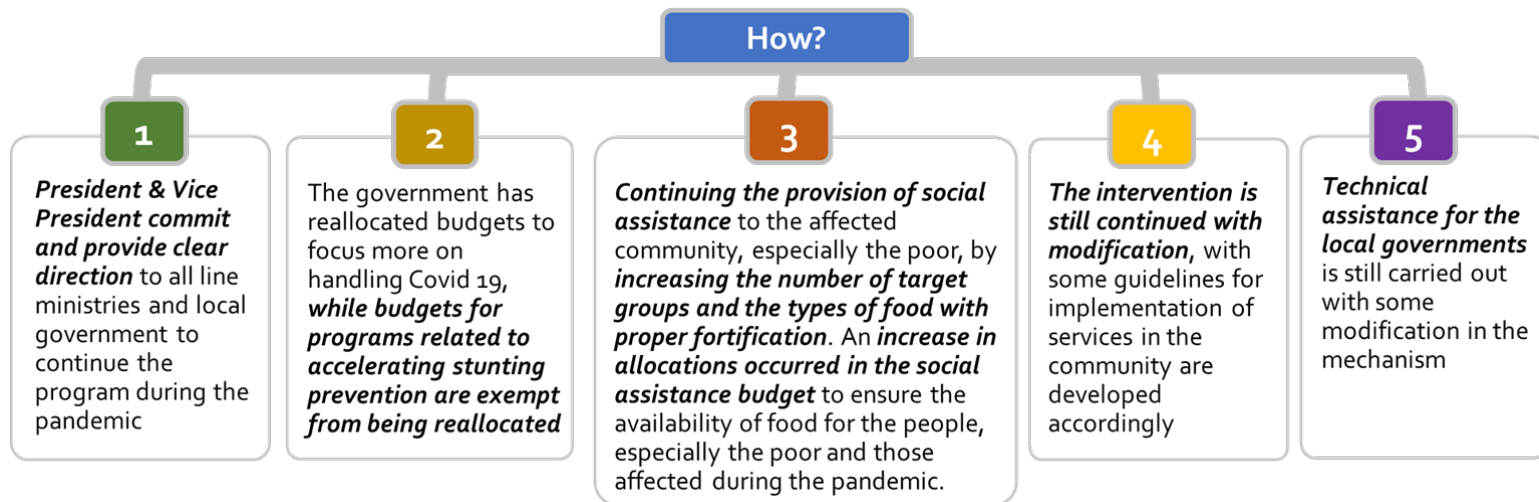
* Rapid Survey by Research and Development of MoH, 2020

** BPS Survey

Securing Commitment & Budget to Continue The National Strategy During the Pandemic



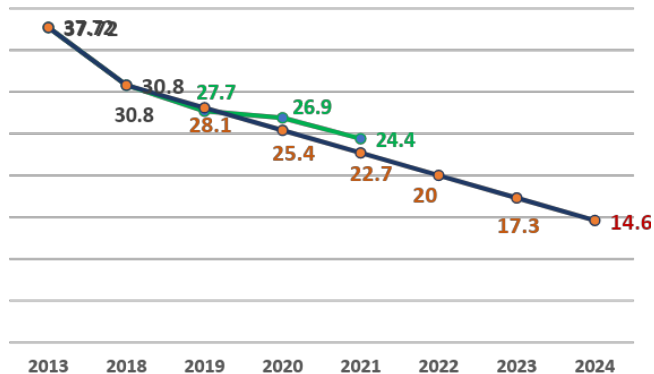
During the pandemic, Stunting Prevention Acceleration still implemented. The budget allocation for stunting prevention had been increased significantly from Rp. 27.5 trillion in the beginning of 2020 to Rp. 39,8 trillion after the pandemic period.





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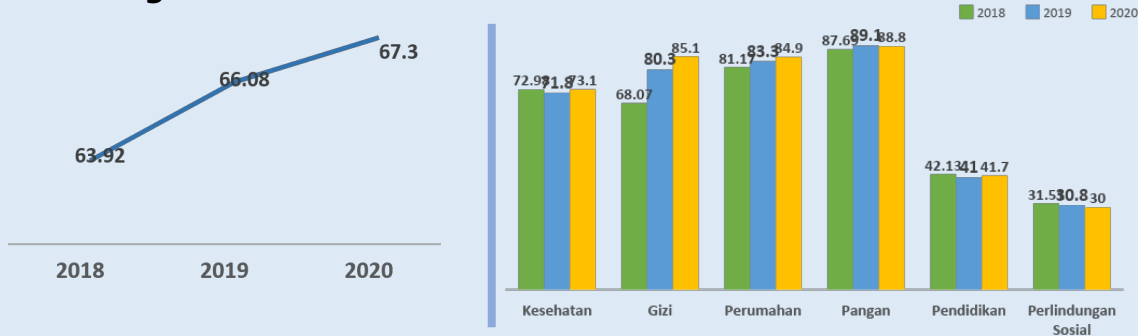
Stunting Prevalence 2018 - 2021



- After 4 years Stranas Implementation, stunting prevalence decrease from 30,8% (2018) to 24,4% in 2021 (decrease 6,4% .
- Stunting prevalence still decrease even in the pandemic period.

Progress to Date

Stunting Prevention Index 2018 - 2020



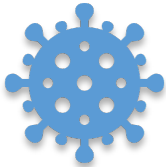
- Stunting Prevention Index developed to measure performance on stunting prevention intervention based on Susenas Data. The intervention divided into 6 dimension, i.e: Health, Nutrition; Housing, Food Security, Education and Social Protection.
- From 2018 to 2020, the index increased as amount as 3,4 point. This increasement mean that there are an improvement in the coverage of intervention related stunting prevention.



The commitment from President and Vice President continued. All (514) head of the local governments signed their commitment to accelerate the reduction of stunting in their respective regions.



Implementation Challenges



Post Covid Pandemic Covid 19.

Covid-19 pandemic has increased the poverty rate and has a potential to slow down the good progress in stunting reduction due to disruption in service delivery.



Convergence. Convergence is easy to say but hard to be implemented. The challenge is how to converge programs and activities, financed by each level of government, across ministries and agencies, so that they are on target and do not overlap.



Decentralization. Implementation is carried out by all levels of government: central, provincial, district/municipalities, village governments. Each level of government has numerous programs, activities and budgets. Each ministry/agency also has numerous programs, activities and budgets related to stunting prevention.



Timeline to Achieve 14%. We only have remaining 2,5 years to achieve the targets. Need special effort, innovation and collaborative working among stakeholders.

Thank You

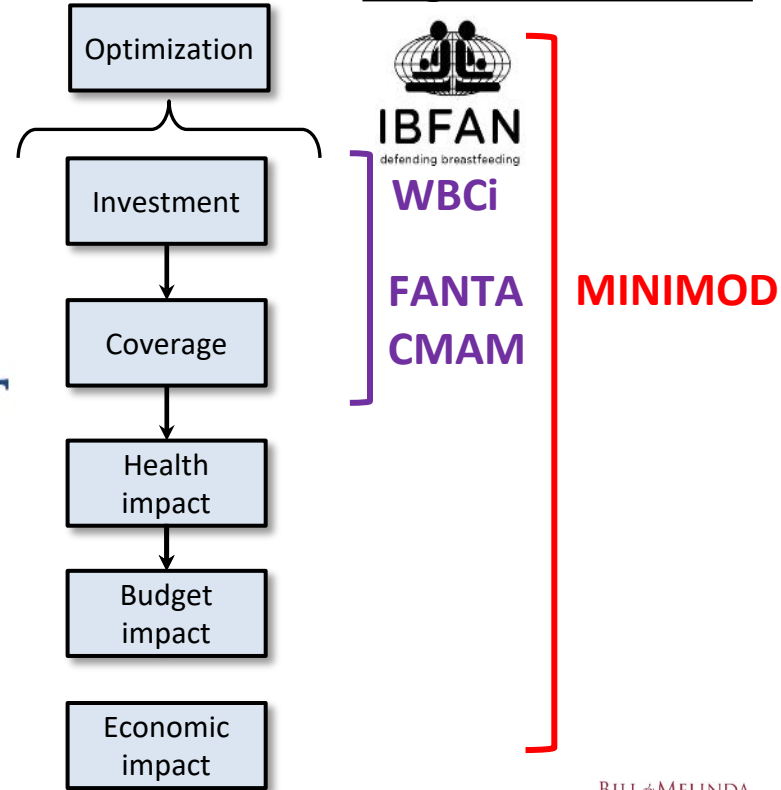


Several analytic tools exist which can support resource allocation decisions for nutrition

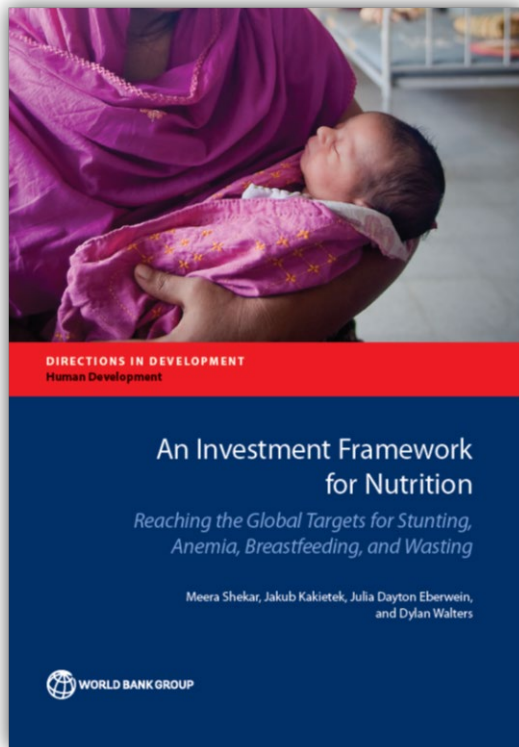
Multiple interventions:



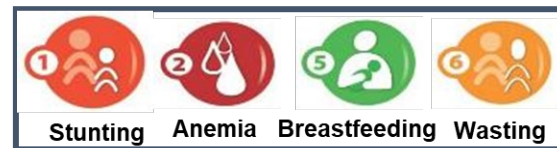
Single intervention:



Global Analytics: Global Investment Framework



Global Targets (WHA/SDGs)



- How much it will cost?
- What will we buy with this investment?
 - Nutrition outcomes
 - Health/lives saved
 - Economic benefits
- How can it be financed?

Key question we could not answer:

What is the optimal allocation of resources across interventions?

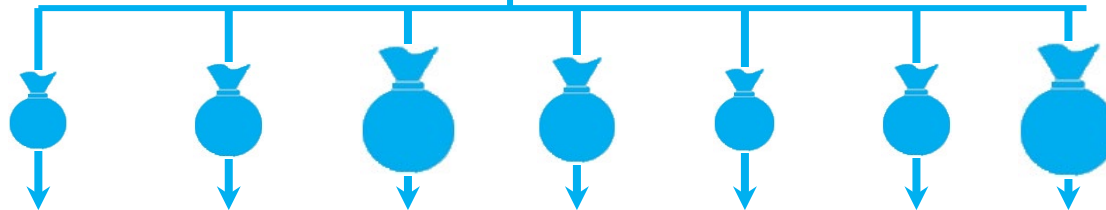
Optima models have assisted with budget allocation decisions in a variety of disease areas



Overall public health budget available for nutrition



Which investment combination leads to optimal outcomes?



Balanced energy protein supplementation

Multiple micronutrient supplementation

Breastfeeding promotion

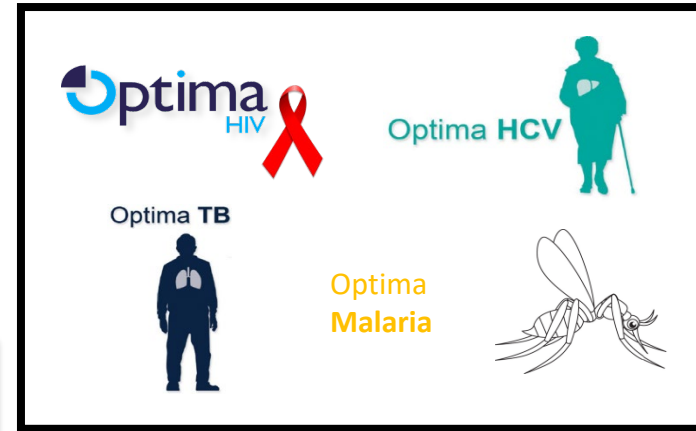
Vitamin A supplements

Prophylactic Zinc supplements

Complementary feeding education

Public food provision

Optima models are also available for HIV, TB, malaria, HCV



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Theme 2: Optimizing Financing and Fiscal Levers for Nutrition



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The Nutrition Quality Improvement

Theme 2: Optimizing Financing and Fiscal Levers for Nutrition



Michelle Mehta

Nutrition Specialist
World Bank Group

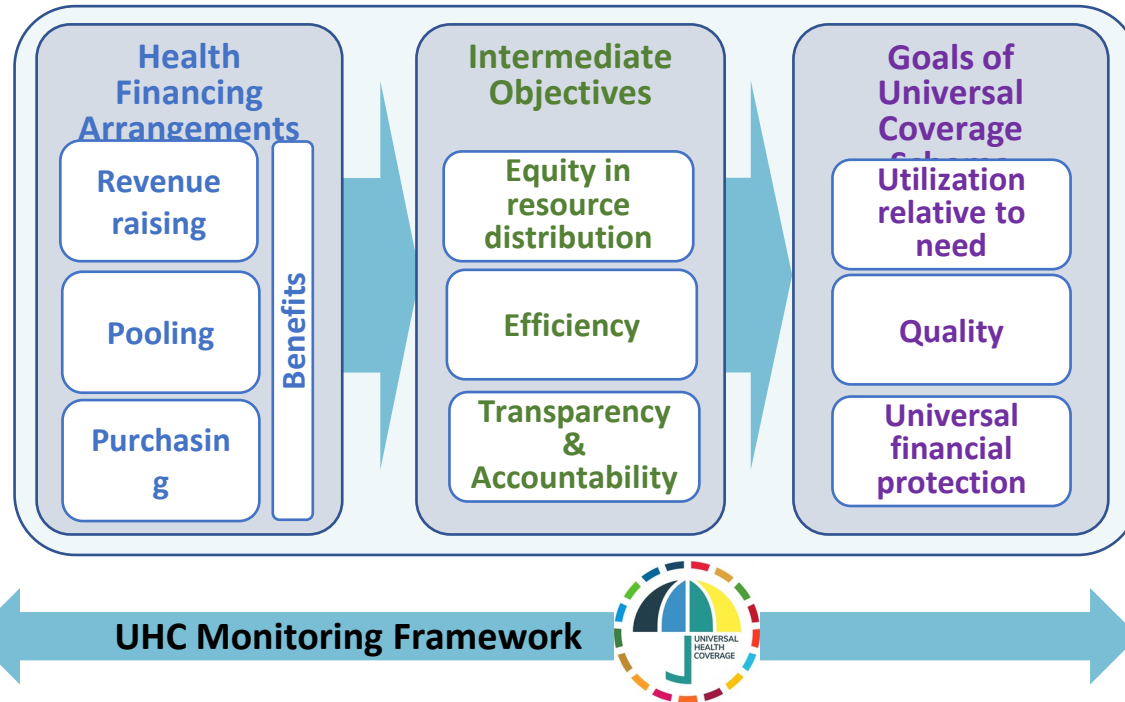


Bethany Warren

Senior Public Health Specialist
World Bank Group

Where are the opportunities?

THE OPPORTUNITY: UHC-oriented reforms offer an opportunity to optimize health financing arrangements to reach Global Nutrition Targets and health SDG



Nutrition lens

WHA Global Nutrition Targets



Nutrition & Health SDGs



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Theme 3:

Accountability and Data Driven Financing



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The Nutrition Quality Improvement

Theme 3: Accountability and Data Driven Financing



Pungkas Bahjuri Ali

Director of Public Health and Nutrition
Ministry of Planning of the Republic of
Indonesia



Huihui Wang

Senior Economist
World Bank Group



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Indonesia's Experience in Planning and Budgeting for Multisectoral Nutrition Program

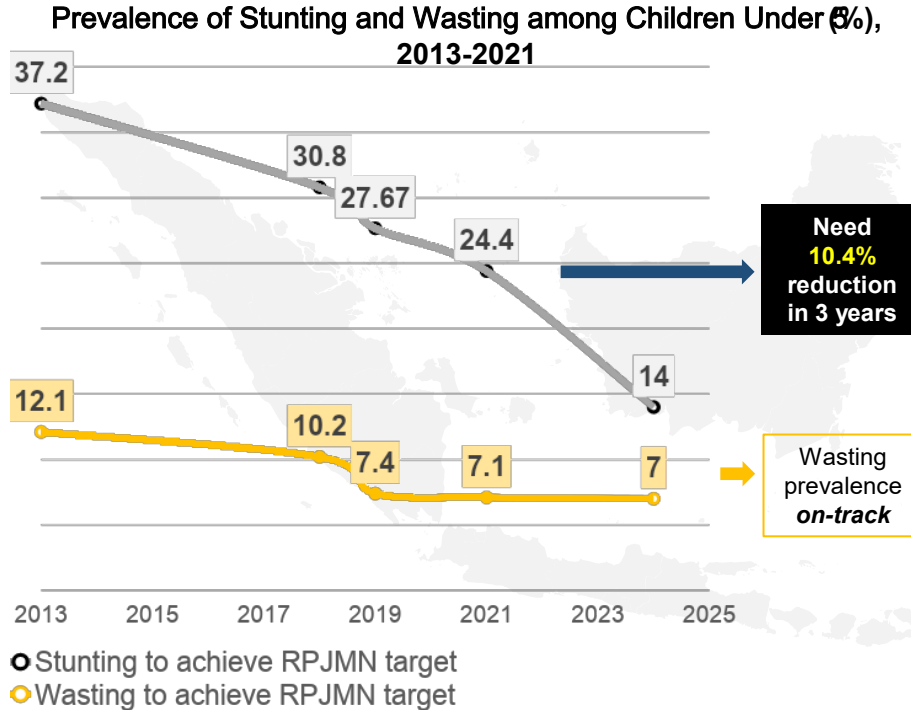
PUNGKAS BAHJURI ALI

Director of Health and Community Nutrition
Ministry of National Development Planning

January 24, 2022



National Stunting and Wasting Reduction



Source: National Basic Health Survey, 2013 dan 2018, Nutritional Status Study in Indonesia, 2019 and 2021

RPJMN: National Medium Term Development Plan

Strategy

- High level advocacy;
- Formulate planning dan budgeting document;
- Prepare financing mechanism;
- Secure budget allocation from key Sub-National Financing Mechanism:
- Fiscal Transfers;
- Local government's budget;
- Village budget.

What are the key reforms?



Set Targets to be Achieved by Each Ministry

- Establish the indicators and targets
- Monitor the budget disbursement



Budget Tagging & Tracking

- To monitor the budget trend
- Specify the targets to the first 1,000 days of life families



Fiscal Transfers

- To ensure that national priorities are implemented at the sub-national level

How does these key reforms affect the nutrition program in Indonesia?

1

Securing ministerial budget (specific & sensitive)

2

Convergence to 1,000 days of life families e.g.

- Local-based supplementary food,
- Specify Sustainable Food Garden program,
- WASH.

1 Commitments

- Commitment implementation to **budget document**
- **Regulation**

2 Tagging & Tracking

- Budget tagging **as a tool for policy making**
- Increase **ownership and awareness**

3 Reporting System

- 6-monthly **monitoring**
- Annual **evaluation**
- **Reporting System**

THANK YOU



sekretariat1000hpk@bappenas.go.id



Cegahstunting.id



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Sekretariat SUN Indonesia



Gedung TS 2A, Lantai 3
Jl. Taman Suropati No. 2, Menteng
Jakarta Pusat 10310



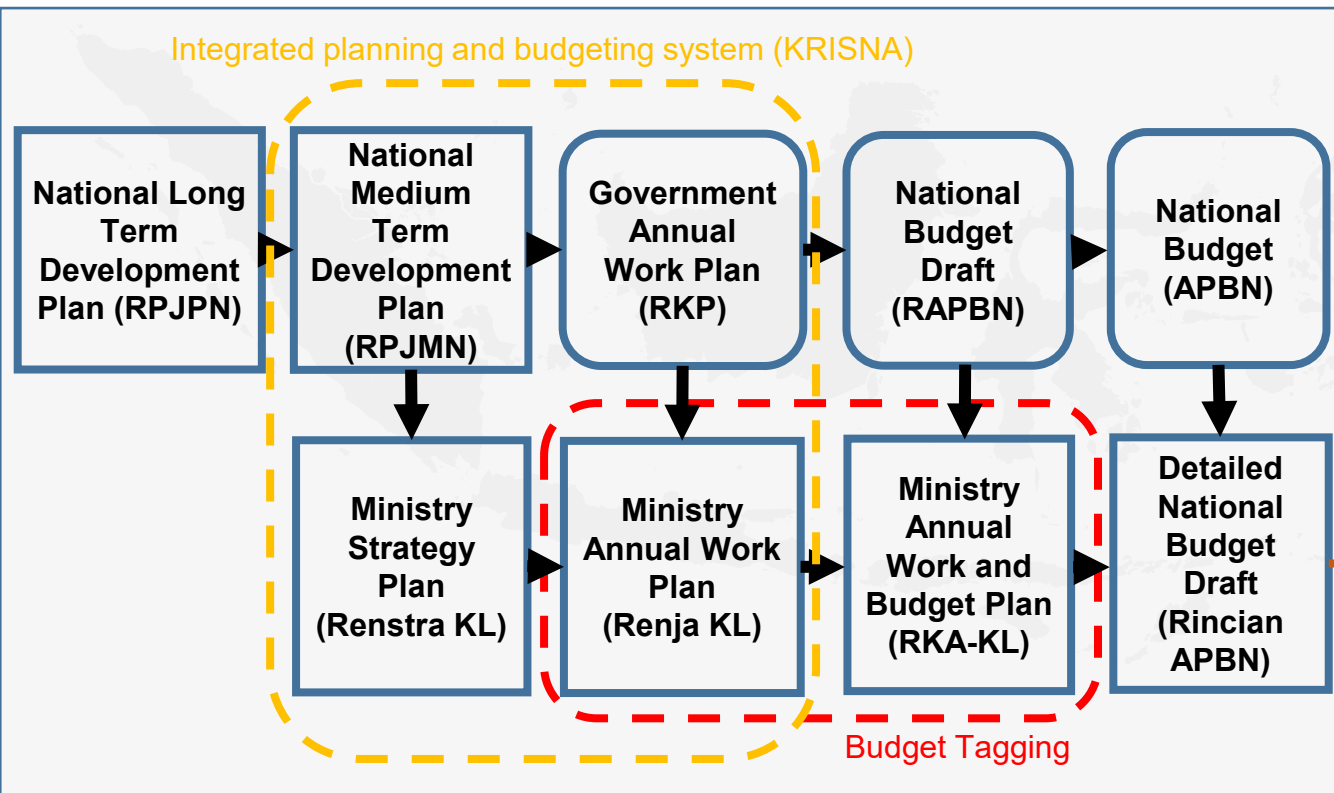
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Year N-1 (planning year)

Current (implementation) N year

Integrated planning and budgeting system (KRISNA)

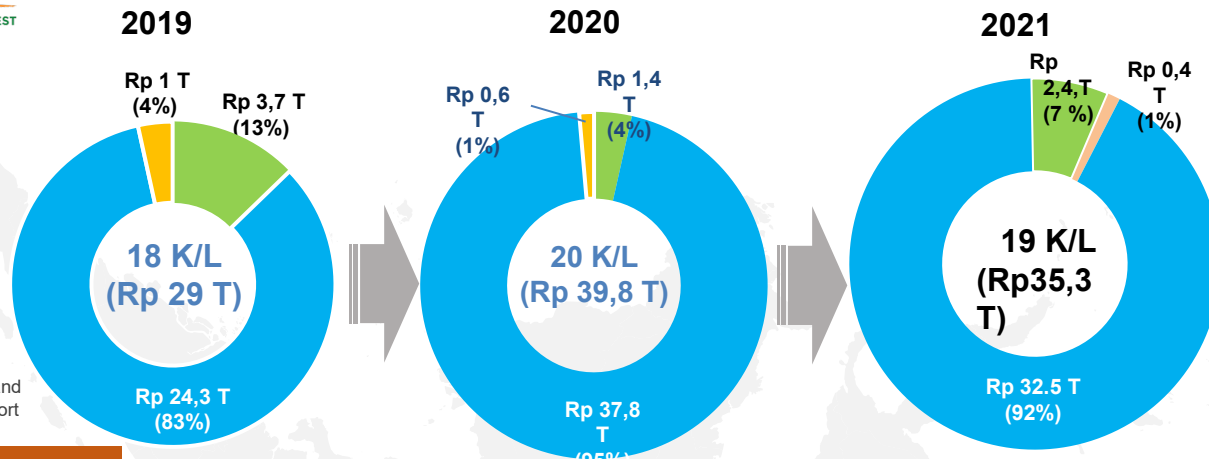


Budget Tagging

Monev results as the basis for budgeting year N+1

Trend of Budgeting for Stunting Reduction

- Nutrition Specific Intervention
- Nutrition Sensitive Intervention
- Assistance, coordination, and technical support



Key interventions

Nutrition Specific Interventions	Nutrition Sensitive Interventions	Supporting & governance interventions
<ul style="list-style-type: none"> Nutrition supplements for pregnant mothers with chronic energy deficiency and children under 5 who are underweight (MoH) Iron and vitamin A supplements (MoH) Breastfeeding promotion and counseling (MoH) Growth monitoring promotion (MoH) Immunization (MoH) 	<ul style="list-style-type: none"> Provision of drinking water and sanitation (MoPWH) Sustainable food garden/P2L (MoA) Early childhood education/PAUD (MoEC) Premarital education (MoRA) Non-cash food assistance/BPNT (MoSA) Aspiring Family Program/PKH (MoSA) 	<ul style="list-style-type: none"> Coordination and monitoring of the stunting reduction program (MoHDCA) Assistance on the implementation of convergence actions to the government at the sub-national levels (MoIA) Implementation of convergence actions at the village levels (MoV) Nutritional Status Survey (BPS-Statistics & MoH)

- Budget allocation decreased in 2021:
 - Ministry of Social Affairs (Social Protection) and Ministry of Housing and Public Works (Clean Water)
 - Budget for Nutrition specific intervention (MoH) decreased **due to budget refocusing** (to support Covid-19 pandemic control)
- Budget for nutrition sensitive intervention is not allocated solely for stunting.** We cannot divert the budget to nutrition specific intervention because the budget allocation from sensitive intervention is further analysed/calculated how much is contributing to stunting.

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Q&A



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