Strengthening Maternal Nutrition Data for Policy and Program in Selected ASEAN Countries

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4. Be accountable for better, more regular, detailed and disaggregated data

We need disaggregated data for all forms of malnutrition to see who is being left behind. In particular:
- Wealth
- Gender
- Geography
- Age
- Disability

We need better data on:
- Adolescents
- Dietary intake

We need to use the data to build the dialogues, partnerships, actions and accountability needed to end malnutrition in all its forms.
Not just collecting data…

But analyzing it, & using it to redirect programs and create accountability

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**OVERALL VISION**

Policymakers – and the entities which support development – make evidence-based decisions to drive country development and improve human outcomes (i.e. progress against the SDGs) based on access to accurate and timely data.

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**Data prioritisation**
- Defining data priorities and parameters for decision-making
- Lack of country voice and ownership in data prioritisation
  - Critical data is incomplete, missing or out of date
  - Insufficient statistical/analytical capacity
  - Insufficient, inconsistent funding and lack of capacity
  - Market failures associated with ‘public goods’

**Data creation and collection**
- Generating and gathering empirical field data
- Proliferation of donor data requests, formats, timelines

**Data curation**
- Aggregating, structuring and reporting field data

**Analysis**
- Synthesising data, building analytical tools and models to derive insight
- Translating analytical findings to program and policy recommendations
- Making evidence-based decisions and implementing policy

**Interpretation/recommendations**
- Feedback loops

**Decision-making**

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**OUTCOME GOAL**

Improved country development and human outcomes (country progress against SDGs)

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Source: John Field 1987. Food Policy; Global Nutrition Report 2017
Maternal dietary intakes and nutrition status in ASEAN countries: Strengthening data analysis for policy and program

Rationale

- July 2017-ILSI/SEA seminar on maternal dietary intake and status in ASEAN countries
- Few nutrition indicators on maternal nutrition status/dietary intakes are available in large scale surveys
- Data are not collected/compiled, analyzed and interpreted in line with the specific purposes of use (policy decision, program monitoring or evaluation).
- Existing national data in selected countries in the ASEAN region: Indonesia, Philippines and Thailand can serve as case studies to derive the evidence-based policy and program
OBJECTIVES

• To provide the specific requirements of data needs from **policy and program managers’ perspectives** in relation to women/maternal nutrition (including dietary intake and nutritional status)

• To explain the **profile of available national data** relating to dietary intake and nutritional status of women of reproductive age/pregnant and/or lactating women

• To **construct the policy-relevant data analysis work plan** (about 6 months) to come up with a country model of national data system on maternal nutrition
## Indonesia-National Data Profile

<table>
<thead>
<tr>
<th>Type of Survey</th>
<th>Year survey</th>
<th>Variables</th>
<th>Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>National basic health research (Riskesdas)</td>
<td>2013</td>
<td>• Anthropometry (height, weight, waist and mid - arm circumference),</td>
<td>10-19 years; pregnant</td>
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<tr>
<td></td>
<td></td>
<td>• Health services,</td>
<td>women</td>
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<td></td>
<td></td>
<td>• Behaviors (Physical activity,</td>
<td></td>
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<td></td>
<td></td>
<td>• Sanitation and hygiene,</td>
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<tr>
<td></td>
<td></td>
<td>• Environment</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>• Communicable and Non-communicable diseases</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>• maternal health</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Socio-demographic</td>
<td></td>
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<tr>
<td>Individual Food Consumption Survey 2014</td>
<td>Sub-sample Riskesdas 2013</td>
<td>• Intake</td>
<td>10-19 years; pregnant</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Chemical contaminant</td>
<td>women</td>
</tr>
<tr>
<td>Cohort (Bogor Study)</td>
<td>2011-2016</td>
<td>Child growth and development Mothers intake and nutritional status</td>
<td>10-19 years; pregnant</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>women</td>
</tr>
<tr>
<td>Status</td>
<td>Percentage (%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------------------------------------------------------------------</td>
<td>----------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chronic Energy Deficiency among adolescent (15-19)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Pregnant women</td>
<td>38.5%</td>
<td></td>
<td></td>
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<tr>
<td>- Non-pregnant women</td>
<td>46.6%</td>
<td></td>
<td></td>
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<tr>
<td>Anemia among adolescent women (13-18 years)</td>
<td>22.7%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nutritional status among children aged 5-18 years old</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Stunting</td>
<td>29.8%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Obesity</td>
<td>4.8%</td>
<td></td>
<td></td>
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<tr>
<td>- Wasted</td>
<td>9.2%</td>
<td></td>
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<tr>
<td>Deficit protein among 13-18 years old</td>
<td>48.1%</td>
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<tr>
<td>Early marriage (&lt;20 years) (Q1-Q5)</td>
<td>3.9% - 17.3%</td>
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</tbody>
</table>
Adolescents’ Nutrition in Indonesia

"Indonesian adolescents have been increasingly confronted with the double burden of malnutrition"

Anemia prevalence in adolescent girls (23%) exceeds the World Health Organization cut-off for a moderate public health problem, defined as anemia prevalence of 20 -39.9%

- Only 3% of adolescents aged 15–19 years consume at least five servings of fruits and vegetables a day\(^1\)
- Indonesian adolescents often miss meals (i.e. breakfast), and tend to snack and consume take-away and energy-dense foods more frequently than younger-aged children\(^2\)

1. Landscape report on adolescent and maternal nutrition in Indonesia, GAIN 2014.
2. Perspectives and experiences of adolescents on eating, drinking and physical activity, Reality Check Approach Plus and UNICEF Indonesia, 2017
PRESIDENTIAL DECREE NO. 42/2013

- Presidential Decree No. 42/2013 on National Movement to Accelerate Nutrition Improvement within the Framework of the First 1000 Days of Life signed in May 2013
  - Provide authority to the Coordinating Ministry of Human Development and Cultural Affairs to oversee the coordination of the SUN Movement in Indonesia
  - Identify coordinating structures to convene multiple stakeholders and sectors at national and sub-national level
**POLICY FOCUS**

- Revision of presidential decree and ministerial decree to include balance nutrition guidelines for adolescent (recommendation in WNPG)
- Strengthen national health data management on integrating surveillance data of adolescent nutrition
- Key message for advocacy on adolescent nutrition in district level policy makers and initiate a proposed Local Decree
- Building stakeholder commitment
- Capacity building
Philippines-Nutritional Data Profile

- National Nutrition Survey: DOST-FNRI-primary source of national health and nutrition statistics

Other sources:
- NDHS: PSA
- FHS: PSA/ DOH
- Administrative Data: OPT-NNC, FHIS-DOH
- Cebu Longitudinal Health and Nutrition Study (1983 to present), Office of Population Surveys, State-Colleges-University
- Other Surveys(eg. Academia, NGOs)

% Prevalence


43.6 43.0 45.7 43.9 42.5

45.7 25.2

31.6 16.6

15

10

5

0

Pregnant

Lactating
Basis for Currently Developed Policy

- FNRI study that 10% of 0-1 month old infants is already stunted.
- 24.8% of pregnant women are nutritionally at risk and higher for adolescent at 34%.
- CED P/L are in the lowest economic quintile.
- Prevalence of low birth weight is at 21%.
Currently Developed Policy

- DIETARY SUPPLEMENTATION GUIDELINES FOR PREGNANT AND LACTATING WOMEN- PART OF Philippines Plan of Action for Nutrition
  - FOR Chronic Energy Def PREGNANT AND LACTATING WOMEN
  - FOOD POOR P/L women
II. POLICY OF FOCUS: F1k (First 1000 days)

- FIK (First 1000 days)-main focus of the PPAN 2017-2022, and of the PDP 2016-2022 chapter 10, Commitment to WHA 2025 & SDG 2030
- F1K is now a LAW since 29 November 2018—means a PRIORITY NATIONAL AGENDA—to be implemented and supported nationwide (including preconception period and adolescent girls)
- Data of National Nutrition Survey being used to develop policy and interventions
<table>
<thead>
<tr>
<th>What</th>
<th>Who owns it</th>
<th>How it’s being used</th>
</tr>
</thead>
<tbody>
<tr>
<td>MICS</td>
<td>NSO/UNICEF</td>
<td>LBW</td>
</tr>
<tr>
<td>HDC</td>
<td>Ministry of Public Health (MOPH)</td>
<td>ANC data</td>
</tr>
<tr>
<td>NHES</td>
<td>HSRI, Rama, MOPH</td>
<td>Health, anthropometric data of women of reproductive age, 1-year-old children</td>
</tr>
</tbody>
</table>
Trend of Prevalence of low birthweight (LBW)

Goal: LBW <7%

Prevalence of anemia by region, Aug 2017

Selected MCN indicators, Thailand: Data from Health Data Center, MOPH

Trend in median Urinary iodine, pregnancy
% of 0-2 y old children with optimal growth by region, Thailand

Median Urinary iodine by age

Prevalence of anemia for 6y old children (index group)

MOPH survey, 2014

Health Examination, 2008/9 & 2014
**Mean IQ ภาพรวมทั้งประเทศ = 98.23**

Every $ invested yield a return of $48 in health & economic productivity
Policies and Programs: Policy of Focus

• **Program title**: The Miracle of 1000 days


• **Target group**: Pregnant women, infant (0-6 months), and young child (6 months to 2 years)

• **Activities under Ministry of Public Health**:
  - High Quality ANC
  - Supplements (Iron, iodine and folic acid), diet recommendation + provision of eggs and milk—
  - Physical and mental health, etc

*Note: Initial phase of implementation—baseline data on pregnant and lactating women dietary intake—ongoing; review of monitoring indicators and impact evaluation*
SUMMARY

- Periodic Data from National Nutrition/Health/Population and Food consumption Surveys – key evidence for national/local policy and intervention

- Policy of focus- **Framework of the first 1000 d**
  Indonesia – Adolescent nutrition into current Presidential Decree
  Philippines- Legislation of F1K as national priority
  Thailand-Miracle of 1000 d roll out –initial phase

- Spotlight – data on maternal/women/adolescent dietary intake and nutrition status

- Data Value Chain analysis  – *work in progress*
THANK YOU!