



MULTISECTOR COLLABORATION FOR THE IMPLEMENTATION OF REGIONAL FOOD AND NUTRITION ACTION PLAN IN CENTRAL JAVA

Anung Sugihantono¹, Sri Suwitri², Agus Suwandono³, Kismartini⁴, Nurhasmadiar
Nandini⁵, Hanifa M. Denny^{6*}

¹⁻⁶ Diponegoro University, Jl. Prof. Soedarto, SH, Tembalang, Semarang, Indonesia

*Corresponding Author's Email: hanifadenny@live.undip.ac.id

Article details:

Received: 23th August 2020

Revision: 31th August 2020

Accepted: 9th September 2020

Published: 30th September 2020



Abstract

According to National Planning Development Agency Regulation No. 1 of 2018 on Regional Food and Nutrition Action Plan (RFNAP) or "*Rencana Aksi Nasional Pangan dan Gizi*" (in the Indonesian language), one of the objectives of RFNAP is to integrate and coordinate the food and nutrition planning and program coordination with multisector participations. This research objective was to analyze the

importance of multisector coordination in the implementation of 2015-2019 RFNAP in several Districts/Cities in Central Java Province and its contribution to the program's success and failure. This research method was a qualitative study aimed to understand the implementation of RFNAP multisector collaboration in selected Districts/cities of Central Java. This research was conducted in Central Java from February un August 2019. Data were collected using focus group discussion and in-depth interviews. The result showed that multisector agencies in Central Java Province took part in the planning and implementing RFNAP. The implementation of RFNAP policy in regions under the local Regional Planning and Development Agency (BAPPEDA) coordination formed a team consisting of several multisector agencies. Each of the multisector agencies has its roles and contributions concerning food and nutrition and collaborates to solve their regions' food and nutrition problems. However, the cities' program results are diverse in line with the difference in their commitments and funding. Therefore, this study's implication suggests that the local governments should strengthen the commitment and funding allocation to implement the RFNAP.

Keywords: BAPPEDA, Food, and Nutrition Action Plan, Policy Implementation, Stunting, RADPG

To cite this article :

Anung Sugihantono, Sri Suwitri, Agus Suwandono, Kismartini, Nurhasmadiar Nandini, H. M. D. (2020). Multisector Collaboration For The Implementation Of Regional Food And Nutrition Action Plan In Central Java. *International Journal of Health, Education and Social (IJHES)*, 3(9), 1–13.



Introduction

Good nutritional status among children and society is one of the leading indicators of a nation's health development quality. National Food and Nutrition Action Plan (NFNAP) or in Indonesian language is called *Rencana Aksi Nasional Pangan dan Gizi (RANPG)* is one of the implementations of public policy deals with addressing the multisector national nutrition problems (BAPPENAS 2010). Insufficiency of food and nutrition intake can affect children's health problems such as stunting and other health disorders related outcomes. The expected impact of implementing the Regional Food and Nutrition Action Plan (RFNAP) is that each region can develop the food and nutrition plan to solve those problems with multisector coordination.

The implementation of RFNAP in Central Java Province is unique compared to other provinces in Indonesia since all mayors and regents in Central Java Province have signed the commitments to execute the RFNAP. The Central Java Governor expected success by involving the District/City Health Offices, the District/City Agriculture Offices, and the Local Government Development Agency (*Bappeda Kabupaten/Kota*) in its "specific" and "sensitive" nutrition programs. The provincial government of Central Java and District/City levels had put together the interpretation of RANPG implementation at the provincial level into Regional Food and Nutrition Action Plan (RFNAP) or *Rencana Aksi Daerah Pangan dan Gizi* - Indonesian language. However, the problems and performance in implementing the Regional Food and Nutrition Action Plan among the Districts / Cities government in Central Java were varied.



The Central Java Governor Regulation No. 85/2016 on the Regional Food and Nutrition Action Plan 2015-2019 was to improve the quality of the human resources to improve the food and nutrition program in the region. The Central Java policy set a strategy for strengthening the program in multisector coordination and collaboration.

Previous findings shows that multisector coordination potentially encourages the Districts/Cities to make their innovations to solve the food and nutrition problems locally. Meanwhile, the nutrition program's long-term impact is in decreasing the problems related to food and nutrition, including stunting and malnutrition (Lamstein, Pomeroy-Stevens et al. 2016, Webb, Ghosh et al. 2016). A successful program usually needed a strong partnership (Setorglo and Steiner-Asiedu 2016, Roche, Bury et al. 2018, Wiyono, Burhani et al. 2019).

The nutrition improvement program involves some "specific" and "sensitive" nutrition interventions programs. The specific nutrition intervention is a direct nutrition program from the health sector, and its collaborators are a partial effort to reduce the number of stunting cases and malnutrition among children under five years old. Meanwhile, nutrition-sensitive intervention or an indirect nutrition program in agriculture is a partner program to increase the community's access to food to attain a healthy and balanced diet. It addressed the utilization of a multisector role in food security, health, education, economic, environmental, and social aspects (Ruel, Alderman et al. 2013, Kennedy, Fekadu et al. 2016, Webb, Ghosh et al. 2016, Kim, Mansoor et al. 2020).



This research aimed to analyze the importance of multisector coordination in the implementation of 2015-2019 RFNAP in several Districts/Cities in Central Java Province and its contribution to the program's success and failure.

Methods

This research was qualitative study aimed to understand the implementation of health policy on food and nutrition in Districts / Cities Health Offices in Central Java. The researchers conducted this study in Central Java Province by inviting 28 participants from ten selected Districts/Cities Health Offices in Central Java Province. The Central Java Health Office, Provincial Agency for Planning and Development or *BAPPEDA*, Marine and Fisheries Office, Food Security Office, and Food and Drug Administration (*Badan Pengawas Obat dan Makanan-BPOM or BPOM*) were also involved in this research. The researchers collected the data utilizing focus group discussion (FGD) and in-depth interview methods from February to August 2019.

The FGD involved ten health officers from the provincial health office of Central Java, while the in-depth interview invited three selected Districts/Cities Health Officers within Central Java Province. In-depth interviews and FGD were recorded, transcribed in verbatim transcription, and tabulated according to coordination, sharing responsibility, communication, and challenges. The language for the interview was Bahasa Indonesia, selected answers and quotes were translated into English. The contents analysis was utilized according to the questions of principle themes during FGD and interpretation of the informants' answers. Furthermore, this study categorized the information words according to the similarity in meaning and connotation.



This research was declared ethical by the Health Research Ethics Committee of the Faculty of Public Health, Diponegoro University, with EC. No. 40/EA/KEPK-FKM/2019.

Results and Discussion

According to National Development Planning Regulation No. 1 of 2018 on Regional Food and Nutrition Action Plan (Rencana Aksi Daerah Pangan dan Gizi- RFNAP), one of the objectives of RAD-PG was to integrate and coordinate the food and nutrition planning using program coordination and multisector activity, (BAPPENAS 2018).

Coordination

The result showed that the implementation of food and nutrition policy was the responsibility of local multisector organizations and not only to the health sector alone. The implementation of RFNAP policy in regions was coordinated by the local Regional Planning and Development Agency (*BAPPEDA*) that formed a team consisting of several multisector agencies. Each of the multisector agency had its roles and contributions to solve collaboratively to the food and nutrition problems in their Districts / Cities.

“For food and nutrition problems, we directly handled the matters with *BAPPEDA* from the planning and action, and we did it annually, with a meeting every three months concerning the food and nutrition problems. As for multisector, especially with the agriculture agency, then with the animal husbandry agency and fisheries agency, we shared the activities we were going to do, then together we built mutual synergy.”

R1

"We built coordination to set up some priorities to determine the best intervention programs related to food and nutrition issues." R5



Based on the results, several offices were involved in implementing RFNAP, including *BAPPEDA*, Marine and Fisheries Office, Food Security Office, Education Office, and *BPOM*. Almost all of the fields in each of those offices were involved in the technical implementation. This study is similar to the success story of a study in Ghana. The study shows that the stakeholder's engagement involving multisectoral offices include health, education, agriculture, local government, and civil society. The group works together to deliver a piece of relevant information and set the actions needed (Billings and Wullingdool 2019). A strong point of its success in Ghana's study is proper coordination among stakeholders.

In Uganda and Nepal on scaling up nutrition program are driven by coordination from the planning process, funding to implement the program in all sectors, setting priority identification by all stakeholders and improve the understanding across all related sectors, (Reeves, Lewin et al. 2011, Pomeroy-Stevens, Viland et al. 2017). These results also support the importance of coordination in multisectoral nutrition program of this study.

Sharing Responsibility

Multisector coordination is needed for each institution to understand that the problem of food and nutrition. It is a shared responsibility, and each institution has a task that must be done to support the implementation of the RFNAP policy.

Cilacap District established a special team, a team of food security experts consists of experts from various multisector agencies. The team was responsible for sharing tasks among agencies if



problems were found related to food and nutrition. The finding was expressed by the respondent as follow:

“Moreover, Cilacap District has already established a Team of Food security, so when the stunting issues blew up the other day, the village administrator (*Organisasi Perangkat Desa-OPD*) have played some roles according to their capacity, and delivering what have already been implemented to overcome the problems of stunting. Something like that.... At that time, the Health Officer, the Education Officer, Family Planning Officer, and other Officers have explained what they have done to prevent stunting....” R16

Sharing responsibility is a strategic method in succeeding the multisector collaboration. Sharing responsibility and strengthening collaboration as well as proper communication are the strategic investment in multisector collaboration, (Gaihre, Kyle et al. 2019, KASSAW 2020).

International Journal of Health, Education and Social (IJHES)

Roles

The multisector collaboration approach referred to the concept of Interprofessional Collaboration (IPC), a process where professionals from multidisciplinary expertise shared tasks and carried out duties to serve patients and society (Reeves, Lewin, et al. 2011). Marine and Fisheries Office held a specific role in supervising fish processing quality, developing aquaculture and fisheries marine businesses, and maintaining fish quality. Food and Drug Administration played a role in the inspection and certification as well as food testing. The Food Security Office had a role in the availability and completeness of food, distribution and food reserves, food



security, consumption, and food diversification. Meanwhile, the Education Office played a role in addressing nutritional problems among school-age children and supporting other multisector offices' policies.

"BAPPEDA takes the role in the annual planning, and actions related to food and nutrition issues. The office of agriculture, the office of livestock and fisheries, the city health office, and the women empowerment organization or PKK (in the Indonesian language) collaborate with different roles and locus of attention. Moreover, this year, we are also handling the stunting problem together beside some officers' rotation to get a new assignment at different offices. The former staff at the health office was rotated to BAPPEDA, which was a good synergy since the former health officers had a better understanding of the stunting program." R2

Communication

One of the RFNAP goals was to realize multisector coordination at the Districts / Cities level to handle food and nutrition issues. Sukoharjo District was one of the Districts that had actualized the multisector coordination between the Health Office, Education and Culture Office, and Ministry of Religious Affairs to address anemia in adolescents' health issues of the mother and the baby.

"For example, as I saw in Sukoharjo, between the Health Office, Education Office and Ministry of Religious affairs, they were "quick" in instilling the young women to prevent anemia by consuming Fe tablet. The approach to pregnant women to participate in the Antenatal Care Program has been launched, namely: "*Jateng Gayeng Nginceng Wong Meteng*". So, they communicated by making it easier for communication the program according to the region." R2



Other respondent also voiced out that communication with the stakeholders or even the subordinate would enhance the program's success.

"Not all funding for nutrition related to health available at the city health office. We communicate regularly with the community health centers regarding the availability of the funding allocation, whether the funding goes directly to the health centers or available at the city health office." R3

The participation and linkages of stakeholders in the program, which involved multisector institutions, are fundamental aspects to achieve the program's success. Previous studies suggests that effective multisector communication and coordination, as well as the ability to collaborate and build secure networking, are needed to achieve the performance targets (Kennedy, Fekadu, et al. 2016, Lu, Dickin, et al. 2017; Zaidi, Bhutta, et al. 2018). Communication can play as a barrier in multisector collaboration, (Gaihre, Kyle et al. 2019, KASSAW 2020). The policy and countermeasure on the stunting in Indonesia also emphasized that the nutritional issue was a multi-factorial variables, and the implementation of the treatment requires multisector involvement (Anggraini and Romadona 2020). Research in Nepal and Uganda also explained that the multisector approach was the most influential attempt in dealing with cases of malnutrition, but it has to be accompanied by proper coordination and sufficient budget (Jerling, Pelletier, et al. 2016, Kennedy, Fekadu, et al. 2016, Pomeroy-Stevens, Viland, et al. 2017).

Research in Pakistan related to the handling problems of nutrition among children explains that multisector effort is needed. However, to make that multisector effort runs effectively in a particular condition, it is very crucial to have a careful planning, good coordination, policy support,



environmental support, and resources to be coordinated and integrated to run the multisector program (Kim, Avula, et al. 2017, Zaidi, Bhutta, et al. 2018). Other studies in Ethiopia and Nepal also states several challenges in implementing a multisector plan for nutrition. Every stakeholder's role and commitment play as the crucial components in working with multisector stakeholders, (Kennedy, Fekadu, et al. 2016).

The interprofessional collaboration application in the health area was made mainly of services to patients in the hospital. Implementing the RFNAP policy also required multi-disciplines coordination to achieve the RFNAP goals. Previous research showed that patient services with the IPC concept took time to be run optimally. The implementers from various multidisciplinary teams needed time to improve coordination in achieving the common goal (Reeves, Lewin, et al. 2011, Reeves, Pelone, et al. 2017). Due to the implementation of RFNAP, the multisector stakeholders from various multidisciplinary fields also took time to improve the coordination and cooperation ability to achieve the RFNAP goal.

Challenges

The District of Jepara faced an obstacle in executing the multisector collaboration, especially in term of data synchronization from different offices, and a variation in the data analysis between manual and computerized groups. Those gaps have caused a failure in achieving the stunting reduction.

"We were surprised by the sharp increase in stunting cases. Initially, the village health volunteers did not correctly report it, nor was it included in the local government



planning. Then, stunting became a big issue. Suddenly, we realized that there was a variation in the data. Therefore, we worked on data synchronization lately....." R9

Many challenges arise, such as. Communication problem, creating understanding, funding commitment in implementing the multisector collaboration. The person's adequate capacity in charge of the program and skill in the partnership were among the potential success in delivering a multisector program collaboration. Thus, ensuring the clarity's role for each participating organization was crucial to handle the challenges. (Kouam, Delisle et al. 2014, Jeruszka-Bielak, Sicińska et al. 2015, Balarajan and Reich 2016, Goshtaei, Ravaghi et al. 2016, Jerling, Pelletier et al. 2016, Kennedy, Fekadu et al. 2016, Lamstein, Pomeroy-Stevens et al. 2016, Harris, Drimie et al. 2017, Zaidi, Bhutta et al. 2018, Kim, Mansoor et al. 2020).

Conclusion and Recommendation

Multisector collaboration and coordination are two crucial successes in implementing the regional nutrition and food action plan. This research is a thesis of similarity with the multisector collaboration studies. Coordination, sharing responsibility, and communication are the aspects of facing all challenges in the program delivery.

The expected impact of the implementation of RFNAP policy is each region's ability to solve the problems related to food and nutrition with multisector coordination. Food and nutrition problems are not just the health sector's responsibility, but they also required coordination from other sectors, including agriculture, fisheries, and food security. Multisector coordination would also encourage the Districts/Cities to make innovations to solve the food and nutrition problems in the local area, such as sharing responsibility and assign an expert in each team. Therefore, the



long-term impact will be the decrease in food and nutrition problems, especially the stunting and malnutrition. This study implies that strengthening multisector collaboration needs a proper coordination, communication, sharing responsibility, and understanding the role of each institution.

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