



WNPG XI



# RECOMMENDATION OF WIDYAKARYA NASIONAL PANGAN DAN GIZI XI (NATIONAL WORKSHOP ON FOOD AND NUTRITION XI) 2018

**Accelerating the Reduction in Stunting  
through Food and Nutrition Security Revitalization  
to Achieve Sustainable Developments Goals**

**3–4 July 2018 Bidakara Hotel, Jakarta**



**RECOMMENDATION OF  
WIDYAKARYA NASIONAL PANGAN DAN GIZI XI  
(NATIONAL WORKSHOP ON FOOD AND NUTRITION XI)  
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# FOREWORDS

Widyakarya Nasional Pangan dan Gizi (WNPNG)/National Workshop on Food and Nutrition XI, held on 3–4 July 2018 in Bidakara Hotel, Jakarta was a proof that good cooperation enabled us to clearly observe stunting as one of among many national issues from various approaches and perspectives. National challenge related to stunting prevalence takes not only the attention of central government, but also that of local government, academics, industrial sectors, and community activists. This concern does not only emerge in discussion forums; hence, it is important for each party to take part and act based on each roles and capacities to prevent stunting.

WNPNG XI currently conducts interdisciplinary approaches to formulate strategies through comprehensive sectors or working groups. This forum covers various subjects and engages various parties; so that, the generated formula can be implemented by them, especially academics. The forum is meant to be used by academics to develop both basic and applied researches, as well as for practitioners and policy makers in finding solutions to improve community food and nutrition which in the end will contribute to stunting prevention.

Technological innovations should be actively taking part in the attempt to reduce and prevent stunting. Social sciences also vastly contribute in changing community life behavior in effort to obtain adequate nutrition as well as to live a healthy lifestyle. In addition, the acceleration of sanitation improvement or healthy food processing requires proper technology. This is the challenge for science and technology to show their importance and significant roles for Indonesia.

We would like to express our gratefulness and high appreciation to the speakers and reviewers, the participants, the committee, the sponsors, and also those supporting WNPNG XI 2018. In particular, we would like to deliver our gratitude for the good cooperation and support toward the co-hosts of the event; Ministry of National Development Planning (formerly

named National Development Planning Agency (Bappenas)), Coordinating Ministry for Human Development and Cultural Affairs, Ministry of Health, Food Security Agency of Ministry of Agriculture, Ministry of Maritime Affairs and Fisheries, National Agency of Drug and Food Control, and National Standardization Agency which actively participate in the event. Last but not least, we hope that the WNPG XI recommendation, which will be reassembled to be a recommendation for *Rencana Pembangunan Jangka Menengah Nasional* (RPJMN)/National Medium Term Development Plan 2020–2024, can be proceeded and used as guidelines in future policy and program drafting and be beneficial for Indonesia.

Thank you,  
Leader of WNPG XI Steering Committee

**Dr. L.T. Handoko**

Chairman of the Indonesian Institute of Sciences

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# ACRONYMS AND ABBREVIATIONS

Bappenas	<i>Badan Perencanaan Pembangunan Nasional/National Development Planning Agency</i>
BPJS	<i>Badan Penyelenggara Jaminan Sosial/Social Security Administering Agency</i>
CIEA	Communication, Information, Education, and Advocacy
EIBF	Early Initiation of Breastfeeding
EMTEK	<i>Elang Mahkota Teknologi</i>
GAPMMI	<i>Gabungan Pengusaha Makanan dan Minuman Seluruh Indonesia/The Indonesian Food and Beverage Association</i>
IPB	<i>Institut Pertanian Bogor/Bogor Agricultural University</i>
LIPI	<i>Lembaga Ilmu Pengetahuan Indonesia/Indonesian Institute of Sciences</i>
FNS	Food and Nutrition Society
MSS	Minimum Service Standard
PERGIZI PANGAN Indonesia	<i>Perhimpunan Pakar Gizi dan Pangan Indonesia/The Food and Nutrition Society of Indonesia</i>
PERSAGI	<i>Persatuan Ahli Gizi Indonesia/The Indonesian Nutrition Association</i>
Posyandu	<i>Pos Pelayanan Terpadu/Integrated Service Post</i>
Puskesmas	<i>Pusat Kesehatan Masyarakat/Primary Health Care</i>
RDA	Recommended Dietary Allowance
RPJMN	<i>Rencana Pembangunan Jangka Menengah Nasional/National Medium Term Development Plans</i>
SDG	Sustainable Development Goals
SEAFAST	Southeast Asia Food and Agricultural Science and Technology
UGM	<i>Universitas Gadjah Mada/Gadjah Mada University</i>
UI	<i>Universitas Indonesia/University of Indonesia</i>
UNJ	<i>Universitas Negeri Jakarta/State University of Jakarta</i>
WNPG	<i>Widyakarya Nasional Pangan dan Gizi/National Workshop on Food and Nutrition</i>



WNPG XI

## NATIONAL WORKSHOP ON FOOD AND NUTRITION (NWFN) XI

# INTRODUCTION

Stunting is the physical and intelligence impaired growth on children during the first 1,000 days of life as a result of poor nutrition. Stunting is a complex national issue in Indonesia. Basic Health Research conducted by National Institute of Health Research and Development, Ministry of Health, in 2013 shows that around 37% (almost 9 million) of children under age five in Indonesia suffer from stunting. According to 2017<sup>1</sup> data of The National Team for the Acceleration of Poverty Reduction, Indonesia is placed on the top five in the world on stunting prevalence. The 2017 data of World Bank implies that stunting in children spreads widely in Indonesia from Aceh to Papua not only in children from poor households, but also those of the non-poor ones. It is predicted that in the golden age of Indonesia, which is in 2045, there will be at least 9 million children in productive age with low competitiveness and therefore it will reduce the labor market productivity growth. Vulnerability of human resource competitiveness is a national competitiveness vulnerability as a whole.

The government has been undertaking policies and programs as well as intervention strategies on this issue. Moreover, policy change was made in 2007 by using integration and convergence approach, i.e. policy-program strategy; this was started in 100 regencies/cities and 1,000 villages to prevent stunting. In addition, the National Action Plan for Food and Nutrition 2017–2019 was released in October 2017. Nevertheless, stunting is a multi-dimensional complex issue that cannot be anticipated solely by the ministries and government institutions. Every element of the nation; e.g. industry, academics, and the community, needs to pay attention and be actively involved in accordance with each roles and capacities.

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<sup>1</sup> The data are taken from a publication entitled “100 Prioritized Regencies/Cities on Stunting Intervention,” Volume 1, composed by National Team for the Acceleration of Poverty Reduction—the Secretariat of the Vice President of Indonesia.

WNPG is a cross-stakeholder forum which is held every four(ish) years. The WNPG XI 2018 focused on the attempt to reduce stunting prevalence in Indonesia which is one of important targets in Sustainable Development Goals (SDGs). The theme of WNPG XI 2018 was “Accelerating the Reduction in Stunting through Food and Nutrition Security Revitalization to Achieve Sustainable Developments Goals.”

Therefore, Indonesian Institute of Sciences (LIPI) along with Ministry of National Development Planning, Coordinating Ministry for Human Development and Cultural Affairs, Ministry of Health, Food Security Agency of the Ministry of Agriculture, Ministry of Maritime Affairs and Fisheries, National Agency of Drug and Food Control, and National Standardization Agency had been preparing substantial discussion since January 2018 through Focus Group Discussion as well as pre-WNPG XI seminars/workshops. Since the beginning, the ministries, institutions, universities, associations, along with industrial sectors and community activists were actively participating in discussion and recommendation drafting.

Focuses of discussion are:

- I. Community Nutrition Improvement
- II. Improving Diverse Food Accessibility
- III. Improving Food Quality and Security Assurance
- IV. Improving Clean and Healthy Life Behavior
- V. Nutrition and Food Development Coordination

Public enthusiasm for the event can be seen from the number of participants and their engagement in WNPG XI on 3–4 July 2018. There were 1,085 participants representing 130 organizations/institutions which comprise of 25 ministry/agency representatives of the central government, 30 local government representatives, as well as 39 university/polytechnic representatives, 13 representatives of professional body/elements, 10 industrial sector representatives, and 13 international representatives. Long and intensive process of Pre-WNPG XI resulted in recommendation draft which was further discussed and sharpened during WNPG XI. WNPG XI Recommendation cov-

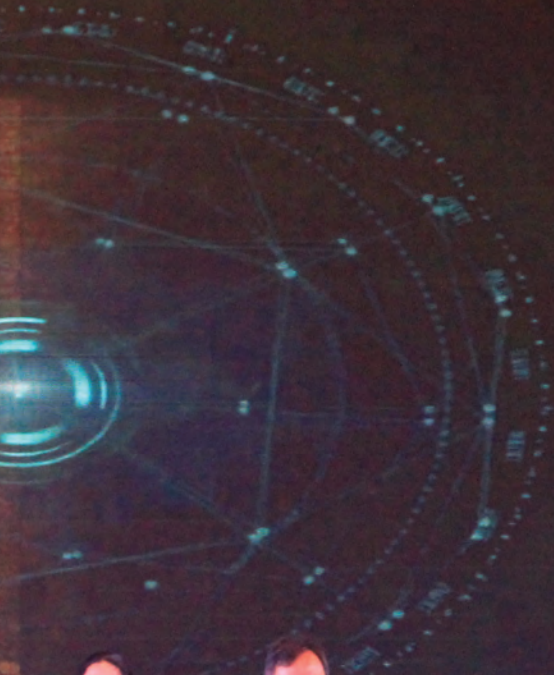
ers various aspects; namely, regulations and policies, programs, monitoring, and evaluations, institutional and coordination, community empowerment, and researches to reinforce policies and programs as well as stunting preventive strategies in the future.



WNFPG XI 2018



BIDAKAR







WNPG XI

# I. ENHANCING COMMUNITY NUTRITION

## 1. Regulation and Policy Aspects

- a. Improving nutritional status category term in Child Anthropometric Standard and applying Anthropometric Standard for Pregnant Women and Adult Population;
- b. Improving Recommendation Dietary Allowance (RDA) with Minimum Energy Requirement in average of 2,100 kcal and RDA for Protein of 57 gram per capita per day, as well as improving Dietary Reference Values and Nutrition Labeling Guidelines;
- c. Utilizing and sustainably and routinely updating Indonesian Food Composition Data in the related agencies for assessment, consumption planning, and food supply purposes;
- d. Proposing food for special medical needs which is functioned as medicine in its relation with benefit packages according to Indonesian Case Based Groups to correspond to National Formulary and National Health Insurance payment scheme;
- e. Improving Government Regulation No. 2/2018 on Minimum Service Standard (MSS) which needs to be proceeded through establishing technical instructions for the entire target groups so that Service for Nutrition can be mentioned in MSS in Health.

## 2. Program, Monitoring, and Evaluation Aspects

- a. Creating nutrition improvement model, especially for stunting prevention through regional approach, dominant cause factor, food system, specific-sensitive intervention convergence, and community empowerment by considering environmental sustainability;
- b. Developing nutrition surveillance system to make sure data availability, including stunting, in every Integrated Service Post (Posyandu) intensively in detail until the village level to make sure the intervention reaches the target;
- c. Enhancing balanced nutrition campaign and “Isi Piringku” (My Plate) campaign especially for school children, teenagers, pregnant women, breastfeeding mothers, and children in early childhood which are equipped with continuous monitoring and evaluation using Balanced Nutrition Index;
- d. Integrating balanced nutrition content in the curriculum or learning process for school children starting from early childhood to high school education level;
- e. Increasing supply and consumption of animal-based food, vegetables, and fruits according to suggested balanced nutrition especially in nutrition improvement program, including stunting, prioritized villages;
- f. Providing/placing one nutritionist in each nutrition improvement program, including stunting, prioritized village. The nutritionist also has the role to reinforce specific and sensitive nutritional planning in Development Plan Meeting and Discussion in both village and sub-district level;
- g. Developing reward and punishment system for heads of village, sub-district heads, regents/mayors, governors, ministers, and institutions who coordinate and meet the target achievement well or poorly in food and nutrition development;

- h. Developing reward system for companies (business world), community organizations, higher education institutions, and professional organizations who organize public-private-people professional partnership activities/programs which have proven succeeded in improving food and nutrition of the community.

### 3. Institutional and Coordination Aspects

Reinforcing institutional aspect of quality standards and nutrition adequacy working group to become a national secretariat of food and nutrition standard which is organized by LIPI to ensure its sustainability.

### 4. Research Aspects

- a. Formulating comprehensive research road map in nutrition under the coordination of National Institute of Health Research and Development to be used as part of the primary research road map in food and nutrition, as recommendation for Ministry of Research, Technology, and Higher Education, and also as the basis on the drafting of standard, a planning and policy evaluation on food and nutrition program;
- b. Developing stunting intervention model by considering formative research result which is related to success and failed factors of nutrition improvement in village, sub-district, and regency/city levels and also reflecting to successful experience in foreign countries;
- c. Reinforcing local food development based on local wisdom and community empowerment by involving universities, government research and development agencies at various level, as well as the business world as part of the effort to improve community nutrition;

- d. Developing functional food which is directed toward function improvement or decreasing risks of disease as promotive and preventive means by prioritizing the fulfillment of balanced nutrition;
- e. Developing research on effective nutrition education media/instrument which corresponds to target group by considering local specifics.

## II. ENHANCING DIVERSE FOOD ACCESSIBILITY

### 1. Regulation and Policy Aspects

- a. Establishing food demand pattern in both national and regional levels, based on food groups and local diversity-based commodities to fulfil the population's nutritional and other needs as the basis to increase diverse, balanced, and safe food consumption specific to areas with high stunting rates;
- b. Evaluating policies and identifying of critical factors in the implementation of local resource-based food diversification with commodities suitable for cultivation in the local area, which is followed with the changing consumption behavior in order to overcome dependence on rice and flour;
- c. Providing guarantee on the availability and access to drinking water and agricultural irrigation, especially in all stunting prevention priority locations.

### 2. Program, Monitoring, and Evaluation Aspects

- a. Adding the number of storage and support infrastructure and facilities as well as seeking for equalization, as buffer stock especially for animal-based food to connect to supply chain lines at affordable cost;
- b. Developing, administrating facilities, and utilizing e-commerce system to reduce costs for more affordable commodity prices;

- c. Enhancing animal-based food, vegetables, and fruits consumption especially for target group in stunting prevention priority locations and other nutrition-vulnerable groups through socialization to pregnant women, school children, Primary Health Care (Puskesmas), and other community institution as well as providing food price subsidies and increasing household income;
- d. Enhancing the fulfillment of diverse and nutritious food supply through processed food, fortified food, for pregnant women, breast-feeding mothers, toddlers, children, and teenagers;
- e. Providing non-cash food assistance, not only carbohydrate food but also animal-based food as well as Vitamin A fortified vegetable oil, and continuously maintaining the sustainability of their availability;
- f. Educating prospective fertile age couples and parents of children under age five about safe, diverse, and balanced food selection which is applicable to the local conditions.

### 3. Research Aspects

Conducting research on local food which is directed to easy food innovations development with extended shelf life, acceptable taste, easy to serve, and affordable.

# III. ENHANCING FOOD SAFETY AND QUALITY ASSURANCE

## 1. Regulation and Policy Aspects

Reinforcing and implementing regulation development programs along the food chain supply (production, distribution, consumption) by applying Good Regulatory Practices principals.

## 2. Program, Monitoring, and Evaluation Aspects

- a. Reinforcing conformity assessment agency which covers provision and/or testing laboratory reinforcement and/or calibration, network reinforcement, certification institutions, halal product guarantee institutions, and inspection agencies;
- b. Reinforcing risk communication program by competence authorities program in food safety and quality;
- c. Developing food safety and quality assurance recognition system which is implemented through third party assurance scheme (independent accreditation and certification agency);
- d. Adding food safety and quality material along the food supply chain to be communication, information, education, and advocacy (CIEA) for stunting prevention;
- e. Adopting the results of Food and Agriculture Organization/World Health Organization 2017 assessment which has been developed as a logical thinking framework to support the national system of food safety and quality in Indonesia;



- f. Developing supervision guidelines in accordance with effective and efficient (not overlapping) national system framework on food safety and quality;
- g. Developing monitoring and evaluation guidelines in accordance with national system framework on food security and quality;
- h. Developing education programs for coaches, supervisors, formulators, policy negotiators, and businesspeople in food safety, halalism, and quality.

### 3. Institutional and Coordination Aspects

- a. Implementing the mandate of Law No 18/2012 which requires an institution which acts as "National Coordinator for Food Safety and Quality Assurance";
- b. Reinforcing institutional coordination, law enforcement; food import-export; central government-local government and enhancing the role of local government in food safety and quality assurance; institutional coordination in research and development among government, universities, research institutions, and industries. In addition, reinforcing the coordination among competence authorities in food safety and quality with Halal Product Assurance Organization Agency of Ministry of Religious Affairs is also needed;
- c. Implementing food safety surveillance system and food safety emergency handling system;
- d. Developing mutual recognition system among competent authorities (risk managers);
- e. Reinforcing programs and the independence of risk assessment institutions on national food safety.

## 4. Community Empowerment Aspects

- a. Obligating the implementation of good practice guidelines for the production of particular processed food, for instance weaning food to complement breastfeeding for supporting the first 1,000 days of life;
- b. Consolidating the implementation of the integrated coaching and supervision systems on food safety which involves multisector, either for fresh food, processed food, and special food; and the food industries especially in the digital era; also systems and special schemes for micro, small, and medium enterprises along the food chain supply from upstream to downstream which involve farmers, fishermen, fish farmers, food processing people, and other;
- c. Reinforcing community role and participation in CIEA on food safety and quality, especially in the digital era;
- d. Empowering community leaders to promote behavior change for the development of food safety and quality culture by using local resources (human resources, natural resources, and funding).

## 5. Research Aspects

- a. Developing National Risk Profiling and National Risk Ranking;
- b. Drafting research road map and developing science and technology on food safety and quality;
- c. Calculating food safety burdens and food borne diseases;
- d. The influence of climate change on food safety and quality in Indonesia;
- e. Assessing food safety and quality issues as well as global trades in digital era in relationship to Sustainable Development Goals;
- f. Conducting more in-depth researches on stunting related to food safety and quality, including studies in infections and microbiome;

- g. Developing researches and studies to support the enhancement of Indonesian food products competitiveness in the effort to formulate regulations (standards, guidelines, and good practices) both regionally and internationally, which include Association of Southeast Asian Nations, Co-dex, International Plant Protection Convention, World Organization for Animal Health, and World Trade Organization forums.

# IV. ENHANCING CLEAN AND HEALTHY LIFE BEHAVIOR

## 1. Regulation and Policy Aspects

- a. Obligating regional heads to make derivative regulations (Governor Regulations, Regent Regulations, Mayor Regulations) from Presidential Regulation No. 42/2013 on National Movement for the Acceleration of Nutrition Improvement as synergistic efforts to encourage behavior change;
- b. Obligating regional heads to make derivative regulations (Governor Regulations, Regent Regulations, Mayor Regulations) from Presidential Instruction No. 1/2017 on Community Movement for Healthy Life as synergistic efforts to encourage behavior change;
- c. Completing the regulations of Social Security Administering Agency (BPJS) so that promotive and preventive components are part of the financing borne by BPJS;
- d. Incorporating changes in healthy lifestyle behavior into learning materials of the Ministry of Education and Culture which is followed by the competence enhancement of educators and education personnel;
- e. Incorporating changes in healthy lifestyle behavior into briefing material for bride and groom under the coordination of Ministry of Religious Affairs;
- f. Designing and applying cross-sectoral regulations convergence between Ministry of Religious Affairs, Ministry of Health, and The Minis-

try of Women's Empowerment and Child Protection for child protection to prevent early marriage/child marriage;

- g. Regulating the use of Dana Desa (Village Fund) for programs that support clean and healthy life behavior change.

## 2. Program, Monitoring, and Evaluation Aspects

- a. Drafting behavioral change intervention program for stunting prevention which involves educational institutions, professional organizations, companies (business world), and community organizations. Intervention includes stakeholders' commitment advocacy, media advocacy (mass media and social media), media campaigns, enhancement of midwife's competence and *Kader* (Posyandu's community-based health workers) empowerment, home visits by Puskesmas, lectures by religious leaders and community leaders, as well as community mobilization as the main channel for behavior change programs which are integrated in focus, locus, and schedule with specific and sensitive intervention, and also developing CIEA material on stunting prevention behavioral change;
- b. Implementing behavioral change communication strategies which adapt local wisdom associated with parenting, consumption patterns, hygienic environments, improving the positive culture and turning the negative ones into positive;
- c. Creating stunting prevention behavior change movement directed to main target group: young girls, prospective mothers, pregnant women, and mothers with children under age five, supported by fathers, other family members, midwives, *Kader*, and villagers in the area in which the main target live in. Behavior change movement to actualize "Anakku Hebat Bangsaku Kuat" (Great are my children, great is my nation)" includes:

1. Young girls set the plan when to get married, consuming balanced and safe nutritious food, taking blood booster tablet weekly, and keeping the upper arm circumference not to be less than 23.5 cm;
2. Pregnant women take iron-folic acid supplements routinely, taking antenatal classes, and preparing “Sukses ASI” (Successful breastfeeding);
3. On schedule pregnancy examination and counseling at health facilities;
4. Mothers give birth at health facilities and immediately conducting Early Initiation of Breastfeeding;
5. Mothers provide exclusive breastfeeding for six months and continue breastfeeding for up to two years or more, while start to provide varied menus of weaning food when the baby is exactly six months old;
6. On schedule baby health check, measure, weigh, immunizations, as well as providing helminthiasis medicine/treatment and vitamins;
7. Attachment parenting added with good verbal parenting which involves storytelling and jokes given from a child is at baby age stage to teenager age stage;
8. Consuming healthy, safe, and unpolluted drinking water;
9. Using safe latrines and septic tanks according to Indonesian National Standards with scheduled septic tanks draining and household drainage systems supported by drainage and sewage system at the village level;
10. Washing hands with soap and running water at five important moments (before food preparation, before eating, before feeding, after defecating, and after handling animals);

11. Healthy house with well ventilation and natural light system, free of mice and mosquito larvae, and closed food storage area.
- d. Developing behavior change monitoring and evaluation systems.

### 3. Community Empowerment Aspects

- a. Actualizing “Anakku Hebat Bangsaaku Kuat” by involving every potentials of the community in building community independence in deciding and building their own health and well-being, through community mobilization driven by head of the village. The villagers, together, identify ideal healthy behaviors, decent behaviors applicable at the time being, and make an agreement on solutions they can work themselves and with the government support;
- b. Stunting prevention behavioral change interventions must pay attention to enabling factors and community empowerment including the efforts to increase income, to raise understanding and awareness from individuals, families, and communities on parenting, consumption patterns, and environmental health.

### 4. Institutional and Coordination Aspects

It is necessary for the President to appoint a Program Coordinator to support the convergence and sustainability of clean and healthy living behavior change program.

### 5. Research Aspects

- a. Conducting formative research which adapts to local contexts as basic data material in formulating behavior change communication strategy;
- b. Conducting formative research which is set to healthy life behavior based on age (especially the millennials) which includes gadget and social media use.

# V. NUTRITION AND FOOD DEVELOPMENT COORDINATION

## 1. Regulation and Policy Aspects

- a. Reinforcing regulations by revising Presidential Regulation No. 42/2013 on National Movement for the Acceleration of Nutrition Improvement to broaden the institutional authority and use it as programs and activities preparation basis at various levels of government (central, provincial, regency/city, village) and it also can be used to regulate stakeholders engagement (business, civil society, development partners, universities, and professional organizations);
- b. Implementing the mandate of Law No. 18/2012 which requires an institution to act as “National Coordinator of Food and Nutrition”;
- c. Using stunting reduction as national development outcome indicator which explicitly included in the RPJMN 2020–2024, with multi-sectoral, holistic, integrative, and pro-poor, nutrient-vulnerable, isolated and disadvantaged group development principles. This policy is derived to the Ministry’s Strategic Plan and Regional Medium Term Development Plan;
- d. Reinforcing policies which guarantee the integration of food system (production, distribution, consumption) with stunting prevention supported by innovative food and industrial technologies to increase the added value (economy, food and nutrition safety and quality), behavior change, and poverty alleviation.



## 2. Program, Monitoring, and Evaluation Aspects

- a. An instrument is needed to ensure effective programs coordination and activities in the central government (internal and interministries/institutions), local government (internal local government), central and regional, government and non-government, including food security, behavior change, health service, and creating healthy environment;
- b. Advocacy and systematic stunting prevention socialization for stakeholders are needed, so that:
  1. Business world improves nutrition status of the employees; supports government policies (such as food fortification and sugar, salt, and fat control) as well as using Corporate Social Responsibility to prevent stunting through nutrition improvement;
  2. Universities and professional organizations carry out community service, nutrition education, and prepare basic evidence for the programs and activities preparation;
  3. Civil society intervenes based on community conditions, social monitoring, and mentoring.
- c. Stunting prevention advocacy and socialization which is supported by the Good-Will Ambassador selected based on certain criteria;
- d. The shortage of nutrition workers at various government levels, either in Puskesmas and villages, is fulfilled through the state civil apparatus formation and other schemes;
- e. Health sector's MSS must be revised by including nutrition service standards for each age group;
- f. Monitoring the use of inputs and processes as well as outputs and outcomes evaluation, including indicators of regional success preparation, which is carried out in an integrated manner across ministries/institutions.

### 3. Community Empowerment Aspects

Reinforcing the community contribution on stunting prevention planning, implementation, and evaluation activities, seeking out sources of funding in village level, and providing access to empower poor families.

### 4. Institutional and Coordination Aspects

Reinforcing institutions in regency/city and province level by assigning the highest leader (regent/mayor and governor) to be the person in charge on stunting prevention, which is followed by regional success indicators in stunting prevention, as well as preparing the required process indicator in stunting prevention.

### 5. Research Aspects

- a. Stunting mapping in Indonesia which is associated with locality, contaminants, food quality, attitude, environment, and other;
- b. Drafting national food and nutrition research road map with integrated output by considering local characteristics;
- c. Developing quality food products.



WNPG XI

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4. Yusra Egayanti, S.Si., Apt., M.P. (National Agency of Drug and Food Control)
5. Roch Ratri Wandansari (GAPMMI)
6. Ir. Chandrini Mestika Dewi, M.Si. (Ministry of Trade)
7. Innes Rahmania, A.Pi., S.Sos., M.M. (Ministry of Maritime Affairs and Fisheries)
8. Apriyanto D. Nugroho, S.T.P., M.Sc. (Food Security Agency, Ministry of Agriculture)
9. Dr. Mego Pinandito (LIPI)
10. Dr. Linar Zalinar Udin (LIPI)
11. Anastasia Fitria Devi, Ph.D. (LIPI)

## Area IV

1. dr. Riskyana Sukandhi Putra, M.Kes. (Ministry of Health)
2. Dra. Herawati, M.A. (Ministry of Health)
3. Andi Sari Bunga Untung, S.K.M.,M.Sc.P.H. (Ministry of Health)
4. Dr. RR. Dhian Proboyekti (Ministry of Health)
5. Tetty Sihombing (Communication Practitioner)
6. Iwan Triono (EMTEK)
7. Risang Rimbatmaja, M.A. (UI)
8. Dr. Hifni Alifahmi (UI)
9. Ati Muchtar (Fortune Indonesia)
10. Dr. Astuti Lamid (Ministry of Health)

11. Dr. Dian Sulistiawati (UI)
12. Dra. Haning Romdiati, M.A. (LIPI)
13. Esta Lestari, M.Econ. (LIPI)
14. Winitra Rahmani Astradiningrat, S.Sos (Ministry of Health)

### Area V

1. Pungkas Bajuri Ali, M.S., Ph.D. (Ministry of National Development Planning/Bappenas)
2. Meida Octarina, M.C.N. (Coordinating Ministry for Human Development and Cultural Affairs)
3. Prof. Dr. Aman Wiranatakusumah (IPB)
4. Gantjang Amanullah, M.A. (Central Bureau of Statistics)
5. Dr. Ardiansyah (GAPMMI)
6. Dr. Entos Zainal, S.P., M.P.H.M. (Ministry of National Development Planning/Bappenas)
7. Piping Setyo Handayani, S.S.T., M.S.E (Central Bureau of Statistics)
8. Nina Hermayani S.Si., M.Si. (LIPI)
9. Lutfah Ariana, S.T.P., M.P.P., M.S.E. (LIPI)
10. Chichi Shintia Laksani, S.E., M.E. (LIPI)
11. Nur Akbar Bahar, S.K.M., M.Kes. (Ministry of National Development Planning/Bappenas)



WNPG XI

# ATTACHMENT

## LIST OF PARTICIPANTS AS REPRESENTATIVES OF ORGANIZATIONS/ INSTITUTIONS

### Ministries/Agencies (25)

1. The Office of Vice President of Indonesia
2. Indonesian Institute of Sciences (LIPI)
3. National Development Planning Ministry/Bappenas
4. Ministry of Health/National Institute of Health Research and Development
5. Agency for the Assessment and Application of Technology
6. Ministry of Maritime Affairs and Fisheries
7. Ministry of Agriculture/Agricultural Research and Development Agency/Food Security Agency
8. Public Work and Public Housing Ministry
9. Ministry of Environment
10. Ministry of Industry
11. Coordinating Ministry for Human Development and Cultural Affairs
12. Ministry of Research, Technology and Higher Education
13. National Nuclear Energy Agency
14. Ministry of Home Affairs
15. Ministry of Villages, Development of Disadvantaged Areas, and Transmigration
16. Ministry of Religious Affairs
17. National Family Planning Coordinating Board
18. Ministry of Social Affairs
19. National Agency of Drug and Food Control
20. Presidential Staff Office
21. National Standardization Agency
22. Ministry of Trade
23. Indonesian State Intelligence Agency
24. Cabinet Secretariat
25. Central Bureau of Statistics

### Local Government/Regional Research and Development Agencies/Hospitals (30)

26. Food Security, Crops, and Horticulture Office of South Sulawesi Province
27. Food Security and Livestock Office of North Sumatra Province



28. Health Office of Southwest Sumba Regency
29. The Local Government of North Luwu Regency
30. Health Office of Simalungun Regency
31. Health Office of Bogor
32. Health Office of Sibolga
33. Health Office of South Sulawesi Province
34. Agriculture, Food Security, and Fisheries Office of Klaten Regency
35. Health Office of Klaten Regency
36. Food Security Office of Lampung Province
37. Maritime Affairs and Fisheries Office of Lampung Province
38. Health Office of Riau Province
39. Crops Office of Bangka Regency
40. Health Office of Banggai Regency
41. Health Office of West Nusa Tenggara Province
42. Regional Development Planning Board of Southeast Sulawesi Province
43. Regional Development Planning Board of Lampung Province
44. Food Security and Counseling of Yogyakarta Special Region
45. Regional Development Planning Board of East Nusa Tenggara Province
46. Regional Development Planning Board of West Sumatra Province
47. Regional Development Planning Board of Gorontalo Province
48. Regional Development Planning Board of West Java Province
49. Central Office of Statistics of Lampung Province
50. Regional Development Planning Board of Bulukumba Regency
51. Regional Development Planning Board of Klaten Regency
52. The Center of Drug and Food Control of Bandar Lampung
53. Cipto Mangunkusumo Hospital
54. Pantai Indah Kapuk Hospital
55. Community Health Centre of Biduk Sub-District, Berau Regency

### Health Polytechnics/Universities (39)

56. Health Polytechnic Kendari
57. Health Polytechnic Malang
58. Health Polytechnic Mamuju
59. Health Polytechnic Medan
60. Health Polytechnic Palu
61. Health Polytechnic Semarang
62. Health Polytechnic Yogyakarta
63. Health Polytechnic Bandung
64. Health Polytechnic Palembang
65. Health Polytechnic Tasikmalaya
66. Health Polytechnic Padang
67. State University of Medan
68. Brawijaya University
69. State Islamic University Jakarta
70. Yarsi University
71. Muhammadiyah University of Jakarta
72. Sriwijaya University
73. Hasanuddin University
74. State University of Surabaya
75. Tanjungpura University
76. Jenderal Soedirman University
77. Airlangga University
78. Diponegoro University
79. Sam Ratulangi University
80. Lampung University

81. Siliwangi University
82. Gajah Putih University
83. Maarif Hasyi Latief University
84. University of North Sumatra
85. Muhammadiyah University of Jember
86. University of Singaperbangsa Karawang
87. Alma Ata University
88. University of National Development "Veteran"
89. University of Indonesia
90. Gadjah Mada University
91. Institute of Health Indonesia
92. Bogor Agricultural University
93. School of Health Sciences Riau
94. Sint Carolus School of Health Sciences

### Professional Organizations/Elements (13)

95. The Indonesian Food and Beverage Association (GAPMMI)
96. The Indonesian Nutrition Association (PERSAGI)
97. The Food and Nutrition Society of Indonesia (PERGIZI PANGAN)
98. Indonesian Food Technologist Association (PATPI)
99. Nasyiatul Aisyiah
100. The Indonesian Consumer Protection Foundation (YLKI)
101. Indonesian Chamber Of Commerce and Industry
102. The Indonesian Academy of Sciences (AIPI)
103. Keadilan Masyarakat Indonesia
104. Indonesian Ulama Council (MUI)
105. Indonesia Organic Alliance (AOI)

106. Association of Nutritious Products for Mothers and Children Companies (APPNIA)
107. Slow Food Jabodetabek

### Industrial/Private Sectors (9)

108. Hellen Keller International
109. PT Phapros Tbk
110. Fortune PR
111. Nurtreen
112. PT Indofood Sukses Makmur Tbk
113. SUN Business Network
114. PT Bakrie and Brothers Tbk
115. PT Kelola Mina Laut
116. PT Unilever Tbk
117. PH & H Lobby Firm

### International Organizations (13)

118. World Bank
119. UNICEF
120. World Food Programme
121. US Soybean Export Council
122. HIVOS
123. Global Alliance for Improved Nutrition
124. World Health Organization
125. Food and Agriculture Organization
126. FDI
127. Unified Physicians Network
128. Indonesian Nutrition Foundation for Food Fortification
129. CODEX
130. Save The Children



JAKARTA 3-4 Juli 2018



WIDYAKARYA NASIONAL PANGAN & GIZI

# WNPC XI 2018

PERCEPATAN PENURUNAN STUNTING MELALUI REVITALISASI  
KETAHANAN PANGAN DAN GIZI DALAM RANGKA  
MENCAPAI TUJUAN PEMBANGUNAN BERKELANJUTAN







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