This file is closed as of **31 JAN 1975**.

For further correspondence, please see **VOLUME II**.
Mr. George B. Baldwin  
Deputy Director  
Population and Nutrition Projects  
Department  
International Bank for Reconstruction and Development  
Washington, D.C. 20433

Dear Jim,

I would appreciate some technical advice on a question of nutrition for which the answer does not seem to be readily available here.

The diet of the generality of Indonesians is very deficient in protein. Elsewhere in recent years protein has been supplied to ruminants in concentrated form by feeding urea directly, with dramatically favorable results. Although Indonesia is now an importer of urea, in two to three years it will produce a substantial surplus. Is it feasible for the human organism also to assimilate urea directly? -- as is the case, I gather, for pigs which have a somewhat similar digestive system.

If this is possible, I can envisage enormous potentialities. For example, one of the most abundantly productive crops in Indonesia is cassava which has a very high carbohydrate content but no protein to speak of. If it could somehow be enriched with edible urea it might fill a crucial gap in the Indonesian nutritional system.

I presume this question has been investigated somewhere and I would appreciate any information you can give us.

With best regards,

Sincerely yours,

David L. Gordon  
Director
1. In accordance with the terms of reference dated November 8, 1974, I visited Indonesia from December 16 - 19, 1974 to review progress on the civil works component of the population project, Credit No.300-IND and also, as the result of a later request, I investigated the extent of the building element in the proposed nutrition project.

Population Project 300-IND

2. At a meeting arranged by the Project Construction Coordinator and attended by all persons active in the construction component of the project, including the Appointed Architect, it became apparent that there had been some suggestion that the priorities of building might be changed and possibly some curtailment of the program. This had raised doubts in the minds of those handling the building program.

3. Unfortunately this could not be settled quickly as both the Chairman, Dr. Sumarnoto and the PNU Director, Dr. Hafid were away. Dr. Soegeng, however, promised to raise this matter as soon as Dr. Hafid returned. It appears that there were differing proposals for altering the works program from both within BKKBN Headquarters and from East Java. It was pointed out to Dr. Soegeng that alterations to the priority list could have a serious effect on progress and if the works were to be curtailed this would affect the project agreement and therefore would be subject to discussion with the Bank.

4. Tenders had been received for the Provincial Training Centers at Bandung and Yogyakarta and it was stated that both were within the guideline figures laid down by BAPPENAS. There should therefore be no difficulty in obtaining BAPPENAS approval to let the contract quickly.

5. The lowest tenders were:

Bandung PTC  | Rps.68,137,000 (US$164,522)
Yogyakarta PTC | Rps.51,072,000 (US$125,626)

6. The tender figures are appreciably lower than anticipated by the PCC and the architect who predicts, however, that the tenders for Surabaya and possibly other PTCs will be much higher because of site and foundation difficulties as well as higher local cost levels.
7. Copies of the tender opening proceedings for Bandung and Yogyakarta were obtained and are attached hereto. These show the amounts of all tenders received for each PTC. The tender for Bandung was so low that a second meeting of the committee was held to determine, with the bidder, whether it was a feasible bid. It was so determined.

8. Further progress recorded was:

a) Tenders for PTC at Surabaya due on January 1, 1975.

b) Super-structure drawings for Jakarta PTC completed but not foundation drawings. Soil test completed. Site survey and suggestion is to go to tender in separate parts for foundations (possibly pile) and superstructure. There is, however, no satisfactory drainage of this site and therefore sanitation difficulties will arise.

c) The question was being discussed as to whether the two remaining PTCs at Semeung and Denpasar could be built separately or whether they would have to be built at the same time as other building scheduled for the site.

d) Working drawings for the Sub (Provincial) Training Centers have been completed.

e) Working drawings for MI School are being prepared and are scheduled for completion by the end of January, 1975.

f) The preliminary design for Class 'A' clinics has been approved but there are no user requirements yet for Class A1, A2, A3 and A4 clinics.

g) Contract documentation was discussed and finally agreed on basis of exchange of cables but experience with the two recent tenders might lead to amendments which the PIU will suggest later.

Mojokerto Clinics

9. The construction of 45 clinics in the Mojokerto area is progressing slowly but steadily. One contract of 10 clinics is 90% completed, whilst the average progress for the remainder is about 60% completed. The clinics are not required until the end of March but should be ready well before then.
Furniture and Equipment

10. Furniture for the Mojokerto clinics has been designed and specifications and cost estimates prepared. Dr. Soegeng is taking procurement action.

11. Standardized furniture for the PTCs, STCs and NSW is now being designed.

12. Dr. Soegeng gave assurances that all equipment required has already been included in the list sent to the World Bank some months ago.

Proposed Nutrition Project

13. I had a discussion on the civil works contents of the proposed Nutrition Project with Mr. Nurgjid of BAPPNAS, who very kindly gave me a copy of the partly prepared draft of the project which BAPPNAS are at present working on. I brought this copy back with me for information. The draft is complete except for appendices but Mr. Nurgjid emphasised that it was subject to alterations before being finalized.

14. It would appear from this document that the following civil works items will be included in the project:

Nutrition Research Institute

<table>
<thead>
<tr>
<th>Item</th>
<th>Rs</th>
<th>US$</th>
</tr>
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<tbody>
<tr>
<td>New Buildings</td>
<td>432,332,948</td>
<td>1,189,434</td>
</tr>
<tr>
<td>Renovations &amp; Rehabilitation</td>
<td>22,760,000</td>
<td>57,356</td>
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<tr>
<td>of Existing Buildings</td>
<td>315,185,948</td>
<td>811,280,070</td>
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<tr>
<td>Laboratory Equipment</td>
<td>515,180</td>
<td>1,317,510</td>
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<tr>
<td>Office Equipment</td>
<td>23,576</td>
<td>62,010</td>
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<td>Contingencies</td>
<td>178,430</td>
<td>473,030</td>
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<tr>
<td>Total Nutrition Research Institute</td>
<td>1,935,000</td>
<td>5,059,000</td>
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</table>
Institute of Food Technology

<table>
<thead>
<tr>
<th>Buildings</th>
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</thead>
<tbody>
<tr>
<td>Research Laboratory</td>
<td>US$1,450,000</td>
<td></td>
</tr>
<tr>
<td>Processing Laboratory</td>
<td>US$1,450,000</td>
<td></td>
</tr>
<tr>
<td>6 Staff Houses @ US$300,000 each</td>
<td>US$1,800,000</td>
<td>US$1,200,000</td>
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<td><strong>US$4,600,000</strong></td>
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<td>Research Laboratory</td>
<td>US$26,290</td>
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<tr>
<td>Processing Laboratory</td>
<td>US$10,000</td>
<td>US$36,290</td>
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<tr>
<td><strong>Total Furniture</strong></td>
<td><strong>US$36,290</strong></td>
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<table>
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<tr>
<th>Other Facilities</th>
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</thead>
<tbody>
<tr>
<td>Research Laboratory</td>
<td>US$21,036</td>
<td></td>
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<tr>
<td>Processing Laboratory</td>
<td>US$5,000</td>
<td>US$29,036</td>
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<td><strong>US$29,036</strong></td>
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<table>
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<th>Equipment</th>
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<tr>
<td>Research Laboratory</td>
<td>US$236,148</td>
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<tr>
<td>Processing Laboratory</td>
<td>US$172,733</td>
<td>US$411,881</td>
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<td><strong>US$411,881</strong></td>
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<tr>
<th>Contingencies 25%</th>
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<td><strong>Total Institute of Food Technology</strong></td>
<td><strong>US$632,973</strong></td>
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Nutrition Intervention Pilot Project

<table>
<thead>
<tr>
<th>1st Year</th>
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<tbody>
<tr>
<td>Construction of 2 Food Stores</td>
<td>US$25,000</td>
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</tr>
<tr>
<td><strong>Construction of 2 Buildings</strong></td>
<td><strong>US$45,000</strong></td>
<td><strong>US$45,000</strong></td>
</tr>
<tr>
<td>for Plant</td>
<td>US$10,000</td>
<td>US$35,000</td>
</tr>
<tr>
<td><strong>Buildings</strong></td>
<td><strong>US$45,000</strong></td>
<td><strong>US$45,000</strong></td>
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<tr>
<td>Processing Plant and Engines</td>
<td>US$10,000</td>
<td>US$35,000</td>
</tr>
<tr>
<td><strong>2nd Year</strong></td>
<td><strong>US$75,000</strong></td>
<td><strong>US$75,000</strong></td>
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<td>No Buildings or Equipment</td>
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<table>
<thead>
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<th>3rd Year</th>
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<tr>
<td>Construction of Food Store</td>
<td>US$75,000</td>
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<tr>
<td>Processing Plant and Engines</td>
<td>US$108,000</td>
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<table>
<thead>
<tr>
<th>4th Year</th>
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</thead>
<tbody>
<tr>
<td>Construction of Store and Plant Buildings</td>
<td>US$125,000</td>
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<tr>
<td>Processing Plant and Engines</td>
<td>US$180,000</td>
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<table>
<thead>
<tr>
<th>5th Year</th>
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</thead>
<tbody>
<tr>
<td>Not detailed but in excess of previous year</td>
<td></td>
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</tr>
<tr>
<td><strong>Total Buildings</strong></td>
<td><strong>US$235,000</strong></td>
<td><strong>US$235,000</strong></td>
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<tr>
<td><strong>Total Plant and Engines</strong></td>
<td><strong>US$328,000</strong></td>
<td><strong>US$328,000</strong></td>
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<tr>
<td>Contingencies</td>
<td><strong>US$56,000</strong></td>
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<td><strong>Total Nutrition Intervention Pilot Project</strong></td>
<td><strong>US$619,000</strong></td>
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### Cost Summary

<table>
<thead>
<tr>
<th>Institution</th>
<th>Buildings</th>
<th>Equipment</th>
<th>Contingencies</th>
<th>Total N.R.I.</th>
<th>Total I.F.T.</th>
<th>Total N.I.P.P.</th>
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<tbody>
<tr>
<td><strong>Nutrition Research Institute</strong></td>
<td>US$ 1,246,820</td>
<td>US$ 599,750</td>
<td>US$ 178,430</td>
<td>US$ 1,925,000</td>
<td>US$ 2,626,530</td>
<td>US$ 1,096,500</td>
</tr>
<tr>
<td><strong>Institute of Food Technology</strong></td>
<td>US$ 1,200,000</td>
<td>US$ 36,290</td>
<td>US$ 29,038</td>
<td>US$ 1,275,331</td>
<td>US$ 2,626,530</td>
<td>US$ 2,096,500</td>
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<tr>
<td><strong>Nutrition Intervention Pilot Project</strong></td>
<td>US$ 235,000</td>
<td>US$ 321,000</td>
<td>US$ 90,000</td>
<td>US$ 646,000</td>
<td>US$ 615,000</td>
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</tr>
</tbody>
</table>

#### Grand Total

|                | US$ 2,681,820   | US$ 36,290  | US$ 29,038    | US$ 1,275,331 | US$ 2,626,530 | US$ 1,096,500 |

15. No comment is made on this estimating, it is merely extracted from the report but it is believed that much of it was provided by the Ministry of Health Building Division who have a good deal of experience. Nevertheless, careful checking will be necessary at appraisal time particularly in respect of the furniture provision, which seems very low, and equipment, which is not detailed. There might also be confusion between different types of equipment, particularly that in laboratories.

16. The item of "Other Facilities" in the Institute of Food Technology is not specific and may not apply to the civil works component. Contingency items have been added to the civil works components in proportion to those included in the report.
17. The rate of exchange used in converting Rupees to US Dollars in the report is not stated but appears to be about Rs.430 to US$1.00 which is too high. In the estimates in Para 14 a rate of Rs.414 per US$1.00 has been used.

18. It is not clear from the report whether or not the cost of Buildings and Plant provided during the period of the Nutrition Intervention Pilot Project is intended to be financed from local resources but as it amounts to more than US$1.5 million it has been shown in the above cost summary. With this item the total element which seems to belong to the civil works component of the project amounts to US$4,676,500.

cleared with and cc: Mrs. Maraviglia, PNP
cc: Ms. Farmer, CP, EAP
    Mr. Gordon, Jakarta
    Mr. Chandrasekaran, Jakarta
    Mr. Grovenor, Jakarta
    Mr. Baldwin, PNP
    Mr. Nussinger, PNP (c/o)
    Mr. Kang, EAP
    Mr. Jones, PNP
    Mr. Venkataramanan, PNP
    Central Files
    Division Files

CR.300-END
MARKS: sr
OUTGOING WIRE

TO: CHANDRASEKARAN
    INTBAFRA
    JAKARTA

COUNTRY: INDONESIA

CLASS OF SERVICE: LT1/4

DATE: JANUARY 23, 1975

TEXT:
Cable No. 128

REURTX 82 STOP ALPHA YOUR PRESUMPTION RE POPULATION COMPONENT CONFIRMED
BETA PLEASE EXPEDITE BOTH POPULATION AND NUTRITION COMPONENT PROPOSALS
GAMMA LIKELY MEMBERS OF APPRAISAL MISSION ARE DR. MICHAEL LATHAM OF
CORNELL LEADING NUTRITIONIST COMMA MR. GEORGE CLEMANTS OF IDRC FOR THE
FOOD TECHNOLOGY COMPONENT COMMA MR. EWEN THOMSON COMMA MS NANCY FARMER
AND MYSELF STOP MR. DAVID MILLS WILL ALSO PARTICIPATE FOR A PART OF
THE MISSION STOP WOULD REQUEST YOUR ASSISTANCE ALSO REGARDING THE
POPULATION COMPONENT. DELTA ON JANUARY 17 WE SENT YOU COPY CONFIDENTIAL UPDATING
REPORT ON JOINT POPULATION PROJECT FOR INFORMATION GORDON COMMA BUMGARNER AND YOURSELF.
REGARDS

VENKITARAMANAN

NOT TO BE TRANSMITTED

AUTHORIZED BY:
NAME G.B. Baldwin
DEPT. Population and Nutrition Projects
SIGNATURE [Signature of Individual Authorized to Approve]
REFERENCE INDONESIA II / PNP
ORIGINAL (File Copy)

CLEARANCES AND COPY DISTRIBUTION:
SVenkitaramanan/ccc
cleared with and cc: Mrs. Maraviglia
Ms. Farmer
cc: Mr. Berg
Mr. Kang
Mr. Jones

Division/Central Files
For Use By Communications Section

Checked for Dispatch: [Signature]
January 23, 1975

Dr. Michael Latham
Professor of International Nutrition
Graduate School of Nutrition
Cornell University
Ithaca, New York

Dear Dr. Latham:

Thank you for your letter of January 16 enclosing your C.V. We are glad to know that you can join the appraisal mission on the Indonesia Project in March 1975.

I am sending herewith a few papers which will help to briefly explain the background of the Indonesia Project. When you come here on February 26/27, we may be able to share more information.

Looking forward to a fruitful and pleasant association.

Yours sincerely,

S. Venkitaramanan
Population and Nutrition Projects

Enc.

cc: Mr. Kang
Division/Central Files
INDONESIA II / PNP
SVenkitaramanan/ccc
RE: UTX 98 SUJOTO AGREEABLE TIMING OF APPRAISAL MISSION MARCH TEN TO END MARCH. PRESUME MISSION WILL COVER POPULATION COMPONENT ALSO. KINDLY CONFIRM. CONTACTING MURSHID TO EXPEDITE DRAFT PROPOSALS NUTRITION COMPONENT. REGARDS

CHANDRASEKARAN
January 21, 1975

Mr. Soejoto, S.H.
Deputy Chairman Social and Spiritual Affairs
Bappenas
Jl. Taman Suropati
JAKARTA

Subject: Appraisal Mission of Population
and Nutrition Project II

Dear Mr. Soejoto,

In continuation of Mr. Venkitaramanan's letter
dated December 30, 1974 addressed to you, IDA has advised that
the dates March 10 to end of March, 1975 will be suitable as the
timing for the Appraisal Mission on Nutrition component to be
in Indonesia. As Mr. Venkitaramanan has to leave Washington for
Brazil on January 26 it will facilitate his making arrangements
prior to his departure, if you could kindly let me know if the
proposed dates are convenient to receive the Mission.

With best regards,

Yours sincerely,

C. Chandrasekaran
Populations Specialist

cc: Mr. Gordon
    Mr. Bumgarner

File: Cr. 300-INH

cc/n
OUTGOING WIRE

TO: CHANDRASEKARAN
INTRAFFRAD
JAKARTA

COUNTRY: INDONESIA

TEXT:

REURTX 58 STOP REGARDING TIMING OF APPRAISAL OF NUTRITION COMPONENT COMMA KINDLY DISCUSS WITH SUOJOTO STOP DATES MARCH 10 TO END MARCH ARE CONVENIENT FOR CONCERNED BANK STAFF MEMBERS AND CONSULTANTS STOP REPLY EARLY NEXT WEEK WILL HELP FINALIZE TEAM BEFORE I LEAVE FOR BRAZIL JANUARY 26.

REGARDS

VENKITARAMANAN

NOT TO BE TRANSMITTED

AUTHORIZED BY:

G.B. Baldwin
Population and Nutrition Projects

DEPT.

SIGNATURE

(SIGNATURE OF INDIVIDUAL AUTHORIZED TO APPROVE)

REFERENCE:

INDONESIA II/PNP

ORIGINAL (File Copy)

(IMPORTANT: See Secretaries Guide for preparing form)
FROM: DJAKARTA

JANUARY 17, 1975

INCOMING TELEX

Distribution: Population Projects
Mr. Sandberg

58 VENKITARAMANAN

REDIRX 82. ALPHA WILL DISCUSS TIMING OF APPRAISAL MISSION
WITH SUWARDJONO EXPECTED BACK FROM BANGKOK NEXT WEEK.
BETA. ALL BANK PAPERS RETURNED BEFORE DEPARTURE. WILL DOUBLE
CHECK AIR CARGO ARRIVING NEXT WEEK. REGARDS

CHANDRASEKARAN
Dr. Venkitaramanan  
Population and Nutrition Department  
World Bank  
1818 H. Street N.W.  
Washington, D.C. 20433

Dear Dr. Venkitaramanan:

I was glad to talk with you about my proposed visit to Indonesia on a mission for the World Bank. As I mentioned it appears that about 2 weeks is the maximum period that I can be away in March. I would not wish to leave before March 12 and must be back by March 28 or so.

I enclose copies of my C.V. etc. I would appreciate receiving any details about the assignment that you may have especially documentation that I could usefully read, and also the terms of reference, conditions, etc. of the consultancy.

With all good wishes,

Sincerely,

Dr. Michael C. Latham  
Professor of International Nutrition

MCL:dd

Enc.
OUTGOING WIRE

TO: CHANDRASEKHARAN
INTBAFRAD
JAKARTA

COUNTRY: INDONESIA

TEXT:

Cable No.: INTERNATIONAL BANK FOR RECONSTRUCTION AND DEVELOPMENT
OUTGOING WIRE

January 15, 1975

CLASS OF
SERVICE: LT 5493

DATE:

CLASS OF
SERVICE:

TEXT:

ALPHA REFER LETTER OF DECEMBER 30, 1974 TO SUJOTO HAND-CARRIED BY YOU STOP

GRATEFUL FOR CABLE REGARDING GOI's RESPONSE TO SUGGESTED APPRAISAL MISSION
IN MARCH-APRIL 1975 BETA DID YOU TAKE INADVERTENTLY WITH YOUR PAPERS

DEPARTMENT COPY OF BANK'S ADMINISTRATIVE MANUAL? IF SO PLEASE RETURN IT
BY POUCH.

REGARDS

VENKITARAMANAN

NOT TO BE TRANSMITTED

AUTHORIZED BY:

G. B. Baldwin
Population and Nutrition Department

SIGNATURE (SIGNATURE OF INDIVIDUAL AUTHORIZED TO APPROVE)

REFERENCE:

INDONESIA II / PNP

ORIGINAL (File Copy)

SVEpakietaramanan/cc
CLEARANCES AND COPY DISTRIBUTION:

Mr. Baldwin
Mrs. Maraviglia

cc: Dr. Kanagaratnam
Mr. Jones
Mr. Gould
Mr. Kang
Mr. Berg

For Use By Communications Section

Checked for Dispatch:
January 7, 1975

Dr. C. Chandrasekaran
World Bank Office
P.O. Box 324/DKT
Jakarta, Indonesia

Dear Chandra:

I attach a copy of a report of a SEADAG panel seminar held in Bali on August 12-14, 1974. I am not sure whether you have a copy, but thought that it was in parts relevant to consideration of the "population entity" concept which might be part of the second Indonesia project.

I am also enclosing the paying-in slip for the check.

With best personal regards.

Sincerely yours,

Huw M. Jones
Population and Nutrition Projects Department

Attachments

HJones/dlf

cc: Division Files

300-IND/PNP
6 January 1975

Mr. S. Venkitaramanan
Population and Nutrition
Projects Department
World Bank (I.B.R.D.)
1818 H Street N.W.
Washington, D.C. 20433

Dear Venkit,

Here are some answers to the questions you asked me over the telephone from Washington about the proposed Institute of Food Technology in Indonesia. I hope this elaboration of my report is adequate. If not, you know you have only to produce some more questions - which I shall endeavour to answer to your satisfaction.

Let me take this opportunity to confirm my telex message sent today which read:

"Now able accept invitation to come to Washington to discuss report on Indonesia stop Propose arrive Sunday next January 12 stop Please make necessary arrangements stop Answers to your telephoned questions in the mail."

Yours sincerely

George H. Clement
Special Advisor
Information Sciences

GHC/hp
encl.
APPENDIX

Question 1. "What exists now?"

Most immediate in interest and in activity is the Institute of Nutrition. However the attitudes, concerns and activities of the nutritionist are not the same as, and are often in conflict with, those of the food technologist (see pages 39 and 40 of my report). There are Departments of Food Technology within the Universities; there is the National Chemical Institute in Bandung (the LKN) - see pages 12 and 13 of my report; there are Government laboratories - see page 28 of my report; yet it is my convinced opinion (based upon the state of the industry as I witnessed it during my visits) that, whatever facilities are already available in Indonesia, food technology has made very little impact on the industry, an impact which is desperately needed, and which only an organization devoted exclusively to service to industry could provide. The absence of such an organization in a country where other industries are so very well served - see page 39 of my report - is a situation which demands correction if the food industry is not to remain at a primitive level whilst other industries in the country march with the technological progress of the times.

Question 2. "Is the available manpower adequate?"

Here I can refer only to the note on page 9 of the "Project Proposal" compiled by Winarno et al. When this "Project Proposal" was being minutely discussed in Semarang - see page 24 of my report - I questioned Hardjo and Winarno on this very important aspect of a new institution, and I was assured - and, indeed, convinced - that, in the early days of the proposed Institute of Food Technology, sufficient professional staff could be attracted from other institutions - and, hopefully, from industry and from appointments or assignments abroad - to commence effective operations without the present practice of food technology in Indonesia being severely depleted as a consequence. Most of the practising food technologists in Indonesia are not fully occupied in their present appointments; under Winarno and Hardjo, I am satisfied that the "work-output per man" would be very considerably increased. They are both imbued with a strong sense of purpose and abundant enthusiasm to make a success of the proposed new Institute.

Question 3. "What are the needs for training? Is there a training programme?"

The answer to this is substantially contained in the answer to Question 2. I am assured that the initial staff could be assembled from food technologists, already professionally qualified, whose talents are not yet being fully utilized. Once the Institute is launched, the training of successors to the first holders of appointments within it, and of additional staff as the Institute grows, would be a part of its routine programme - as in any industrial food laboratory. (Although this particular activity is not shown in the "Scope of Activities (of) the
Institute of Food Technology" shown on page 10 of the "Project Proposal", the training of "technicians" to become "technologists" is universally regarded as an essential function of any food laboratory. "Training" does appear in the Table on page 11 (showing "Institutional Linkages") so that, at this planning stage, training may perhaps be considered to be a joint responsibility of the Institute of Nutrition and the new Institute. Training within the new Institute is much to be preferred, however. "Training" also appears in the "Order of Priorities" on page 12, where it is properly shown as a continuing function of the new Institute itself. Since Suhadi Hadjo (one of the co-authors of the "Project Proposal") is also "Director for Undergraduate Studies" of the Agricultural University, I am satisfied that appropriate training will be available within the new Institute.

Question 4. "How will the proposed Institute of Food Technology be organized?"

This seems to me a decision which only the Indonesians themselves can make - and, at the time of my visit, this was a decision which had not yet been reached. There was speculation about whether it would come under the aegis of the Ministry of Planning, the Ministry of Industry and Commerce, the Ministry of Health or the Ministry of Agriculture. My own opinion is that either of the first two would be appropriate - and the Ministry of Health the least appropriate - because "industry" is the dominant consideration of the kind of institution being visualized (see page 6 of my report).

Note: There is a reference on page 8 of the "Project Proposal" to an "Organizational Chart" which does not, in fact, appear amongst the Appendices. (I learned afterwards from Winarno that it had inadvertently been omitted in the final compilation of the report.) The internal hierarchical structure can, however be deduced from the details under "Personnel" on page 8.

Question 5. "What is the specific objective of the proposed Institute of Food Technology?"

The answer to this question is, simply: "service to industry" - but the sociological, health and sanitary consequences of such a service, if efficiently executed, are very significant: it would ensure improved nutrition because of improved technological processing; better economics because of the suppression or elimination of waste; freedom from the less toxic effects of badly processed foods (such as diarrhoea); more satisfaction because of improved quality; more variety because of innovations made possible - the last two contributing significantly to the general social well-being of the people.

The "Introduction" to the "Project Proposal" on page 1 is relevant here - as, indeed, is the description of the "Scope of Activities" outlined on pages 2 and 3. (I would reiterate here that this "Project Proposal" is a product of international professional and detached assessment, not merely the expression of the wishes of people who are likely to profit personally from the venture.)
Question 6. "What are the annual expenses?"

Question 7. "Are the contingencies too low?"

Question 8. "How is the "Proposed Budget" divided between "foreign" and "local" costs?"

These three questions may be taken together. On page 12 of the "Project Proposal" the "Order of Priorities and Phasing" is shown with five sub-headings. The following fifty-two pages contain the details of the equipment requested, culminating in a "Proposed Budget" on page 64. If page 12 and page 64 are taken together, the "spread" of the total expenditure becomes a simple arithmetical exercise of extraction and summation. The "contingencies" - Question 7 - have been set at "20%" (see page 66). This is higher than the "contingency" allowance usually included by the IDRC in its many projects. Indeed, one wonders whether a "contingency" of more than "20%" would not make nonsense of any budget.

The division between "foreign" and "local" costs can be established by simple arithmetical extraction and summation from the fourth column of the various "Commodity Lists", from page 15 to page 62, entitled "Manufacturer or Supplier", where distinctions have been drawn between "Bah Bolon" (= "Local agent" - there is an explanatory footnote shown on all pages); "local", and some specific foreign addresses. I suggest that it may be assumed that the items identified as "via Bah Bolon" are substantially imported goods.

***************

During our several discussions of this "Project Proposal" I urged Winarno and Hardjo to provide justification for the purchase of the more expensive - some very expensive - pieces of equipment. This "justification" was not included in the "Project Proposal". I also suggested that the more sophisticated pieces of equipment may not be necessary in the early days of the new Institute, because there is a vast amount of work to be done in the Indonesian food industries which would require very little, or very simple, apparatus. The application of the more advanced techniques could therefore be delayed, and the expenditure on items such as the amino acid analyzer (US $40,000); the spectrophotometer (US $5,100); the gas chromatograph (US $30,000); the organic acid analyzer (US $20,000); the Brabender farinograph (US $14,000); the Brabender moisture tester (US $5,000) and the extruder (US $10,000) could be postponed. These are primarily research instruments; and it seems to me that there is much to be done before all this complex apparatus needs to be called into service.

However, neither of these two suggestions were adopted to appear in the "Project Proposal", - insignificant in number, considering the
large number of my suggestions which were incorporated; but not insignificant in expenditure: about seven per cent of the total budget of which sixty per cent is to cover "buildings".

I am not, however, greatly distressed by these omissions. I have sufficient confidence in Winarno and Hardjo - given independent international supervision - to believe that their manipulation of the budget for equipment would be reasonably wise and practical.

George S. Clement
Jan. 6 '75
To: Mr. Adriano Garcia, Resident Repr. UNDP
Mr. David Gordon, Director IBRD
Mr. Desmond Nugent, WHO Representative
Mr. Aubrey Denton-Thompson, FAO Representative

From: David P. Haxton, UNICEF Representative

Subject: Nutrition Adviser in Indonesia

Date: 25 February 1975
Ref.: JIDS/246

Some time ago I discussed informally with each of you the possibility of a nutrition adviser with a dual function. The adviser would assist each United Nations Agency in Indonesia on questions of human nutrition and practical programming related thereto and, be the official human nutrition adviser to the Government of Indonesia on behalf of all the Agencies. During our brief conversations, a number of the reasons for such coordinated technical assistance were mentioned. I will not repeat them all in this brief memo, but, in my opinion, the most important reasons for the establishment of such a "unit" within the United Nations family of Agencies in Indonesia, are: to provide a consistent level of advice on problems of nutrition to the Government, and to make the approaches of each of our Agencies to the Government more complementary and more coordinated.

I have already proposed the post to our Headquarters and have suggested that UNICEF be willing to assist in financing it. Should another organization desire to finance the post, we have no objection. We are taking this initiative because we feel the post is required and because we want to get things started towards creating it.

Informal discussions with BAPPENAS have assured me that this initiative would be welcome.

Therefore, I would be grateful if you would review the attached draft suggested terms of reference and let me have your views.

It would seem to me that we could have the Nutrition Adviser Unit located at the UN common premises building.
Title of Post: Senior Adviser in Human Nutrition

The Senior Adviser in Human Nutrition will have two major responsibilities and a number of subsidiary duties. The first responsibility would be to advise the Government of Indonesia, in the names of the United Nations Development Programme, the United Nations Food and Agriculture Organization, the United Nations World Health Organization, the International Bank for Reconstruction and Development and the United Nations Children's Fund, on problems of human nutrition and especially on ways in which investments by any of the above organizations can be directed towards a solution of some problems.

The second major responsibility would be to advise the above named international organizations on the questions of human nutrition. The adviser would help to assure that the programme input by each of the UN Agencies would adequately take into account the consequences for human nutrition in all assistance provided by the organizations to the Government of Indonesia.

Systematic assessment of current programme developments would be required and close cooperation with all relevant organizations, departments, etc. of the Government of Indonesia would be necessary.

The principal objective of the creation of this new post would be to assure the Government of Indonesia of a consistent level of sound advice on questions of human nutrition and on practical programme possibilities to alleviate nutritional deficiencies.

The qualifications for the post would include a University degree, preferably at a post graduate level in human nutrition and with some experience in development planning. Practical field experience in developing countries is required.

The working language is English but it would be useful to acquire facility in Bahasa Indonesia to deal with people on all levels.

An ability to deal with high Government officials and to coordinate activities on the part of international agencies is also required. This implies a thorough knowledge of international technical assistance and its possibilities and limitations.
December 30, 1974

Mr. S. H. Sujoto
Deputy Chairman Social
and Spiritual Affairs
BAPPENAS
Jalan Tanan Suropati
Jakarta, Indonesia

Dear Mr. Sujoto:

Huw Jones, who returned recently from Indonesia, has informed us about the various developments in regard to preparation of the Population and Nutrition Project II. We understand that while the population component is still under preparation, the work relating to the nutrition component is fairly advanced. We hope that it would be possible to have both components ready for appraisal in March-April 1975. I would be grateful for a confirmation from you that you will be in a position to receive an appraisal mission in March-April 1975.

I enclose a note outlining some of the important questions to which the appraisal team of Project II is likely to devote attention. The task of appraisal will be rendered easier if information in regard to these issues is kept ready. Incidentally, it is our intention to utilise some of the members of the mission to supervise the ongoing work on the Population Project I also. I hope this is convenient to you and BKKBN.

With best regards.

Sincerely,

S. Venkitaramanan
Population and Nutrition Projects Department

Attachment

cc: Mr. David L. Gordon
Director, World Bank Resident Staff
Taman Suropati 2
Bappenas Building
Jakarta, Indonesia

Cleared with and cc: Dr. Kanagaratnam, PNP, Mr. Zaidan, PNP and Mr. Sandberg, East Asia & Pacific

cc: Mr. Baldwin, PNP
Mr. Jones, PNP
Mr. Kang, PNP

SVenkitaramanan:om
Important Issues on Which Information Should be Available in
Regard to the Population and Nutrition Project II

1. In respect of all items, the following details have to be indicated:
   a. Outline of Project Proposal with justification for the expenditure proposed on different items;
   b. Estimates of annual outlays;
   c. Details of contingencies both price and physical, which have to be indicated in the estimates, - separately for construction and non-construction;
   d. Breakup of local and foreign costs;
   e. Training needs;
   f. Technical assistance; and
g. Evaluation.

2. Nutrition Component
   a. Inventory of existing nutrition research facilities both at Bogor and elsewhere;
   b. Present outlays on nutrition research;
   c. Major contributions of nutrition research;
   d. Gaps in present arrangement; and
e. Proposal to be described briefly in terms of costs and phasing.

3. Establishment of Food Technology Institute
   a. As the proposal stands at present, it does not give a detailed enough justification for the project. It does not address itself to an inventory of existing resources in the field of food technology in the country and from that point, to arguments in favor of a separate Food Technology Institute. This information has to be compiled;
   b. The issue regarding availability of adequate manpower to establish and run the proposed Institute has to be clarified. The data in the proposal do not bring this out;
   c. Manpower and training needs will have to be spelt out. Training programs and costs will have to be budgeted;
d. The nature of organizational arrangements needed to run the Institute has not been indicated. What kind of safeguards are needed to ensure that the Institute runs efficiently and is free from day-to-day interference have to be worked out.

e. Relationships of the Institute to the Institute of Nutrition Research at Bogor, the Bappenas and the Ministries of Agriculture Industry and Research have to be clearly thought out; How will results of research at the Institute be made available to industry and agriculture?

f. The objectives of the Institute insofar as the national nutrition plan is concerned should be spelt out; and

g. In regard to details, the project does not clearly indicate:

i. the annual phasing of expenditure;

ii. the breakup of local and foreign cost; and

iii. contingencies separately for civil works and for non-civil works.

4. Nutrition Intervention Project

a. Grounds for selection of regions;

b. Demographic and nutritional data available regarding the areas selected;

c. Project description;

d. Organizational arrangements;

e. Relationship to ongoing programs; and

f. Evaluation - methodology and plan.

5. Fortification of Salt

It had been earlier understood that fortification of salt is to be a part of the project. Will this be confined to the large-scale producer or extended to the smaller producer? What kind of organizational arrangements are visualized in either case? What is the type of technique proposed to be adopted? Has it been tested elsewhere and with what success? Describe the type of equipment to be used. Is it locally available or is it to be imported from abroad? Estimate the cost of fortification and state how it is to be borne, by the Government or by the consumer. Describe the evaluation methodology proposed to be adopted.
6. Coordination of Nutrition Programs

The present and proposed arrangements for the coordination of nutrition programs may be described. What would be the relationship of the Applied Nutrition Program to proposed HIP? How will the Nutrition Research Institute/Food Technology Institute be brought into policy-making and evaluation?

7. Population Component

A detailed set of guidelines had been suggested earlier for the component. These may be kept in mind.
FOR GORDON REGARDING FORTHCOMING POPULATION SUPERVISION MISSION WHICH WE HAD
PLANNED FOR FEBRUARY TENTH EYE WOULD PROPOSE A DELAY OF ONE MONTH ALPHA BECAUSE
EYE AM SOMewhat CONCERNED AT THE FREQUENCY OF SUCH MISSIONS IN RECENT MONTHS
AND THE EFFECT OF THIS ON THE GOVERNMENT STOP WE HAD ONE SUPERVISION MISSION IN
NOVEMBER AND A SECOND BRIEF ONE IN DECEMBER STOP EYE PROPOSE TO DISCUSS THIS
WITH THE GOVERNMENT REPRESENTATIVES IN BANGKOK WHO EYE PRESUME WILL BE SUMADJONO
WHERE EYE PLAN TO MEET THEM AT THE ASTAN POPULATION CONFERENCE IN MID JANUARY STOP
BETA THE SECOND POPULATION AND NUTRITION PROJECT NEEDS TO BE APPRAISED SHORTLY
STOP EYE UNDERSTAND THAT NUTRITION COMPONENTS WOULD BE READY FOR APPRAISAL IN
FEBRUARY BUT THAT POPULATION COMPONENTS MAY NOT BE READY THEN STOP EYE WOULD
THEREFORE PROPOSE THAT WE GIVE THE GOVERNMENT AN EXTRA MONTH TO PREPARE POPULATION
ELEMENTS AND APPRAISE THE PROJECT IN MARCH STOP SUPERVISION OF THE CURRENT PROJECT
COULD BE UNDERTAKEN IN LOW PROFILE THEN STOP IN LIGHT OF ALPHA AND BETA PROPOSE TO
DELAY SUPERVISION BY ONE MONTH AND CONDUCT IT IN CONTEXT OF AND AT THE SAME TIME AS
APPRAISAL MISSION STOP GRATEFUL FOR YOUR VIEWS STOP DETAILED LETTER TO BAPPENAS AND

Cont. p. 7.
OUTGOING WIRE

TO: INTBAFPAD
   JAKARTA

DATE: 12/17
CLASS OF
SERVICE: RCA

COUNTRY:

TEXT: BEKKIN SETTING OUR VIEWS ON NEXT PROJECT WILL FOLLOW REGARDS

KANAGARATNAM

NOT TO BE TRANSMITTED

AUTHORIZED BY: K. Kanagaratnam

cc: Dr. Kanagaratnam/Mr. Baldwin
    Mr. Kang
    Mr. Jones
    Mr. Venkitaramanan
    Div. Files

CLEARANCES AND COPY DISTRIBUTION:

NAME

Population and Nutrition Projects

SIGNATURE: [Signature]

REFERENCE:

Miss Farmer

For Use by Communications Section
Dr. Kamagaratnam
S. Venkitaramanan

Back to Office Report of Dr. H. Chassemi

1. Dr. H. Chassemi handed over to me the draft of a back to office report. Since he has not sent any further comments, we may treat it as final. While in Jakarta, Dr. Chassemi advised the Bappenas task force mainly in regard to the research component. Suitable extracts from the report were shared by him with the Indonesians in order to elicit their response. The representatives of the Government of Indonesia whom Dr. Chassemi and I met were in broad agreement with the approach adopted in the report which deals with the problem logically and competently. A brief summary of the report is given below.

2. The report starts by evaluating the present facilities of the Institute for Nutrition Research at Bogor. Dr. Chassemi believes that proper integration of the Institute's activities in the context of national development is missing. Such a situation, in his view, results from low status and limited resources at its disposal. Under the present organizational set up, the decision-making process in research activities is not adequate. The manner in which the institute is attached to a directorate of the Ministry of Health leads to low status and hinders a broad multi-disciplinary approach. There is a scarcity of top level research workers. Besides the overspecialization in medicine and biochemistry, the fact that four out of six top level workers are part time workers presents a problem. Inadequacy of library facilities, transport and equipment and poor salary scales are other constraints. Dr. Chassemi also believes that there is striking fragmentation and lack of direction in present research programs, with specific reference to action needs. His recommendations are intended to correct these major deficiencies.

3. Dr. Chassemi lays down the following broad objectives for the Institute:

- Continuous assessment of the nutritional status of the Indonesian population.
- Identification of the national nutrition problems with further specification of their nature, size distribution and changes over time.
- Analysis of the primary and secondary causes of the nutrition problems in Indonesia.
- Analysis of the development policy and program impacts on the size and direction of nutrition situation in the country.
- Experimentation with alternative methods of problem solving under prevailing conditions in the Indonesian context.

1 November 1974
- Capacity building in research and data collection parallel to the future progress and expansion in the field of nutrition in Indonesia.
- Active contribution to training activities in the field of nutrition.
- Development of national data bank on nutrition as a national reference center." These are acceptable.

The future growth and research strategy of this institution is to be designed on the following premises:

"a. The Institute would see as its prime role, provision of sound technical advice and information based on competent collection and analysis of data and experimentation, which will be needed by national planners and decision makers in formulation and execution of nutrition policies and programs aiming at control of prevailing nutrition problems in Indonesia.

b. The Institute should be an integral part of the total food and nutrition apparatus, strategically located, so that it can perform with sufficient status and effectiveness, and for that matter, immediate and easy access to high level decision-making body is essential.

c. The Institute will have to assume responsibility at national level. Therefore its future rate of expansion and scale of activities should match the demands made on it and be parallel to the expansion of national nutrition activities.

d. The Institute must adopt an interdisciplinary approach to the areas of study, analysis and experimentation and training totally geared to a problem solving effort at local and national level.

e. The Institute should extend its activities beyond research and study all the way to planning implementation and evaluation in a technical advisory capacity."

4. Dr. Ghassemi's proposals to reorganise the Institute are broadly as below.

The Institute will have four technical divisions in addition to a library. A research committee attached to the office of the Director and including a nutrition planner will guide research.

An abbreviated organisation chart is as below.
Of these, the divisions of community nutrition and division of nutrition policy and program planning are to be newly set up. The division of community nutrition will be primarily concentrating on

a. setting standards and methods for community studies
b. nutrition epidemiology
c. clinical nutrition
d. dietary studies and
e. growth and development

The division in charge of policy and program planning will handle

a. policy analysis
b. program analysis
c. training
d. communications
e. nutrition reference
f. information
g. data processing
Dr. Ghassemi has suggested that senior members of this division should have double appointments from both Rappenas and the Institute. Whether this will be administratively feasible and acceptable to the Government of Indonesia will be known finally when the task force makes its report. The reaction during our meetings was noncommittal.

5. Dr. Ghassemi has worked out in full detail the staff required, the training schedules and technical assistance needed. He has also furnished a detailed list of the equipment and facilities additionally needed, arranged according to priority. Expansion of buildings accounts for roughly US $1.2 million. This has to be scrutinised carefully.

6. The estimated cost of the proposal is as below.

<table>
<thead>
<tr>
<th>Item</th>
<th>Dollars</th>
<th>% total</th>
</tr>
</thead>
<tbody>
<tr>
<td>training</td>
<td>200,000</td>
<td>15</td>
</tr>
<tr>
<td>consultants</td>
<td>100,000</td>
<td></td>
</tr>
<tr>
<td>lab. equipment, supply and office</td>
<td></td>
<td></td>
</tr>
<tr>
<td>furniture</td>
<td>400,000</td>
<td>20</td>
</tr>
<tr>
<td>books and periodicals</td>
<td>100,000</td>
<td>5</td>
</tr>
<tr>
<td>construction: extension of buildings</td>
<td>1,200,000</td>
<td>60</td>
</tr>
<tr>
<td>Total</td>
<td>2,000,000</td>
<td>100</td>
</tr>
</tbody>
</table>

7. I understood from Mr. Ewen Thomson that most of the recommendations of Dr. Ghassemi in regard to the Institute's staff and facilities were accepted by the task force and will be incorporated in the final proposal of the Government of Indonesia. If and when the project is accepted for financing by IBRD, we may need a senior consultant in Jakarta for spells of three to four months in the initial period. Dr. Ghassemi would be an obvious choice for this and may be available provided we arrange it in such a way that he does not have to cut his links with the School of Public Health in Teheran.

cc: Mr. Baldwin
    Mr. Berg
    Mr. Gordon
    Mr. Zaidan
    Mr. Jones
    Mr. Kang
    Mr. Gould
Division Files
October 30, 1974

Mr. David L. Gordon
Director, World Bank
P. O. Box 324, DLT
Jakarta, Indonesia

Dear Mr. Gordon:

I enclose a letter to be passed on to Mr. Sujoto covering the suggestions of Mr. Ewen Thomson (Consultant) on the preparation of the nutrition demonstration project.

I hope that it would be possible for you to request someone in the Resident Mission to keep an eye on the work relating to the preparation of the population and nutrition project (II).

Sincerely yours,

S. Venkitaramanan
Population and Nutrition Projects Department

Enclosure

Cleared with and cc: Mr. Zaidan

cc: Dr. Kanagaratnam/Mr. Baldwin
Mr. Berg
Mr. Kang
Div. Files

INDONESIA II/PNP
Mr. S. H. Sujoto  
Deputy Chairman, Social and  
Spiritual Affairs  
BAPPENAS  
Jalan Taman Suropati  
Jakarta, Indonesia  

Dear Mr. Sujoto:  

I enclose a note by Mr. Ewen Thomson on the nutrition demonstration project, in which he has worked out the estimates in some degree of detail. These may be useful to the Nutrition Task Force in the preparation of the project.

Mr. Thomson and I had discussed with the concerned officials and you regarding the preparation of sketch plans and detailed estimates for the simple buildings which may need to be included in the project. This may be got done.

The results of the tests of the Wemler extruder which CARE had arranged for should be available by now. An estimate of cost of the extruder can be obtained from the concerned persons.

I hope that there has been a final meeting of the Task Force to consider the reports of the various committees and that the integrated project proposal is being got ready.

With warm regards.

Sincerely yours,

S. Venkitaramanan  
Population and Nutrition Projects Department

Enclosure

Cleared with and cc: Mr. Zaidan

cc: Dr. Kanagaratnam/Mr. Baldwin  
Mr. Berg  
Mr. Kang  
Div. Files

INDONESIA II/PNP

October 30, 1974
Dr. K. Kanagaratnam, Director - PNP

Mr. S. Venkitarasan - PNP

VISIT TO INDONESIA - Population and Nutrition Project
Back-to-Office Report

October 10, 1974

In accordance with the terms of reference dated August 1, 1974, I visited Indonesia from September 13 to September 29, 1974.

During my visit to Indonesia, I concentrated my attention on expediting the pace of preparation of the nutrition and population components of the Indonesian project. I had a series of meetings with officials of Rappenas, BKKB, Ministry of Health and Ministry of People's Welfare, besides the resident mission of the IBRD, UNICEF, and UNFPA. Insofar as the nutrition component of the project is concerned, I devoted specific attention to discussions with Dr. Hossein Chasemi, inasmuch as he was not planning to return to Washington, D.C., to finalize the report. Dr. Chasemi gave me a draft copy of his report before he returned to Tehran on September 20. The other two consultants, Messrs. George Clement and Brian Thomson, are still in Indonesia. Mr. Thomson is expected to return to Washington by the 11th or 12th for a week's stay, and he will be carrying copies of Mr. Clement's report. Mr. Clement will be returning to Washington only by the beginning of November, 1974.

Summary of Findings and Recommendations

3. (i) In the population sector, a UNFPA mission in November-December, 1974, to appraise the proposed UNFPA project, ambitiously set at $100 million, is keenly awaited. Preference for grant assistance and a wishful expectation that UNFPA may be less stringent in its requirements of project preparation and supervision are responsible for priority of current attention to the UNFPA effort. At the same time, Rappenas and BKKB officials expressed continuing interest in the IBRD project.

(ii) The preparation work on the population component for the second project for IBRD aid has been relatively tardy. The task force has not met even once in recent months to consider the various reports of the subcommittee. It is desirable to have the meetings of the task force expedited.

(iii) Organisational confusion within the BKKB in regard to the role of PIU continues. Internal failures due to lack of coordination have led to an attempt to find a scapegoat in Bank procedures and in the need for reference to IBRD headquarters. The correct position in this regard has been explained to GO representatives. On our part, it seems necessary to continue to arrange visits of Bank personnel and consultants such as Mr. David Hills whose assistance has enabled a number of bottlenecks to be cleared, within the Indonesian administrative structure itself as well as outside.

(iv) A Presidential Impres has been issued setting up a high-level Ministerial committee under the Minister of People's Welfare in order to help coordinate various nutritional programs. The task force set up by
Bappenas to prepare the nutrition project has been quite active and has taken considerable initiative, with the assistance of Bank consultants. It is expected that the project outline will become more clearly defined after the meeting of the task force on nutrition on October 5, 1974.

(v) It has been indicated to Bappenas that we expect to organize an appraisal mission for the combined project early in 1975. This underlines the importance of expediting the preparation of the project in respect of both population and nutrition. Mr. Sujoto and Dr. Suwardjono need to be reminded of this periodically, both through letters and by the resident mission.

The Population Component of the Project - Request for UNFPA Aid

4. One of the important developments in regard to the population component has been the decision of BKKB and GOI to apply to UNFPA for a grant of $100 million for family planning activities. A mission from UNFPA is expected in November-December, 1974. Both the Chairman of BKKB and the Dy. Chairman, Mr. Sujoto of Bappenas, explained that they prefer to get as much aid from UNFPA as possible as it is a grant. Some of the discussions also revealed a hope that there might be less searching project-analysis and supervision by agencies other than IBRD--this in turn reflecting some of the concern over the problems of implementation faced in the Indonesia Population Project I. UNFPA is seen by some of the Indonesian administrators as offering a way out of apparently irritating procedures which they attribute to IBRD/IDA. At the same time, GOI leaders are aware that the availability of funds with the UNFPA is limited and that the IBRD offers a larger and more assured source of assistance. Much as they would complain about the procedures and terms of IBRD assistance, I am confident that they would continue to try to keep alive IBRD interest in further population projects in Indonesia.

Bank Procedures

5. There is a feeling, albeit not justified, among some of the Indonesian administrators that the Bank's procedures in regard to construction and procurement tend to be cumbersome and dilatory and are responsible for tardy implementation of the Project. In fact, the Chairman of BKKB made the suggestion that if only IBRD could decentralize its decision-making mechanism and give more powers to the resident mission, the Project would proceed much faster. I explained to him that within the administrative structure of the Bank and its charter, certain clearances by legal and procurement specialists seem to be essential and given this requirement, delegation of the kind desired to the local mission by the Chairman may not be fully feasible. I pointed out the substantial freedom of operation enjoyed by the borrowers within the scope of the credit agreement, and the relaxations agreed on, in recent months. It has also been our experience, I suggested, that in many cases, delays had been due to failure of communication, rigidity of Government regulations and weakness of administrative preparation at the Indonesian end rather than the need to refer matters to Washington. I cannot, however, escape the feeling that GOI officials should not be allowed to continue to have or spread this impression. More frequent visits by personnel in charge of the Project with the specific objective and goal of taking
decisions and clearing bottlenecks may offer a way of dispelling this impression. The recent visits of Mr. David Mills have enabled an improvement in the pace of execution of the Project as a result of the movement of decision-making nearer Jakarta. We should also explore ways and means of delegating, within reasonable limits, powers to the Resident Mission to respond to requests by the BKKBKN. This should be further discussed with the Resident Mission in the light of the procedures in vogue for other IBRD/IDA Projects in Indonesia.

State of BKKBKN

6. My impression is that a state of administrative confusion continues to prevail within BKKBKN. The P.I.U. (Project Implementation Unit) is looked upon with suspicion as an administrative distortion which should be terminated as soon as the Joint Project (Credit 300) is completed. One could sense a series of administrative moves at higher levels in the BKKBKN designed to out-flank P.I.U. and reduce its role primarily to one of supervising the project financed by IDA/UNFPA. While the task force for the Second Project continues to be chaired by Dr. Hafid, Dy. Chairman II, it was made clear that P.I.U. will not be dealing with the Second Project after it is negotiated. It was stated by the Chairman that the biros and their chiefs will be brought more into the picture. Dy. Chairman II, Dr. Judono, also volunteered the information that he would be in charge of the request for aid from UNFPA. While this impression was confirmed by Mr. Wagner of UNFPA, it was neither confirmed nor denied by Dr. Suojoto, who was careful to point out that the P.I.U. was for the limited purpose of the implementation of the first phase.

Task Force for Project II

7. The task force for the preparation of the Second Project seems to be in a moribund state at present. The subcommittees on the population center, mobile health facilities and training have sent in their reports. Due to various visits abroad by the top level administrators, the task force has not been able to meet recently to consider these reports. Prof. Hafid promised that this will be taken up as soon as the fasting month was over. When I pointed out that if we are to stick to our original time schedules for the preparation of the project, the task force should be meeting fairly early and that the project outlines should be sharpened in terms of both policy and dimensional considerations. I impressed this upon all those concerned, including the Dy. Chairman Mr. Suojoto of Bappenas and the Chairman of BKKBKN. Mr. Suojoto agreed to meet with the Chairman of BKKBKN and expedite the finalization of the project proposal.

8. The population component of the project is now expected to consist of the following:

(a) Population Center
(b) Mobile Clinics
(c) National Training and Research Center
The Population Center

9. While Professors Suorjono and Hafid are keen on the establishment of a population center, there is some scepticism about the exact nature and purpose of this activity in Bappenas. One view expressed by Mr. Suojoto was that it would be far better to strengthen existing centers of research than to create new entities which will serve only to draw away talent. He was inclined to favor the strengthening of the Lekmas center in particular. I suggested to Mr. Suojoto and his special assistant, Mr. Murshid, that inasmuch as the idea of an entity to study the effect of developmental variables on population came from Bappenas itself, they might reascertain the response of their Chairman and Vice-Chairman. While there was no clear-cut delineation of a change in Mr. Suojoto’s views as a result of further internal meetings, he told me that Minister Sumarlin was inclined to create a biro in Bappenas as part of the reorganization of Bappenas now being planned. This biro would concentrate on activities of the type visualized by John Ratcliffe and others, without getting itself directly involved in research.

10. Professor Iskandar of the University of Indonesia explained the need for a careful and cautious approach to the idea of setting up such an entity. While he favors the idea of setting up a Population Center, he would emphasize the need for preparatory work. My reading of the situation is that leading demographers of the country would resist creating an entity that would compete for existing funds. Unless the proposal gets high-level sponsorship from either Dr. Wijjoyo or Dr. Sumarlin, the center as such does not appear to be a likely candidate for inclusion in the Second Project.

Mobile Clinics and P.K.K. Schools

11. The subcommittee on mobile teams Puskesmas and P.K.K. schools has sent in its report to the task force. I discussed the broad outlines of the report with the officials of Depkhas (the Ministry of Health) in charge, Drs. Soebagjo and Abdur Rachmat. It was explained to me that the component proposed consists of three elements:

(a) mobile service units
(b) increased mobility to the staff of health centers
(c) improvements to the P.K.K. schools

A team consisting of the midwife and local fieldworker will move around in each Rachmat and will be equipped with a two-wheel motorized vehicle. The team will render family planning services besides being in charge of health education and simple medical service. The plan of operations will be determined at the level of the subdistrict. The project proposal is expected to include besides the capital costs of the vehicles the running costs of the mobile units and incentive payments in addition to salaries.
At the regency level, the mobile unit will provide for:

1 Physician
1 Midwife/Public Health Nurse
1 Driver

The regency team will move to each health center and pick up the fieldworker working in the Kachamat. The equipment at the disposal of the mobile team will include surgical accessories needed to perform vasectomies and IUD kits. The team will make monthly visits to each subdistrict and hold meetings with the local government with the full participation of the regional KKBN to determine plans of action. Reviews at quarterly and annual meetings are also contemplated. The proposal includes (a) the costs of Volkswagen combis as well as running expenses, and (b) incentive payments to the personnel.

P.K.K. Schools

12. The project includes the costs of equipment and operation for seven more P.K.K. schools with 100 students each. While the construction component has not been included in the request for Bank aid, it was explained that expenditure on construction would be met directly by the Government of Indonesia. In appraising the proposal, we would naturally be interested in knowing the need for additional training proposed, the phasing and adequacy of the buildings proposed.

Training and Documentation Center

13. So far as the training component is concerned, the subcommittee of the task force has prepared a broad strategy paper. It has still to cost out the components and work out the justification in full. It is expected that as soon as the task force meets, this will be done.

Nutrition Task Force

14. The task force set up for preparation of the nutrition component of the project has been relatively more active. The subcommittees for nutrition research, food technology, salt fortification, and nutrition demonstration project have taken initiative in defining the outlines of the project. The consultants, Dr. Hossein Ghassemi and Messrs. George Clement and Ewan Thomson have also played an important role in activating these subcommittees.

15. The task force met on September 17 and decided to reconvene again on October 5 to finalize the various draft reports. At the time of my leaving Indonesia, the report of the subcommittee on nutrition research was more or less in a complete shape, thanks to the assistance of Dr. Ghassemi. Both Mr. Thomson and Mr. Clement were working towards the target of getting the other reports into as complete a stage as possible for the meeting on October 5. It is hoped that by the time Mr. Thomson returns, a clearer picture of the project components will emerge.
The Presidential Impres on Nutrition

16. One of the important developments during the visit was the issuance of the Presidential "Impres" (copy attached) setting up a committee for the improvement of Peoples' Food Menu consisting of ten Ministers, including the Minister of State for Peoples' Welfare, Chairman of Bappenas, and Minister of Finance. The committee includes also Ministers of Health, Agriculture, Home Affairs, Information, Education, Religion, and Industry. It is important to note that the Minister of Peoples' Welfare has been specially charged with responsibility for the coordination of the execution of "activities for the improvement of the peoples' menu" and the Minister of Home Affairs has been called upon to direct Governors Bupatis and Walikotas with the responsibility of coordinating the activities for the improvement of peoples' menu. This is the first time the Ministry of Home Affairs has been brought into the picture of nutritional activities.

17. While the nature of the administrative arrangements for direct implementation of the nutritional program still remains almost the same as before, a coordinating focus is developing in the institutional personality of the Minister of Peoples' Welfare. Administrative psychology in Indonesia clothes a Presidential Impres with far more effective significance than what one would normally attribute to the loosely worded and ambiguously structured instructions contained in such a document. The fact that the President has seen fit to issue an Impres for nutrition has itself acted as a signal to decision-making authorities to assign more resources and time to the program.

18. Much of the effectiveness of the coordinating mechanism would needlessly depend on the kind of personnel who service it — their background, training and dynamism. Mr. Thomson and myself met Mr. Supardan who is the Personal Secretary to the Minister of Peoples' Welfare and who is expected to take a leading role in the operations of — in fact, be the Secretary of — the coordinating committee. We have suggested to him that it is extremely important to have adequate full-time staff to help him in this task. He is agreeable to this suggestion and is working on it.

19. Mr. Thomson and I had also to take care to ensure that even though a new coordinating mechanism is emerging, the interest and attention of Bappenas in nutrition, which has enabled the development of the Project thus far, should continue. We discussed this in detail with Mr. Sujoto and Mr. Murshid besides Mr. Supardan and were able to secure an agreement in principle that (a) the task force on nutrition will continue under Bappenas leadership, (b) a bureau for nutrition will be established in Bappenas itself directly reporting to Mr. Sujoto, and (c) Bappenas will be the focal point for contact for IERD.

20. The attached brief report (Annex II) by Mr. Thomson on the evolution of Governmental machinery depicts very clearly the present position. As he sees it, there would be a nutrition secretariat to assist the Ministerial committee, under the Ministry of Peoples' Welfare. Besides this, the Ministerial committee will be advised by a technical advisory board under Dr. Dradjat as Chairman. Dr. Dradjat's position in the sphere of nutrition inside Indonesia seems to require recognition of this nature. While Dr. Dradjat appeared earlier on to expect this advisory board to have executive functions, it has fortunately turned out to be a mistaken impression. The Government of Indonesia seems to have decided clearly that it does not want to interfere with normal executive units.
21. While final decisions regarding Governmental machinery are still to be taken, it is my view that we should not attempt to recommend or bring about the creation of any executive body for the nutrition project straddling present ministerial jurisdictions. The present pace and direction of the evolution of administrative machinery appear to take into account fully the overall need for coordination and a total approach to nutrition without ignoring Indonesian sensitivities and bureaucratic realities.

Nutrition Research

22. Dr. Ghassemi worked closely with the Subcommittee on Research set up under the Chairmanship of Dr. Darwin Karyadi. Extracts from Dr. Ghassemi's draft report were made available to the subcommittee and have been made use of Dr. Karyadi. Both Dr. Drajat and Mr. Sujoto expressed deep appreciation of Dr. Ghassemi's assistance and, in particular, of the broader perspective in which he viewed the Nutrition Research Institute. Dr. Ghassemi's draft report is discussed in a separate note for the files. For the purpose of the present summary, it seems sufficient to note that the project visualizes an upgrading of the Institute in such a way as to ensure:

"sufficient status, a proper linkage to the national planning and administration, a proper combination of expertise needed in a practical working relationship, reasonable degree of authority and an environment conducive to research."

The Institute as reorganized is expected to have four technical divisions dealing with community nutrition, nutritional biochemistry, food science and program planning, and will have its research program reviewed by a research committee. One interesting concept is the division for Policy and Program Planning which will handle nutritional planning in its broadest sense, and Dr. Ghassemi suggests in his draft report that the persons in the Policy and Program Planning division may hold double appointments in Bappenas as well. This was an idea to get over earlier objections (during Ghassemi's stay) to the idea of locating a nutritional planning biro inside Bappenas itself and may have to be reviewed in the light of Bappenas' present willingness to accommodate a unit within its structure. Even so, the proposal of Dr. Ghassemi to have a nutritional planning division with the Research Institute has validity as it will act as a useful channel of communication and review to ensure relevance and effectiveness of research.

23. Dr. Ghassemi has estimated that this project component may cost around US$2.0 million. The total likely cost of the Nutrition Research Institute is estimated by Dr. Ghassemi as:

\[ \text{2.0 (US$ million)} \]

of which:

- Construction............ 1.2
- Equipment................. 0.4
- Training.................. 0.2
- Consultants............... 0.1
- Books & Periodicals...... 0.1

Total............. 2.0
Food Technology

24. Mr. George Clement's report on the food technology component is still to come. Preliminary impressions are that the food technology component will be a significant one and will be put together in a manner relevant to the Indonesia food and nutritional system.

Nutrition Demonstration Project

25. Mr. Ewen Thomson has been working closely with various GCI agencies to evolve the outlines of a nutrition demonstration project in Boejonogoro and West Lombok. It is best to await his detailed report in this regard.

Fortification

26. The subcommittee concerned with this is actively considering the various implications of the proposal for iodization of salt. Both Dr. Dradjat and Mr. Sucijoto expressed the hope that the proposal will be politically acceptable and administratively feasible.

27. So far as fortification of monosodium glutamate (MSG) is concerned, Mr. Thomson and Mr. Clement have had some preliminary discussions with manufacturers' representatives. It seems, however, premature to consider inclusion of this component in the proposed Project.

cc: Mr. van der Tak (3), Office V.P. Projects
    Mr. Gould, E. Asia & Pacific
    Mr. Bravo, Inf. & Public Affairs
    Mr. Baldwin, PNP Department
    Mr. Berg, "
    Mr. Zaidan, "
    Mr. Jones, "
    Mr. Kang, "
    Mr. Burfield "
    Mr. Mills, "
    Div., Central Files

Svekitharaman/mm

INDONESIA I & II/PNP
TO: Files
FROM: M.N. Maraviglia
SUBJECT: INDONESIA: Second Population and Nutrition Project

DATE: September 10, 1974

Today I had a call from Mrs. Wakefield from the Indonesia Desk, USAID, Washington, inquiring about the current mission to Indonesia by Mr. Venkitaramanan. I informed her that the mission had already left and it would be in the field until September 20. She requested to meet with Mr. Venkitaramanan and others concerned with the Indonesia project when the mission comes back, and I informed her that a meeting would be arranged. Her telephone is 632-9842.

MNMaraviglia/mm

cc: Dr. Kanagaratnam/Mr. Baldwin
    Mr. Berg (o/r)
    Mr. Zaidan (o/r)
    Mr. Venkitaramanan (o/r)
    Div Files
Sept. 2, 1974

1221 VENKITARAMANAN

AAA GHASSEMI ARRIVED, AUGUST 26. THOMSON ARRIVED, AUGUST 29.

GHASSEMI CONTACTED UN AGENCIES AND HAD USEFUL DISCUSSION WITH
SUJOTO AND MURSHID DURING AUGUST 27 AND 28. AFTERNOON AUGUST
29 BOTH MET RES REP THEN HAD LENGTHY TALK TOGETHER REVEALING
CLOSE ACCORD IN APPROACH TO PROJECT.

BBB AUGUST 30, BOTH HAD INTERVIEW WITH MURSHID AND MALASAN.
DISCUSSION CENTERED ON GOVERNMENTAL STRUCTURE TO IMPLEMENT
PROGRAM. DEFINITIVE DRAFT OF PRESIDENTIAL INSTRUCTION AWAITS
SIGNATURE ON H.E.'S RETURN FROM STATE VISITS. SIGNING EXPECTED
THIS WEEK. PRESIDENTIAL INSTRUCTION ADDRESSED TO TWO MINISTERS
OF STATE, CHAIRMAN OF BAPANAS AND THREE OTHER MINISTERS. IT
FOLLOWS EXPECTED LINES TRANSLATION WILL BE SENT AS SOON AS
RELEASED. WORKING ARRANGEMENTS FOR FULL-TIME PROGRAM STAFF
YET SETTLED. THIS VITAL FACTOR IS BEING PURSUED WITH VIGOUR
BUT WITH DIPLOMACY.

CCC THOMSON HAD LENGTHY DISCUSSION WITH MALASAN AUGUST 30.
MUCH THOUGHT HAS BEEN GIVEN TO THE DEMONSTRATION PROJECT BUT IN
THE THINKING DIFFICULTIES HAVE LOOMED LARGEST. MALASAN DESCRIBED
IT AS 'MISSION IMPOSSIBLE' MAINLY BECAUSE HE LACKED SUPPORT
FROM OUTSIDE THE NUTRITION DIRECTORATE. THAT HAS BEEN CORRECTED.

DDD THOMSON AND GHASSEMI ACCOMPANIED BY MALASAN PAID COURTESY
CALL ON DRAJDJAT AUGUST 31. MALASAN MOST IMPRESSED BY DRAJDJAT'S
CHANGE OF ATTITUDE. DRAJDJAT NOW SUPPORTS MULTI-SECTORAL TEAM
TO DEAL WITH PILOT (SIC) REGENCY PROJECTS.

EEE AUGUST 31 MEETING OF CHAIRMEN OF TASK FORCE COMMITTEES
HELD. BUT TWO ABSENTEES KARYADI ATTENDING WORKSHOP AND KODIYAT
ON FIELD TRIP. FOOD TECHNOLOGY COMMITTEE PRODUCED SKETCH
PLANS OF BUILDING AND HOUSING, SCHEDULES OF EQUIPMENT AND
ESTIMATES OF COST. THE PHYSICAL FACTORS WELL IN HAND BUT
POSSIBLE PROGRAM OF WORK REMAINS TO BE DEVELOPED. TRAINING
COMMITTEE HAS NOT MADE MUCH PROGRESS PARTLY BECAUSE OF NEED TO KNOW REQUIREMENTS REVEALED BY OTHER COMMITTEES PARTLY BECAUSE COMMITTEE PLANNED TO ALLOCATE TIME FOR WORK FROM BEGINNING OF SEPTEMBER. GHASSEMI WILL MEET TRAINING COMMITTEE ON SEPTEMBER 2. FORTIFICATION COMMITTEE AT PRESENT ON FIELD TRIP AND EXPECT TO COMPLETE WORK BY SEPTEMBER 11. KARYADI, CHAIRMAN RESEARCH COMMITTEE UNFORTUNATELY NOT PRESENT. HE WILL JOIN TRAINING COMMITTEE AT MEETING WITH GHASSEMI SEPTEMBER 2 THEREAFTER GHASSEMI WILL BE ABLE TO ARRANGE FOR ACTION ON RESEARCH ASPECTS. DEMONSTRATION PROJECT COMMITTEE REPORTED URGENT NEED FOR EARLY VISIT TO DEMONSTRATION REGIONS IN ORDER TO CONTINUE PROJECT PREPARATION. AGREED THAT TEAM WILL CONSIST OF MALASAN, NUTRITION DIRECTORATE SEMICOLON SARWONADI, AGRICULTURAL DIVISION, BAPPENAS: SOEWARG, MINISTRY OF INTERIOR AND THOMSON. TEAM WILL BE JOINED FOR PART-TIME BY SUPARDAN, SPECIAL ASSISTANT TO MINISTER FOR PEOPLES WELFARE AND MURSHID. NOTE TEAM NO LONGER SOLELY FROM NUTRITION DIRECTORATE.

FFF TEAM PROPOSES SPENDING FIVE DAYS IN EACH DEMONSTRATION AREA. THOMSON WILL RETURN JAKARTA AFTER VISIT TO FIRST AREA TO (A) MEET CLEMENT ON ARRIVAL (B) PASS ON TO GHASSEMI TRAINING AND RESEARCH REQUIREMENTS OF FIRST DEMONSTRATION AREA. TO ENSURE NO WASTE OF TIME THOMSON WISHES TO KNOW EXACT ETA CLEMENT.

WINARGO, CHAIRMAN FOOD TECHNOLOGY COMMITTEE STATED ALL MEMBERS INVOLVED IN SEMINAR SEPTEMBER 9 THROUGH 11. MEETING WITH CLEMENT ARRANGED FOR SEPTEMBER 12. DURING SEPTEMBER 10 AND 11 CLEMENT CAN MAKE OTHER CONTACTS AND STUDY PLANS AND SCHEDULES ALREADY PREPARED.

GGG FULL MEETING TASK FORCE PROBABLE FOR EITHER SEPTEMBER 17 OR 19 BY WHEN (A) GHASSEMI WILL HAVE COMPLETED HIS ASSISTANCE TO RESEARCH AND TRAINING COMMITTEES (B) PROPOSALS FOR BOJONEGORO AND WEST LOMBOK DEMONSTRATION REGENCIES WILL BE DRAFTED (C) HOPEFULLY, CLEMENT WILL HAVE HAD TIME TO ASSIST IN FOOD TECHNOLOGY PROPOSALS BUT COMPLETED PROPOSALS NOT EXPECTED. (D) FORTIFICATION COMMITTEE WILL HAVE COMPLETED PROPOSALS BASED ON FIELD TRIP. (E) PROTOCOL WILL HAVE ISSUED AND REMAINING DIFFICULTY MAY BE NEARING RESOLUTION. (F) YOU WILL HAVE ARRIVED. REGARDS

THOMSON AND GHASSEMI
August 26, 1974

Dr. A. Querido
Academisch Ziekenhuis-Leiden
Rijnsburgerweg 10
Leiden, The Netherlands

Re: Your letter to Mr. Raw Jones, dated August 6, 1974

Dear Dr. Querido:

I am now in charge of developing the Indonesia Population and Nutrition Project. I hope to be in Indonesia from September 11th through the end of the month. I shall follow up the suggestion made by you regarding the report on salt iodization.

Sincerely,

S. Venkitaramanan
Population and Nutrition Projects

SVenkitaramanan

Cc: Mr. Berg, Mr. Jones, Mr. Kanagaratnam, Mr. Baldwin
Div. Files
From: Djakarta
INTBAFRAO WASHINGTONDC

AUGUST 21, 1974.

1166 HUR JONES

REURCAB 1397, SUJOTO AGREES CHOICE OF CONSULTANTS AND TIMING
PROJECT PREPARATION MISSION. REGARDS

DE SILVA
OUTGOING WIRE

TO: DR. CHASSEMI
HEALTHSITUJE
TEHERAN

COUNTRY: IRAN

TEXT:
Cable No.:

DISPATCHED DETAILED LETTER TO YOU BY POUCH TO JAKARTA C/O WORLD BANK
RESIDENT MISSION STOP FOR ADDITIONAL INFORMATION ON PROJECT PLEASE
CONTACT MR. THOMSON WHO IS EXPECTED TO BE IN JAKARTA BY AUG 26 STOP
NOT LATER THAN
HOPE TO SEE YOU SHF 16 STOP REGARDS

VENKITARAKAMAN

NOT TO BE TRANSMITTED

AUTHORIZED BY:

K. Kanagaratnam,
Director

DEPT. Population & Nutrition Projects

SIGNATURE

REFERENCE: S. Venkitarakanman: md

CLEARANCES AND COPY DISTRIBUTION:

Cleared w/ cc: G. C. Zaidan
I. H. Kang

For Use By Communications Section

Checked for Dispatch:
Dr. Hossein Chassemi
c/o World Bank Resident Staff
P. O. Box 324/DKT
Jakarta, Indonesia

Dear Dr. Chassemi,

By the time this reaches you, you would have received from Mr. George Zaidan the detailed terms of reference for your ensuing mission. I understand that you will be in Indonesia for four weeks and will not be coming to Washington before returning to Teheran. I will be in Jakarta by September 16th. I hope that you will be able to have your draft report ready by that time and that we can discuss it before you return to Teheran.

As you may have seen from your terms of reference, the intention is to get ready a viable project for expanding the Nutrition Research Institute at Bogor in a manner relevant to the needs of Indonesia's food and nutrition system. Hopefully, there will be a proposal from the Task Force ready for discussion by the time you reach Indonesia. The draft guidelines for the Task Force dated March 25, 1974 (copy sent to you) outline some of the basic issues in this connection. I am reiterating below some of the important questions. I hope this will facilitate your work with the Task Force and help you in writing your report. (These questions are not intended to be exhaustive and need not restrict your analysis.)

Background

(1) a) Outline briefly the history of the Institute, when started, what legal status it has and its present organizational relationships.

b) What are the objectives of the Institute?

c) What is the present program of different departments of the Institute?
d) How would you classify the nature, quality and amount of work undertaken now? What are current costs by category of expenditure and research field? What is the source of current funding?

e) How are decisions made now regarding the kind of research to be undertaken? To what extent, if any, are these decisions linked with policy and programming issues? How are these linkages achieved? Is there a committee to determine research programs? If so, what is its composition?

f) In what directions does the work require to be expanded, given the problems of nutrition in Indonesia?

(2) What does the project proposal envisage in terms of expansion of the Institute? List strengths and weaknesses of the various departments of the Institute and assess the need for and prospects of the proposed expansion, with reference to the needs of Indonesia and availability of trained manpower.

How have the various subcomponents of the proposal been determined? How do they relate to the needs of Indonesia's food and nutrition situation? Are the proposed research programs likely to be directly useful to Indonesia's policy planners?

Detail the presently available and proposed equipment for each department. Is there adequate justification made for additional equipment in respect to items of relatively large cost? Can these items be bought locally or from abroad? Is there any local maintenance facility? Will there be need for permission to import spare parts? Will such permission be granted readily?

What are the building requirements? What is the estimated floor-space needed? Estimated costs? Detail arrangements for design, implementation and monitoring of construction proposed.

As regards training facilities for the research staff -- draw up a manpower flow chart with details by categories of projected needs, available personnel and training proposals.

Are any foreign consultants needed? In what areas of specialization? For what periods will they be needed?

Organizational arrangements for the expanded Institute.

(3) a) What type of administrative arrangements do you visualize for the Institute? What would be its relationship to the proposed Institute of Food Technology? What degree of autonomy do you visualize for the head of the Institute? In what form do you envisage this? How do you ensure the desirable extent of delegation of powers for the various departments of the Institute?
b) How do you ensure in the organizational arrangements that the results of research in the Institute get communicated to and used by institutions of operational significance in Indonesia's food and nutrition system?

**Nutritional Planning and the Role of the Institute.**

(1) The Institute's tentative proposals include a small cell for nutritional planning. Is it preferable to locate this cell in the Institute of Nutrition or in the national planning body (the BAPPENAS)? Or, is it desirable to have corresponding units in both locations? How would you establish linkages between the Institute of Nutrition and the various concerned ministries, apart from the Ministry of Health, like the Ministry of Agriculture and the Ministry of Industry?

**Role of the Institute in Training.**

(5) Is it proposed that the Institute devote itself to training of research personnel for universities and government organizations? If so, spell out in detail, including the cost of the proposed expansion, if any, in this area. Is any other training role visualized for the Institute?

Thanking you and with best regards,

Sincerely,

S. Venkitaaranan  
Population and Nutrition Projects Department

Cleared with and cc: Mr. Berg  
Mr. Zaidan  
Dr. Kanagaratnam/Mr. Baldwin  
Huw Jones  
Div. Files

Indonesia/PNP
OUTGOING WIRE

TO: DR. NAHAVANDI
HEALTHSTUTE
TEHERAN

COUNTRY: IRAN

TEXT:
Cable No.:

DATE: AUGUST 19, 1974
CLASS OF SERVICE: L T

REURCAB AUGUST EIGHTEEN CONCERNING DR. GHASSEMI'S RELEASE AS NUTRITION CONSULTANT COMMA GRATEFUL FOR YOUR APPROVAL IN RELEASING HIM FOR FOUR WEEKS STARTING AUGUST TWENTYSIX STOP WILL SEND YOU HIS TERMS OF REFERENCE SOON WHICH WILL OUTLINE HIS ASSIGNMENT REGARDS

kang  KANG
INTBAFRAD

NOT TO BE TRANSMITTED

AUTHORIZED BY:

NAME Il Hi Kang
DEPT. Population & Nutrition Projects
SIGNATURE

CLEARANCES AND COPY DISTRIBUTION:

cc: Miss Lenthe
Dr.Kanagaratnam o/r
G.Zaidan

For Use By Communications Section

ORIGINAL (File Copy)
(IMPORTANT: See Secretaries Guide for preparing form)

Checked for Dispatch: 
TO: DR. GHASSEMI
HEALTHSTUTE
TEHERAN

DATE: AUGUST 19, 1974
CLASS OF SERVICE: LT

COUNTRY: IRAN

TEXT:

RECEIVED DR. NAHAVANDI'S CABLE OF AUGUST EIGHTEEN IN WHICH HE APPROVED YOUR RELEASE FROM UNIVERSITY DUTY FOR FOUR WEEKS STARTING AUGUST TWENTYSIX STOP IN VIEW OF SHORT TIME MR. VENKITARAMANAN COMMA WHO WILL REACH JAKARTA SEPTEMBER SIXTEEN COMMA WILL HANDCARRY YOUR LETTER OF APPOINTMENT TO JAKARTA STOP PLEASE HAVE MEDICAL EXAMINATION AND HAVE DOCTOR'S CERTIFICATE FOR FITNESS FOR INTERNATIONAL TRAVEL AIRMAILED TO BANK PERSONNEL DEPARTMENT BEFORE YOUR DEPARTURE FROM TEHERAN STOP BANK AUTHORIZING NEAREAST TOURS TEHERAN ISSUE YOUR TICKET AND TRAVEL ADVANCE STOP BANK RESERVED HOTEL INDONESIA IN JAKARTA BEGINNING AUGUST X TWENTYSIX STOP PLEASE CONFIRM YOUR ARRIVAL DATE IN JAKARTA BY CABLE TO ME REGARDS

KANG
INTRAFAFRAD

NOT TO BE TRANSMITTED

AUTHORIZED BY:
NAME Il Hi Kang
DEPT. Population & Nutrition Projects

CLEARANCES AND COPY DISTRIBUTION:
Cleared w/& cc: Miss Lenthce
cc: Mr.Desai (Trav.Office) Mr•Zaidan

REFERENCE: IHK:blt
Pers.Cons.

ORIGINAL (File Copy)
(IMPORTANT: See Secretaries Guide for preparing form)
ZCZC AWA653 VIA ITT BU1656
UIWA HL IRTN 052
TEHERAN 52/50 18 1230

August 18th 1974

LT

DR KANGARATMAH INTB AFRADE
WASHINGTONDC

REYOURTEL TWELVE AUGUST SUBJECT OR GHASSEMI'S
RELEASE AS NUTRITION CONSULTANT FOR INDONESIA BECAUSE OF HIS
ACADEMIC DUTIES THE UNIVERSITY OF TEHERAN CAN
RELEASE HIM FOR ONLY FOUR WEEKS STARTING 26 AUGUST STOP
WOULD APPRECIATE RECEIVING COPY OF FINAL ASSIGNMENT IN DUE COURSE

OR NAHAVANDI CHANCELLOR
August 12, 1974.

Prof. A. Hafid
Deputy Chairman I
B.K.K.B.N.
Jalan Let Jen Haryono
Cawang, Jakarta.

Dear Prof. Hafid,

Re: Proposed Population and Nutrition Project II

Further to the discussions on continuing project preparation which have already taken place with Messrs. Sujoto and Murshid of Bappenas, and on the basis of their concurrence in principle, the Bank has arranged for the next mission on the proposed population and nutrition project to come to Jakarta in the last week of August for about five weeks.

It is proposed that the mission consist of Mr. Hossein Chassemi, formerly Director W.H.O. Regional Nutrition Training Project, Beirut and presently of School of Public Health, Teheran University, Mr. George Clement, food technologist working with International Research Center, Canada, and Mr. Ewan Thomson, who has been working on the project on a previous mission. In addition to the above consultants, Mr. Venkitaramanan will also be here from September 15 - 27 looking into the proposed project as a whole.

Please let us know very soon if you concur with the choice of consultants and agree to the timing of the mission so that we can telex Bank headquarters early.

Yours sincerely,

Shigeharu Takahashi
Deputy Director-Operations

Cc: Mr. Sujoto, Dr. Suwardjono
de Silva:ST:s

Population II
TO: DR NAHAVANDI
HEALTHSTUTE
TEHERAN

DATE: AUGUST 12, 1974
CLASS OF SERVICE: LT 1RCft X5431

COUNTRY: IRAN

TEXT:
WORLD BANK ASSISTING GOVERNMENT OF INDONESIA IN PREPARING NUTRITION PROJECT FOR BANK FINANCING AND REQUIRES ONE CONSULTANT EXPERT TO ASSIST DETAILED PLANNING FOR EXPANSION OF NUTRITION INSTITUTE WHICH IS VERY IMPORTANT COMPONENT AS IT IS LIKELY TO COMBINE NUTRITION PLANNING AND MEDICAL NUTRITION STOP WE WOULD LIKE TO HAVE DR GHASSEMI OF YOUR UNIVERSITY UNDERTAKE THIS ASSIGNMENT PROVIDED YOU COULD RELEASE HIM FOR APPROXIMATELY SIX WEEKS SIX BEGINNING AUGUST TWENTY-SIX STOP WE HAVE BEEN COMMUNICATING POSSIBILITY OF THIS ASSIGNMENT WITH DR GHASSEMI STOP HE IS WILLING TO UNDERTAKE THIS ASSIGNMENT IF YOU COULD RELEASE HIM STOP IN VIEW OF CONTRIBUTION HE COULD MAKE IN DEVELOPING THIS IMPORTANT NUTRITION PROJECT COMMA WORLD BANK WILL BE GRATEFUL FOR YOUR COOPERATION IN RELEASING DR GHASSEMI FOR SIX WEEKS BEGINNING AUGUST TWENTY-SIX REGARDS

KANAGARATNAM
DIRECTOR POPULATION AND NUTRITION PROJECTS DEPARTMENT

NOT TO BE TRANSMITTED

AUTHORIZED BY:
NAME: K. Kanagaratnam, Director
DEPT: Population and Nutrition Projects Dept.
SIGNATURE: [Signature]
REFERENCE: IHKang/is Cons. Indon.

CLEARANCES AND COPY DISTRIBUTION:
Cleared with Mr. Venkitaramanan and Mr. Jones

cc: Mrs. Stone, Personnel Division 1

ORIGINAL (File Copy)
(IMPORTANT: See Secretaries Guide for preparing form)
TO: GHASSEMI
   HEALTHSTUTE
   TEHERAN

COUNTRY: IRAN

TEXT:
Cable No.:

WE CABLED DR NAHAVANDI TODAY AS FOLLOWS QUOTE WORLD BANK ASSISTING GOVERNMENT
OF INDONESIA IN PREPARING NUTRITION PROJECT FOR BANK FINANCING AND REQUIRES
ONE CONSULTANT EXPERT TO ASSIST DETAILED PLANNING FOR EXPANSION OF NUTRITION
INSTITUTE WHICH IS VERY IMPORTANT COMPONENT AS IT IS LIKELY TO COMBINE
NUTRITION PLANNING AND MEDICAL NUTRITION STOP WE WOULD LIKE TO HAVE
DR GHASSEMI OF YOUR UNIVERSITY UNDERTAKE THIS ASSIGNMENT PROVIDED YOU COULD
RELEASE HIM FOR APPROXIMATELY SIX WEEKS BEGINNING AUGUST TWENTY-SIX STOP
WE HAVE BEEN COMMUNICATING POSSIBILITY OF THIS ASSIGNMENT WITH DR GHASSEMI
STOP HE IS WILLING TO UNDERTAKE THIS ASSIGNMENT IF YOU COULD RELEASE HIM
STOP IN VIEW OF CONTRIBUTION HE COULD MAKE IN DEVELOPING THIS IMPORTANT
NUTRITION PROJECT COMMA WORLD BANK WILL BE GRATEFUL FOR YOUR COOPERATION IN
RELEASING DR GHASSEMI FOR SIX WEEKS BEGINNING AUGUST TWENTY-SIX UNQUOTE

KANAGARATNAM

KER
X-5431
TO: INTBAFRAD

JAKARTA

DATE: AUGUST 9, 1974

CLASS OF SERVICE: (5493)

INTERNATIONAL DEVELOPMENT ASSOCIATION

INTERNATIONAL BANK FOR RECONSTRUCTION AND DEVELOPMENT

INTERNATIONAL FINANCE CORPORATION

OUTGOING WIRE

COUNTRY: INDONESIA

TEXT: FOR GORDON RE POPULATION AND NUTRITION PROJECT INDONESIA II STOP REFER KANGS TELEX 1211 FROM JAKARTA STOP

ALPHA PROPOSED VISIT OF CONSULTANTS AND VENKITARAMANAN IN AUGUST THRU SEPTEMBER 1974 DISCUSSED WITH SUJOTO WHO HAS AGREED INFORMALLY STOP DETAILED TERMS OF REFERENCE ALREADY POUCHED TO YOU STOP

BETA CONSULTANTS ARE:

AAA) HOSSEIN CHASSEMI, FORMERLY DIRECTOR WHO REGIONAL NUTRITION TRAINING PROJECT BEIRUT AND PRESENTLY OF SCHOOL OF PUBLIC HEALTH TEHERAN UNIVERSITY STOP

BBB) GEORGE CLEMENT, FOOD TECHNOLOGIST WORKING WITH INTERNATIONAL RESEARCH CENTER CANADA STOP

CCC) EWEN THOMSON GAMMA VISITS PROPOSED FROM AUGUST LAST WEEK FOR ABOUT FIVE WEEKS STOP ARRANGEMENTS BEING MADE ON BASIS MURSHIDS CONCURRENCE IN KANGS TELEX 1211 STOP GRATEFUL CONFIRMATION GOI CONCURRENCE ON TIMING OF VISIT AND CHOICE OF CONSULTANTS STOP VENKITARAMANAN WILL BE LOOKING INTO THE POPULATION AND NUTRITION PROJECT II AS A WHOLE STOP KINDLY INFORM HAFID AND SUWARDJONO THAT VENKITARAMANAN PROPOSES TO VISIT JAKARTA SEPTEMBER 15 - 27 STOP

NOT TO BE TRANSMITTED

REGARDS KANAGARATNAM

AUTHORIZED BY: Dr. K. Kanagaratnam

NAME Population and Nutrition Projects

DEPT.

SIGNATURE

REFERENCE: Indonesia/PNP

CLEARANCES AND COPY DISTRIBUTION: cleared with and cc: Mr. Jones, PNP Mr. Gould, EAP Mr. Berg, PNP Ms. Husain/Mr. Zaidan (o/r)

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Checked for Dispatch: (o/r)
Messrs. Evan Thomson, Hossein Ghassadi,
George Clement and S. Venkiteswaran
Dr. K. Kanagaratnam - Director, PNP


1. A team consisting of Mr. Evan Thomson (Consultant), Dr. Hossein Ghassadi (Consultant), Mr. George Clement (Consultant) and Mr. S. Venkiteswaran (Project Development Specialist, PNP) will depart for Indonesia during August-September 1974 to assist the Government Task Force preparing a Nutrition Project for Bank financing.

2. Messrs. Thomson and Ghassadi will be in Indonesia for approximately six weeks, from the end of August 1974. Mr. Clement will be in Indonesia for about five weeks from September 9, following a week of briefing in Washington. Mr. Venkiteswaran will join the team during the latter half of September 1974.

3. The team should be guided in its approach by the draft Terms of Reference prepared for the Nutrition Task Force dated March 25, 1974, to the extent that they have been accepted by GOI.

4. Mr. Evan Thomson, who visited Indonesia for this purpose in May-June 1974, will continue work on the basis of his earlier Terms of Reference - and in particular, help in a sharper focussing of the outline of the nutrition demonstration component of the Project. He will also assist in working out the arrangements proposed for coordination of the Government's nutrition activities. Finally, he will work closely with Dr. Ghassadi, Mr. Clement and Mr. Venkiteswaran in developing the organization and management structures of the Nutrition Research and Food Technology Institutes.

5. Dr. Ghassadi's primary responsibility will be the Nutrition Research Institute component of the Project. Mr. Ghassadi will assist the committee of the Task Force which is working out the details of this component. In particular, he will ensure that the outline of the expansion project for the Institute of Nutrition at Bogor is prepared in sufficient detail, indicating the various disciplines to be covered, the additional equipment and buildings required and the approximate types and numbers of manpower needed as well as the necessary training for the personnel of the Institute, which will have as its primary goal the development of applied research into problems of nutrition in the Indonesian context, with a view to the evolution of nutritional policy measures and intervention programs. He will evaluate the present administrative arrangements for the management of the Institute of Nutrition and recommend such modifications as may be needed to secure more efficient and effective expansion of sophisticated research which may be irrelevant to the present and future needs of Indonesia's food and nutrition system. He will assess the types of personnel now available in Indonesia to man the proposed expansion; the nature and cost of consultants, if any, needed for the initial phase of expansion.
6. Mr. Clement will help prepare a detailed plan of action for the setting up of an Institute of Food Technology. One of the Institute's purposes will be to give technical assistance to the organized sector of the food industry by identifying and, through experiments and pilot operations, helping to solve problems arising out of storage of food-industry raw materials, their processing, and their packaging. The draft plan of operation should, therefore, identify and reflect priority problems in important food industries on which Institute assistance is likely to be needed and successful. An important question will involve the extent to which, if at all, the Institute should attempt to deal with the problems of the unorganized sector of the industry. Since it will not be possible to identify problems (except in general outline), the plan of operation should suggest appropriate mechanisms for maintaining close relations between the Institute and industry, e.g. through advisory committees, periodic technical workshops, the use of contract research, consulting arrangements between Institute staff and industry, and/or other appropriate arrangements. He will assist the Task Force to evolve a clear detailed outline of the proposed project, spelling out the special areas of research and development proposed, the costs of building and equipment, and the approximate types and numbers of manpower needed as well as the necessary training for the personnel of the Institute.

7. In addition to looking into the organizational aspect of the proposed project, Mr. Venkitaramanan will coordinate the work of the mission during the period he is in Jakarta. During the rest of the period, the team members will coordinate their work under the guidance of Mr. Thomson.

8. On arrival, the team will brief the Director of the Resident Mission of IBRD as well as the U.N. Resident Representative and will liaise, as required, with local representatives of multilateral agencies such as UNICEF, WHO and FAO. The team members will obtain the prior clearance of the Director of the Resident Staff, for local travel inside Indonesia.

9. To the extent possible, each mission member should try to pretest his recommendations with Indonesian counterparts. At the conclusion of their work in Indonesia, Messrs. Thomson, Chassendi, and Clement will brief the Director of the Resident Mission of the findings and return to Washington, D.C. for one week to write their reports.

cleared with and cc: Messrs. Baldwin, PNP
berg, PNP
Coulid, EAP
Ms. Husain, PNP
cc: Messrs. van der Tak, PAS
Cordon, Jakarta Office
Jones, PNP
Kang, PNP
Zaidan, PNP
Div. Files

SV/ldr
Indonesia/PNP
Dear Mr. Jones,

Thank you for your letter of March 20th, 1974 in which you keep me informed about the progress of the Salt Iodization Project in Indonesia. I understand that the change of title of the project, limiting to salt iodization, is probably for purposes of reference. The aim of the proposal is the eradication of endemic goiter and endemic cretinism and the ways and means by which this can be achieved may vary. Probably salt iodization will be the major technique. In this respect I want to draw your attention confidentially to the fact that the whole salt problem of Indonesia (production, economic aspects and distribution) has recently been studied by a very able Dutch team as consultants to Indonesia. Their report gives a good background information for further discussions.

I expect to be in Indonesia in October 1974. I wonder whether at that time people from your institution are visiting Indonesia or that you want me to pick up some contacts for discussion.

Most sincerely yours,

A. Querido.

cc. Mr. A. Berg
Aug. 5, 1974

From: Djakarta

INCOMING TELEX

1091 KANASARATHAN

HE MILLS VISIT, SUWARDJONO AND HAFID WILL BE ABSENT UNTIL

SEPTEMBER 14. PREFERABLE MILLS COME ABOUT FIFTEENTH. WILL BE

MOST WELCOME. REGARDS

GORDON

Distribution: Population Proj.
Mr. Sandberg
OUTGOING WIRE

TO: 1) HOSSEIN GHASSEMI
     HEALTHSUTTE
     TEHERAN

2) HOSSEIN GHASSEMI
    c/o UNICEF REPRESEN-
    TATIVE IN TEHERAN
    UNICEF
    NEW YORK
    TEHERAN
    IRAN

COUNTRY: IRAN

DATE: AUGUST 5, 1974

TEXT: REURCAB AUGUST 3 AND YOURLET JULY 19 WE CABLED YOU JULY 29 TO SCHOOL OF PUBLIC HEALTH, TEHERAN UNIVERSITY, SHAH REZA AVENUE TEHERAN QUOTE REMYLET JUNE SIX AND OURCAB JUNE TWENTY-FIVE GRATEFUL YOU CONFIRM BY CABLE YOUR AVAILABILITY AND DATE FOR CONSULTANCY ASSIGNMENT INDONESIA STOP IF AVAILABLE WOULD LIKE YOU PROCEED DIRECTLY INDONESIA ABOUT AUGUST TWENTY-SIX FOR FOUR WEEKS FOLLOWED BY ONE WEEK REPORT WRITING IN WASHINGTON STOP AFTER RECEIPT OF YOUR CONFIRMATION WE WILL CLEAR YOUR RELEASE WITH DR NAHAVANDI AND SEND YOU TERMS OF REFERENCE AND BACKGROUND MATERIALS FOR MISSION STOP OUR PERSONNEL DEPARTMENT WILL THEN CONTACT YOU FOR FORMAL ASSIGNMENT UNQUOTE WE ASSUME YOU ARE AVAILABLE FOR THIS MISSION ON DATE AS SPECIFIED ABOVE STOP APPRECIATE KNOWING WHETHER YOU WISH BANK TO MAKE CONTRACT WITH UNIVERSITY OR DIRECTLY WITH YOU AS AN INDIVIDUAL STOP YOU CAN DISCUSS THIS WITH MR ZAIDAN WHO IS EXPECTED TO VISIT TEHERAN AUGUST TEN TO FIFTEEN MEETING DR SARDARI DEPUTY MINISTER OF POPULATION MINHEALTH AND OTHER OFFICIALS OF MINISTRY OF HEALTH REGARDS

KANG

NOT TO BE TRANSMITTED

AUTHORIZED BY:

K. Kanagaratnam, Director

DEPT.


SIGNATURE

THKang/is Cons. Indonesia

CLEARANCES AND COPY DISTRIBUTION:

cc: Mr. Alan Berg
Division I

Mr. Franckson to hand-carry to Mr. Zaidan in Teheran

FOR USE BY COMMUNICATIONS SECTION

ORIGINAL (File Copy)

(IMPORTANT: See Secretaries Guide for preparing form)
TO: INTRA FRAD
JAKARTA
COUNTRY: INDONESIA
TEXT: 1302 FOR GORDON
Cable No.: INTBAFRAD

DATE: AUGUST 5, 1974
CLASS OF SERVICE: TELEX (5103)

REYRCAB 1091 RE MILLS VISIT STOP UNLESS YOU DEEM INADVISABLE
WE WISH TO PROPOSE THAT MILLS DO PRELIMINARY WORK IN INDONESIA BEFORE
SUBWARDJONO AND HAFID RETURN AND THAT MILLS THEREFORE REACH DJAKARTA
TENTH SEPTEMBER STOP THIS WILL BE MORE APPROPRIATE FOR OUR INTERNAL
SCHEDULING PURPOSES STOP REGARDS

KANagaratnam

NOT TO BE TRANSMITTED

AUTHORIZED BY: Dr. K. Kanagaratnam
NAME Population and Nutrition Projects
DEPT.
SIGNATURE ______________________ (SIGNATURE OF INDIVIDUAL AUTHORIZED TO APPROVE)
REFERENCE: Indonesia/PNP
ORIGINAL (File Copy)
(IMPORTANT: See Secretaries Guide for preparing form)

CLEARANCES AND COPY DISTRIBUTION: SV:dr

cleared with and cc: Dr. Kanagaratnam, PNP
Ms. Husain, PNP
cc: Mr. Baldwin, PNP
Mr. Zaidan, PNP (o/r)
Mr. Jones, PNP (o/r) Mr. Berg, PNP
Mr. Gould, PNP Div. Files

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Checkaid for Dispatch:
OUTGOING WIRE

DATE

COUNTRY

TEXT

FOR CONCERNED

 Citadel of Industry

WE WISH TO PROPOSE THAT MERE DO PRODUCE HARD IN IMMEDIATE IMPORTANCE

SUSPENSION OF HOSPITAL PATIENTS AND THOSE NEEDING REHABILITATION

TO WHOM BEING YOUR ASSISTANCE WOULD BE MORE APPROPRIATE FOR OUR INTEREST

TRANSMISSION

NOT TO BE TRANSMITTED

AUTHORIZED TO

Name

No. 5 19 HP 1914

[Signature of Individual Authorised to Transmit]
FOR MR BERG NO NEWS ON INDONESIA CONSULATANCY ON NUTRITION STOP
TIME SHORT SHOULD COMPLETE MISSION BEGINNING ACADEMIC YEAR STOP IF
MISSION DEFINITE UNIVERSITY CHANCELLOR APPROVAL NECESSARY ALSO
REQUIRE TERMS OF OFFER AND BRIEFING STOP TRAVELLING FORMALITIES
TAKE LONG HERE STOP PLEASE CONFIRM SITUATION BY CABLE
TO HEALTHSTUTE REGARDS CHASSEMI
OUTGOING WIRE

TO: INTRAFRAD
   JAKARTA

COUNTRY: INDONESIA

TEXT:
Cable No.: WE PROPOSE TO SEND DAVID MILLS COMMA ARCHITECTURAL CONSULTANT COMMA TO INDONESIA FOR CONTINUING HIS WORK ON MEANS OF EXPEDITING CONSTRUCTION PROGRAMS OF POPULATION PROJECT I AS WELL AS FOR FORMULATING THE BUILDING ASPECT OF POPULATION AND NUTRITION PROJECT II STOP SOEJOTO WHO IS HERE HAS AGREED TO THIS VISIT ALREADY REQUESTED INFORMALLY BY BKKEN STOP MILLS PROPOSES TO VISIT INDONESIA FROM 10TH SEPTEMBER TO 30TH SEPTEMBER STOP KINDLY INFORM SUNARDJONO COMMA HAFID AND PRAMOEDEWI STOP APPRECIATE EARLY REPLY ON GOI CONCURRENCE STOP REGARDS

KANAGARATNAM

NOT TO BE TRANSMITTED

AUTHORIZED BY:

NAME
Dr. K. Kanagaratnam
DEPT.
Population and Nutrition Projects
SIGNATURE

REFERENCE:
Indonesia/PNP

ORIGINAL (File Copy)

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CC: Mr. Berg, PNP
Ms. Husain/Mr. Zaidan(o/r), PNP
Mr. Jones (o/r), PNP
Mr. Gould, EAP

Div. Files

Checked for Dispatch:
Dear Mr. Sosjoto:

Kindly refer to our discussions at lunch on July 24, 1974. As promised, I am writing this brief note to highlight some of the important issues discussed.

Building Program

We had agreed that it was of the utmost importance to speed up the building program, and that such procedural simplifications or relaxations, as are necessary, should be brought about quickly. Mr. David Mills, our Architectural Consultant, who has already been in Indonesia in this connection, will return to Jakarta in September 1974, and will work in close cooperation with BMII in order to achieve this.

We discussed the fact that one of the problems in implementation of construction programs arises from the lack of clearly defined construction and contract procedures and documentation needed for agreements with successful bidders - the Project Implementation Unit is cursed in preparing these essential documents. I expressed to you the hope that by the time Mr. Mills reaches Jakarta in September drafts of these procedures will be ready in a final form and that an agreed version can be circulated to all concerned.

You may recall that we emphasized the need to bring forward the schedule for the construction of the remaining 10 clinics in East Java, working drawings for which have already been completed. The need for, and the possibility of decentralizing the construction of some of the smaller buildings such as those, were discussed at our meeting. You had agreed that this should be further explored in the light of some of the revised budgetary procedures you were contemplating. Mr. Mills will be asked to follow this further with you and BMII during his visit in September.
Mr. S. H. Socjeto

July 30, 1974

Strngthening the PIU

The responsibility for implementation will, naturally, continue to rest with the PIU. We discussed the importance of strengthening the PIU, with particular reference to the need for an operations advisor for the BEKSN, who would assist in the general management aspects of the project as well as the national program, with special emphasis on planning, budgeting and supervision. You had been good enough to agree to discuss this further with the Chairman and Deputy Chairman of BEKSN and inform us whether the Government would be requesting IDA for recruiting an advisor to BEKSN financed from the Project funds. We feel that in view of the impending termination of the consultancy arrangements with PNC, the assignment of such an advisor is all the more essential.

Population and Nutrition Project II

Our discussions had also briefly centered around the Population and Nutrition Project II. In this context, we agree with you that the usefulness of the concept of Population Center, put forward in Mr. Ratcliffe's report, would depend very much on the nature of the professional leadership the center can secure. At the same time, it is necessary to have a clear idea of the goals and institutional structure which the Government of Indonesia wishes to have for the Center. It was clear that the focus of such a center is operational, not academic. We would appreciate having an early response - hopefully not later than the September mission - from you as to what further steps you wish us to take on this component. We are ready and available to provide any additional advisory services that might help to move this along.

For the nutrition component of the Project II, as already agreed, a small team of consultants (Mr. Ewen Thomson, Mr. Ghassemi (Nutrition Research), Mr. George Clewitt (Food Technology)) will be visiting Indonesia in September 1974 and will be available for advising the Task Force and its committees to finalize the nutrition component of the project. Mr. David Mills and Mr. S. Venkitaramanan will also be in Indonesia during this period and will render whatever assistance is needed in moving the preparation of the Population and Nutrition Project II as far along towards completion as possible.

It was very good meeting with you.

With kind regards,

Sincerely,

K. Kanagaratnam
Director

Jakarta Office Population and Nutrition Projects Department

cc: Mr. Baldwin
Mr. Zaidan o/r
Mr. Berg
Mr. Gould
Mr. Jones o/r
Dr. Ranganathan
Div. Files
SVenkitaramanan/rb
OUTGOING WIRE

TO: HOSSAIN GHASSEMI
ASSOCIATE PROFESSOR NUTRITION
SCHOOL OF PUBLIC HEALTH
TEHERAN UNIVERSITY
SHAH REZA AVENUE
TEHERAN

COUNTRY: IRAN

DATE: JULY 29, 1974
CLASS OF: LT
SERVICE: 5431

TEXT:
RE MYLET JUNE SIX AND OURCAB JUNE TWENTY-FIVE
GRATEFUL YOU CONFIRM BY CABLE YOUR
AVAILABILITY AND DATE FOR CONSULTANCY ASSIGNMENT INDONESIA STOP IF
AVAILABLE WOULD LIKE YOU PROCEED DIRECTLY INDONESIA ABOUT AUGUST TWENTY-SIX
FOR FOUR WEEKS FOLLOWED BY ONE WEEK REPORT WRITING IN WASHINGTON STOP
AFTER RECEIPT OF YOUR CONFIRMATION WE WILL CLEAR YOUR RELEASE WITH
DR NAHAVANDI AND SEND YOU TERMS OF REFERENCE AND BACKGROUND MATERIALS FOR
MISSION STOP OUR PERSONNEL DEPARTMENT WILL THEN CONTACT YOU FOR FORMAL
ASSIGNMENT REGARDS

KANG

NOT TO BE TRANSMITTED

AUTHORIZED BY:

K. Kanagaratnam
POPULATION & NUTRITION PROJECTS

SIGNATURE

(SIGNATURE OF INDIVIDUAL AUTHORIZED TO APPROVE)

REFERENCE:

IHKang/ejs

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Dr. Kanagaratnam, Mr. Baldwin, PNP
Mr. Berg, PNP

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(IMPORTANT: See Secretaries Guide for preparing form)
OUTGOING WIRE

TO: GEORGE ZAIDAN
IMMEUBLE NABULSI
AVENUE VERDUN
RAS BEIRUT

COUNTRY: LEBANON

TEXT: SENT FOLLOWING CABLE TO GHASSEMI SCHOOL OF PUBLIC HEALTH TEHERAN UNIVERSITY

DATE: JULY 29, 1974
CLASS OF SERVICE: LT

Cable No.: IRAN QUOTE

RE MYLET JUNE SIX AND OURCAB JUNE TWENTY-FIVE GRATEFUL YOU CONFIRM BY CABLE YOUR AVAILABILITY AND DATE FOR CONSULTANCY ASSIGNMENT INDONESIA STOP IF AVAILABLE WOULD LIKE YOU PROCEED DIRECTLY INDONESIA ABOUT AUGUST TWENTY-SIX FOR FOUR WEEKS FOLLOWED BY ONE WEEK REPORT WRITING IN WASHINGTON STOP AFTER RECEIPT OF YOUR CONFIRMATION WE WILL CLEAR YOUR RELEASE WITH DR NAHAVANDI AND SEND YOU TERMS OF REFERENCE AND BACKGROUND MATERIALS FOR MISSION STOP OUR PERSONNEL DEPARTMENT WILL THEN CONTACT YOU FOR FORMAL ASSIGNMENT REGARDS KANG UNQUOTE

PLEASE FOLLOW UP DURING YOUR STAY IN TEHERAN REGARDS

KANG

NOT TO BE TRANSMITTED

AUTHORIZED BY: K. Kanagaratnam
DEPT. Population and Nutrition Projects
SIGNATURE (SIGNATURE OF INDIVIDUAL AUTHORIZED TO APPROVE)
REFERENCE: IHKang/ejs

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    Dr. Kanagaratnam/ Mr. Baldwin, PNP
    Mr. Berg, PNP

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Checked for Dispatch: SC
Dr. K. Kanagaratnam, Director - PNP

July 24, 1974

Mr. Ewen Thomson, Consultant - PNP

INDONESIA: Population and Nutrition Project - Nutrition Component
Back-to-Office Report

1. In accordance with the terms of reference dated April 29, 1974, I visited Indonesia from May 8 to June 20, 1974. I met representatives of the Government of Indonesia, staff of WHO, FAO, UNICEF and CARE and resident staff of the Bank. Visits were paid to the Nutrition Institute, Bogor, and the Department of Food Science and Technology of the Agricultural University, Bogor. Visits were also paid to Surabaya Regency, Mijit Regency, Tuban Regency and Bojonegoro Regency of the Province of East Java. On Lombok Island, visits were paid to the East Lombok Regency, the West Lombok Regency and we passed through the Central Lombok Regency. Throughout, there was very close collaboration with Dr. K. V. Ranganathan of the Resident Staff and useful discussions were held with Messrs. Raw Jones and Mike Gould during their visit to Indonesia.

Summary of Findings

2. The likely governmental set-up for central administration and coordination will be established by a Presidential Instruction or a Presidential Decision on the following basis:

(a) the Council for People's Welfare will be the body responsible for policy and coordination;

(b) a Committee to provide the Council with professional advice may be established;

(c) a Nutrition Secretariat to serve the Council and the Committee will be established under the aegis of BAPPENAS;

(d) the Governors of Provinces will be designated as being responsible for the National Nutrition Program within their Provinces;

(e) in any Regency Nutrition Demonstration Projects, ODI will expect ANP activities to be strengthened and supported.

3. The Task Force met three times during the mission. It has appointed six committees to deal with (a) policy, (b) nutrition research, (c) food technology, (d) Regency Nutrition Demonstration Projects, (e) fortification and (f) training. Terms of reference and time schedules for all committees have been agreed upon. The intention is to complete first drafts of requests for technical assistance by October 1st and to prepare a final consolidated draft of the request for the National Nutrition Program by October 31. The time schedule was being met up to June 20, (but should there be delay, every indication is that the consolidated request will be submitted before the end of the year).
4. Particular assistance has been given to the Committee dealing with the Nutrition Demonstration Project (NDP). Five meetings of the Committee were held and the Chairman and two others carried out a field trip of eleven days. The Committee decided to recommend the Bojenegore Regency and the West Lombok Regency as the two areas for Nutrition Demonstration Projects. Considerable relevant data have been collected and it is hoped the balance of available data will be in the Committee's hands by the end of June. The Committee will analyze this data, identify the specific problems of the area, those affected, how badly and where they live. They will make an initial identification of appropriate intervention measures, but it is at this stage that they would be grateful to have the service of a resource person (the term which is apparently preferred to consultant or expert).

5. The need to strengthen research capability and improve the direction of research activities is being considered. Much requires to be done and the service of consultants with experience in the direction of nutrition research and food technology will be required. Fortification of foods with iodine, iron or Vitamin A will require the advice of experts and GOI intends requesting the UNICEF expert to be made available. Training requirements are in a somewhat confused state; until there are job descriptions, which identify the skills which must be acquired, there is likely to be continued confusion. Training of Nutrition Program Officers to provide professional advice to Governors and Bupati would seem to demand top priority.

**Summary of Recommendations**

6. The NDP will be based on Indonesia's food and nutrition policies, assisted by the Bank and other agencies, with local liaison and coordination of activities to maximize effect. The GOI will establish the Council for People's Welfare as the top policy and coordinating body for nutrition; it will be served by a Nutrition Secretariat, headed by a Secretary General, which will also be responsible for Nutrition Program planning, provision of scientific and technical advice and for social communications relating to food and nutrition. The Governors of Provinces should be designated as the officers responsible for the NDP in their Provinces. They will require advice from specially trained nutrition program officers.

7. The Nutrition Demonstration Project should be carried out in the Regencies of Bojenegore, East Java and West Lombok. Orientation courses will be required for local officials and base-line data on food consumption and nutritional status should be obtained. The intention will be to identify the problems and target population, consider alternative intervention measures to deal with the problems, on a specific and not a blanket basis, and to decide on the intervention measures which should be planned in detail.

8. The research facilities and the direction of research relating to nutrition and food technology require considerable strengthening, but it will be necessary to accept the GOI view that separate institutions will be necessary. Nutrition Program planning, which requires to be action oriented would best be situated in the Nutrition Secretariat.

9. Salt iodisation presents difficulties and the services of a consultant are being sought. Alternatively, fortification of sodium glutamate (widely used as a condiment) is being investigated as is the fortification of coconut oil by red palm oil.
10. Major revision of the content of nutrition education is required, perhaps most tactfully achieved in conjunction with the NDF. The objective of nutrition education should be to bring about beneficial behavioral change and not the acquisition of nutritional facts; this requires a communications unit. Massive retraining and reorienting courses will be required, warranting a mobile training team. Priority should be given to training nutrition program officers.

11. The NDF require to be extended to other Regencies within a reasonable time scale and such extension to other regencies must be included as part of the NDF.

Outline of Action Taken

12. Very fortunately, the first two days overlapped with the visit of Mr. S. Venkittaramanan and there was opportunity to be informed of the results of discussions with various GOI officials. This background briefing from Mr. Venkittaramanan and the wide and detailed knowledge of Dr. K. V. Ranganathan, regarding the Indonesian situation, formed a most valuable basis from which to start. That the reorganized Task Force had already held its first effective meeting was a significant step forward towards project planning.

13. The following week was devoted to meeting GOI officials in SAPPERAS, the Ministry of Health and the Ministry of Agriculture and collecting information and reports from them. Contact was also made with the resident representatives of WHO, UNICEF, FAO and CARE. Visits were paid to the Nutrition Institute, Bogor, and the Food Science and Technology Department, of the Agricultural University in Bogor. Prior to the second meeting of the Task Force, Mr. Marshid requested a paper on coordination. It was completed on May 17 (see Annex I).

14. The second meeting of the Task Force was held on May 18. It was a long meeting, in which the procedural position reached was recapitulated in detail and six committees appointed to deal with the specific factors which make up the terms of reference of the Task Force. These Committees were:

(a) For inventory of current and past nutritional activities and policy statements; Chairman Supardan

(b) For food technology; Chairman Winarno

(c) For nutrition research; Chairman Darwin Karyadi

(d) For Nutrition Demonstration Project; Chairman Malasan

(e) For food fortification; Chairman Benny Kodyat

(f) For training; Chairman Wirjowan.

The Committees were required to prepare their own terms of reference and a timetable to ensure that the first draft of a project request would be ready by the beginning of October and a final and consolidated draft by October 31, 1974.
15. In accordance with the terms of reference, particular attention was paid to the Nutrition Demonstration Project. Its Committee consisted of:

(a) Dr. S. Malasan - Head of Dept. of Health, School of Medicine, Bandung, Chairman
(b) Dr. Suasandi - Directorate of Nutrition
(c) Mr. Hortono - Directorate of Nutrition
(d) Dr. Ny Hartati S. Pandi - BEKN
(e) Mr. Saiwa Hadi - Bureau of Agriculture, RAPPENAS

To assist the Committee in its deliberations, a paper was prepared and distributed on "The Nutrition Demonstration Project" (see Annex II). Meetings of the Committee were held on May 22 and 26 and it was ready with terms of reference and time schedules for the next meeting of the Task Force.

16. From information received from various sources, it seemed necessary to visit the Province of East Java, before the third Task Force meeting. This provided an opportunity to meet the Provincial Nutrition Committee, the Milar Regency Nutrition Committee and one sub-district nutrition committee. Visits were paid to various Applied Nutrition Projects. It was important to ensure that the views of provincial and local officials had been sounded, before any decision was taken by the Task Force. Dr. W. Bahrami, Director of Health Services, East Java, returned on the 30th of May from representing Indonesia at a WHO Conference. It was very fortunate that it was possible to meet him for he would be a key figure in any Nutrition Demonstration Project in East Java.

17. The third meeting of the Task Force was held on June 1. Once again it was a lengthy meeting. The Committees on policy and training considered that they required the advice of other Chairman before they could finalise their tasks. Ambitious proposals were put forward for the development of food technology research, including an agricultural product-processing, preservation and storage of foods, the development of methods for processing, preservation and storage of foods, the development of new products and sensory evaluation. The proposals for nutrition research consisted mainly of a "shopping list", but it also represented an ambitious program. Both of these research proposals require advice from someone experienced in the practical direction of research.

18. The Committee on fortification reported that progress was held up for lack of industrial advice relating to salt production. The Committee on the Nutrition Demonstration Project recommended that agencies should be selected in the Province of East Java and on Lombok Island, and this recommendation was accepted. Terms of reference for most Committees were submitted, but those for policy and training would be drawn up after a meeting of Chairman on June 8.

19. Following on this Task Force meeting, a paper (see Annex III) was prepared for the personal information of Mr. Murshid, to assist in the development of adequate machinery to coordinate and implement the program. These comments were incorporated by Mr. Murshid in his submission to a Committee of Ministers dealing with the subject.
20. The Committee for the Nutrition Demonstration Project met on June 3 and decided there was an immediate need to visit the Province of East Java and Lombok Island. In each, two Regencies would be studied and a recommendation made as to which should be selected. Consideration was given regarding the data which should be collected. A pro-forma on data related to nutrition had been prepared by the Ministry of Health for other purposes, but it seemed to form a very good basis for use. It was decided to leave Jakarta on the field trip on June 6 and return not later than June 16. The itinerary was as follows:

June 6 - Jakarta - Surabaya by air, meet provincial officials.
June 7 - Visit to Tuban and AMP activities.
June 8 - Visit to Tuban and health facilities.
June 9 - Surabaya - Denpasar.
June 10- Denpasar to Mataram, Lombok Island.
June 11- Meet provincial officers and visit local AMP projects.
June 12- To Semail, East Lombok, and the south of the Regency.
June 13- To Tanjung, West Lombok, and the north of the Regency.
June 14- Further discussions with provincial officers and return to Surabaya.
June 15- Visit to Bojonegoro Regency.
June 16- Return to Jakarta.

COI provided land-rover transport for the rural visits and the roads demanded such a form of transport. The onward flight from Denpasar to Mataram did not materialize as no aircraft seat would be available for four days. To meet our commitments, it was essential to travel by ferry boat. This experience was useful in highlighting the difficulties of physical communication, but the ferry boat is not a form of travel to be recommended.

21. Notes were prepared on the field trip and they were distributed to the members of the project committee early in the morning on Monday June 16. This enabled the Chairman to put forward the firm views of his committee.

22. The fourth meeting of the Task Force took place on June 16. Consolidated terms of reference and schedules for action were circulated to all members and, as amended, were adopted as the firm terms of reference. It was decided that meetings of committee chairmen would take place each Monday morning and the next meeting of the Task Force would take place on July 22, after the National Nutrition Conference which will be held between July 16 and 19.
23. A meeting of the Committee for the Nutrition Demonstration Project was held on July 17 to discuss what the Committee required to do. It was decided that the Committee should:

(a) Continue the process for selection of Regencies.
(b) Collate information, due in by end of June.
(c) Analyze information.
(d) Identify problems and target groups.
(e) Identify possible intervention measures (to be done by mid-August).
(f) Plan selected intervention measures, in collaboration with provincial and regional nutrition committees.
(g) Draft request for technical and financial assistance.
(h) Submit request.
(i) Process request.
(j) Implement project.

24. GOI continues with its desire to designate the established National Council for People's Welfare as the coordinating body for nutrition. Provided this body is well served by its Secretariat, the Council has the necessary prestige and authority, but results will depend greatly on the quality of the documentation placed before the Council.

25. Consideration has been given to the establishment of a professional committee to advise the Council on Nutrition. This proposal is supported by the Ministry of Health, but it would be an unnecessary and difficult barrier between the Nutritional Secretariat and the Council.

26. Current thinking is to establish a small Secretariat to serve the Council and the professional committee, if the latter is established. The Secretariat may also be responsible for nutrition program planning, social communication relating to food and nutrition, and the provision of scientific and technical advice. It will be important that the head of the Secretariat is of sufficient status; a suitable title might be Secretary-General, with a status equivalent to Director-General and thus, with the right to address Governors of Provinces directly.

27. It is understood that it is intended to designate the Governor of the Province as the officer responsible for the Nutrition Demonstration Project. This would be the most satisfactory arrangement. In each Province, where there have been Applied Nutrition Projects operating, there are established Nutrition Committees.
The Plenary Nutrition Committee of the Province is chaired by the Governor and there is also a professional committee. There is an Operations Officer responsible for training, supplies and implementation. In each Region, there is a similar set-up with the Bupati chairing the plenary committee. At Sub-District (Kecamatan) level, there is a nutrition committee and village (Desa) committees exist where there are applied nutrition projects. The organisational structure is as good as could be desired, but there is need for a Nutrition Program Officer at Provincial and Regional levels. It is suggested that these officers should be selected from the available graduate nutritionists and further training given in planning, administration and communication.

28. The original intention was to establish the governmental machinery for coordination and implementation by an inter-ministerial decree, but at a meeting of Ministers, held on June 14, it was considered that an IMPRES or a COMPRES would be more appropriate. The IMPRES is a "Presidential Instruction" and would enhance the prestige of the whole program. The COMPRES is a "Presidential Decision" backed by statutory law and is of even higher prestige, although much less well known by officials at provincial and regional levels.

29. On June 19, Mr. Harshid was not in a position to say what had been decided. He undertook to approach the Cabinet Secretary to obtain an early copy of the minutes of the meeting. The new alternatives will result in a little delay, but whether an IMPRES or a COMPRES issues, the instrument should be ready within a month.

Evidence of Nutritional Status

30. Current nutrition education is based on "4 food groups every day" and "5 food groups when possible". This seems to overemphasize the role of animal protein; it also relegates cereals to the carbohydrate or energy producing class, whereas they represent the most important source of protein supply for the vast majority. It is not surprising that nutrition education has been confined to the better off families, for it could be provocative to teach those who are most in need to eat what they cannot obtain.

31. There are surprisingly few studies of food consumption, but those that are available indicate that protein lack is not the problem. The following table calculates the protein calories per cent of published data. In all these studies, the calories obtained from protein are over 10%.

<table>
<thead>
<tr>
<th>Area</th>
<th>Surveyed Subjects</th>
<th>Cals.*</th>
<th>Prot. gm.*</th>
<th>Prot. Cals.%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bogor</td>
<td>264 Students</td>
<td>2,100</td>
<td>60</td>
<td>11.3</td>
</tr>
<tr>
<td>(1960)</td>
<td></td>
<td>1,400</td>
<td>43</td>
<td>12.3</td>
</tr>
<tr>
<td>Surabaja</td>
<td>100 Labourers</td>
<td>1,431</td>
<td>41.08</td>
<td>11.4</td>
</tr>
<tr>
<td>(1956)</td>
<td></td>
<td>1,592</td>
<td>45.3</td>
<td>11.4</td>
</tr>
<tr>
<td>Jakarta</td>
<td>180 Labourers</td>
<td>1,491</td>
<td>41.3</td>
<td>11.1</td>
</tr>
<tr>
<td>(1957)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AMP Study</td>
<td>920 Households</td>
<td>1,491</td>
<td>41.3</td>
<td>11.1</td>
</tr>
</tbody>
</table>

* Per Caput Per Day
### Table 2

**A.N.P. Evaluation Study 1973**

<table>
<thead>
<tr>
<th>1960 CAIS.</th>
<th>Cals. +</th>
<th>Prot. -</th>
<th>Cals. +</th>
<th>Prot. -</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1960 CAIS.</th>
<th>Cals. +</th>
<th>Prot. -</th>
<th>Cals. +</th>
<th>Prot. -</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>61%</td>
<td>25%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- 40g +

630 Households : 22 Villages : 7 Provinces

**Poor**: less than 240 Kg (rural) or 360 Kg (urban) rice equivalent per year income.

A.N.P. carried out "Where the situation is favorable for the program".
### Table 3

<table>
<thead>
<tr>
<th>A.N.F. Evaluation Study</th>
<th>Better Off Households</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cals. +</td>
<td>Cals. +</td>
</tr>
<tr>
<td>Prot. -</td>
<td>Prot. +</td>
</tr>
<tr>
<td>41%</td>
<td>37%</td>
</tr>
<tr>
<td>22%</td>
<td></td>
</tr>
</tbody>
</table>

- 40g +
  Protein
32. Tables 2 and 3 are derived from the AWP Evaluation Study of 1973. In both the poor and better off households, the greatest number of households (61% and 42%) are deficient in both calories and protein. Significant numbers of households (22% and 25%) have over 40g. protein despite being under 1900 calories per caput. The most striking feature is that no household which had over 1900 calories per caput had less than 40g. of protein per caput. This confirms the evidence from many other countries that if caloric intake is adequate, seldom will there be a deficiency of protein. The exception is likely to be in areas where cassava is the staple food.

33. The FAO Planning Team has prepared national food balance sheets for 1969, '70, '71, and '72 and hopes to have food balance sheets for 1973 available by Provinces before the end of August, 1974. For the year 1972, the per caput consumption is given as:

<table>
<thead>
<tr>
<th>Calories per day</th>
<th>Total</th>
<th>1,964</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vegetal</td>
<td>1,929</td>
<td></td>
</tr>
<tr>
<td>Animal</td>
<td>55</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Protein per day, grams</th>
<th>Total</th>
<th>42.2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vegetal</td>
<td>37.2</td>
<td></td>
</tr>
<tr>
<td>Animal</td>
<td>5.0</td>
<td></td>
</tr>
</tbody>
</table>

These figures give a protein calorie percentage of 8.5 which is low. Various gaps and deficiencies have been identified by the planning team and it is intended that the action will be taken in the future to improve the validity of the food balance sheet.

34. Van Veen (1970) derived production per caput per day by province and region, based on the six main food crops: rice, maize, cassava, sweet potatoes, peanuts and soya, plus fish as protein. For Indonesia (excluding Maluku and Irian Barat) the per caput production was:

<table>
<thead>
<tr>
<th>calories</th>
<th>1,588</th>
</tr>
</thead>
<tbody>
<tr>
<td>protein</td>
<td>35.9</td>
</tr>
</tbody>
</table>

The protein calorie percent at 9.7 is a trifle low, but there are other foods eaten in considerable quantities in addition to the six quoted. For example, green gram and haricot beans are eaten in significant quantities.

35. Goitre and cretinism are endemic in parts of Indonesia and Java, with 12 large areas identified as having the greatest number of people affected. This iodine deficiency is a specific problem which requires remedial action.

36. Studies by Kalyadi et. al. have revealed avitaminosis A in 7% of school children from a sample studied in West Java. Johanna has estimated the rate of blindness in East Java as about 250 per 100,000, but there are also other causes involved as well as lack of Vitamin A. It is mainly the 2-6 year age group which is seriously affected. Maldistribution of foods within the family coupled with the unpopularity of dark green leafy vegetables are factors involved in this nutrient deficiency.
37. Anemias are very widespread among men as well as women. High helminthic infestations certainly contribute to this situation, but iron deficiency has been shown to play a major role.

The Nutrition Project

38. It was suggested to the Committee for NDP that there were certain criteria which should be considered in choosing suitable regencies. They were:
   
   (a) political and administrative support;
   (b) likely response from the people;
   (c) the presence of a malnutrition problem;
   (d) the presence of urban, periurban and rural populations;
   (e) an average area, representative of conditions elsewhere;
   (f) the solutions are likely to be replicable; and
   (g) where NDP are already functioning.

39. On the basis of these criteria the proposals for the Jodjakarta region and the alum area were dropped. Instead, it was decided by the Task Force that the NDP should be carried out in two regencies, one in East Java and one on Lombok Island. The idea of having two demonstration regions, as a first phase in developing a rational program, was well received, but the need to plan for rapid expansion of the program was considered essential.

40. The four regions visited all had different types of problems; this stressed the need for the individual planning of the program in each region. Indeed, there are marked variations within regions.

41. In East Lombok, the southern and eastern part of the region suffers from being in a "rain shadow", coupled with a volcanic subsoil which does not retain water. Boring to a depth of 120m. has failed to find water. In 1972/73 there was severe famine in this area. A survey, carried out on a basis of recall, gave per caput caloric intake of under 1,000 and protein intake of under 20g. per day. There is no doubt that this part of the region suffers from severe caloric and protein deficiency. The solution is either the provision of water supplies or transmigration.

42. CIDA has completed a survey of water resources and development and the interim report will be available in July. Recommendations leave out any proposals for the problem area as the cost-benefit ratio is only 0.5. Until there is water available, there can be no food production, and without food being available, there can be no nutrition program other than famine relief.

43. West Lombok has its problem area in the north, in Tanjung sub-district. Mild to medium protein caloric malnutrition is prevalent, especially in the mountainous area where cassava is the staple, but it also is present in the rice eating areas. In one specific area, goitre is endemic. There have been recent cases of xerophthalmia, nearing to keratomalacia. Anemia is widespread. Thus, in this area, there are obviously deficiencies of Iodine, Vitamin A and Iron, in addition to the food shortage producing the protein caloric malnutrition,
The introduction of new rice varieties has raised yields from 2½ to 8 tons per hectare, but the price has come down to a rate which is no longer an incentive to produce. Despite the increased yields, the rice crop is only sufficient to last for 4 months. Fortunately, the price for copra is high and those who own coconut palms can afford to buy rice imported from other regions, but only 700 out of 2,000 families own any land.

The hospital services are very under-utilized, but they seem to have handled a cholera outbreak well; the outbreak was nearly over at the time of our visit. During the months of January to May, the MCH clinic is virtually unused, but after harvest there is available money to pay the fee charged per attendance.

In the south of the West Lombok Region, we had an interview with an experienced headman, who is also a progressive farmer and an ANP beneficiary. He complained of the insect damage to the rice, the fluctuation in rice prices, which were not conducive to increased production, the losses in transporting the new rice varieties as the heads shed their seeds readily and the difficulties caused by the late arrivals of seeds and fertilizer.

 Everywhere it appears that farmers have loans from some source, from governmental sources if possible, but more often from private money lenders. Many have to sell their crops immediately after harvest, or even before harvest, in order to repay the loans. Thus, they sell when the price is low and will have to buy supplies later on to feed the family, when the price is high.

Materam, the provincial capital, is quite a substantial town, and provides a rather undeveloped urban complex.

The Governor took a keen personal interest in the possibility of a demonstration project and he and all the provincial officers, whom we met at Materam would be likely to give their support.

There are a variety of nutritional problems to be tackled. It appeared to the Committee for NDP that West Lombok would be a very suitable region.

In the Province of East Java, the regencies of Tuban and Bojongagoro were considered as places for the NDP.

Tuban is a rice-eating area, with comparatively easy access to fish; the marine fishery produces about 3,000 tons per year, but with a regional population of 769,000 that represents about 5g. of fish per capita per day. From information received and personal observation, there appeared to be no serious malnutrition, although there were reports of some undernutrition. As would be expected in a coastal area, there is no goitre and Vitamin A deficiency.

Various applied nutrition projects were visited. A dairy herd of 7 Fresian cross cows produced more than enough milk to saturate the market. The only buyers were patients who had been ordered by their doctor to drink milk; the average person could not afford to pay the price under normal circumstances. Another marketing problem related to fish. Increased catches result in lower prices on the auction floor, the fisherman's income remaining fairly constant. Tuban represents urban conditions, but has no special problems.
54. Bojonegoro, a region with a population of 872,000 people, has some serious malnutrition problems. It can be divided into three areas. About 55% of the population live in a surplus area, some 25% are on a just adequate basis and 20% live in a definitely "minus" area. Relief measures with Bulgur wheat are currently being taken to assist the last.

55. During 1972, the Solo River flooded three quarters of the region causing great distress. Inquiries indicated that this was a typical ecological problem. After independence, there was rapid incursions into the areas of the headwaters of the Solo River, where conservation measures had been enforced previously. Cultivation of steep hillside, without adequate protection measures, resulted in serious soil erosion. The river carried this large load of silt during its passage from the hills, but in the slowly moving stretches on the plain, the silt was deposited, forming banks. When flood waters descend after the onset of the rains, these banks forced the river to overflow and flood the flat countryside.

56. We visited Ngaser, a comparatively successful AHP in the minus area, where a village of 1,772 people has had fairly integrated development during the last two years. Fishery developments in paddy fields resulted not only in a crop of fish, but also in the production of a second crop of rice, which had not been achieved in this area before. Fruit trees and vegetables were growing well. Stall fed cattle and milk goats seemed in good condition, as did the poultry. One factor lacking is adequate health services.

57. What has been achieved at Ngaser has aroused interest in neighboring villages, but extension of the project is inhibited by lack of resources.

58. This provides a lesson for the NHP. The extension of the initial NDPs to other regencies must be included as part of the NHP.

59. Local efforts are being made to tackle some of the problems such as water supply, but resources are lacking. The Bojonegoro region had the highest degree of enthusiastic leadership and the greatest response from the people encountered on our field trip. The town of Bojonegoro provides an urban setting, although perhaps not as typically urban as one would wish. Despite that, Bojonegoro is recommended as one of the regions for the NHP.

60. The extension of the NHP to become a national nutrition program within a reasonable time scale will require much effort and the input of considerable resources. It is believed that an expansion on the basis suggested in Table 4 below would be feasible. If the remote and sparsely populated provinces and regencies were left to the last, the vast majority of the population could be covered within ten years, and even the remote areas by the 15th year.
### Table 4

<table>
<thead>
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<th>Year</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
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<th>8</th>
<th>9</th>
<th>10</th>
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<td>48</td>
<td>118</td>
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</tbody>
</table>

61. There are 26 Provinces and about 1400 Regencies. To have expansion of the program as soon as possible, it is proposed that in the third year, there should be expansion to 8 other Regencies contiguous with the selected NPD Regencies plus 3 new NPD in other Provinces. The experience gained from this initial expansion should enable expansion of the program at a greater rate in subsequent years.
Health Services

62. Throughout the visits to rural areas, the striking under-utilization of health services was very apparent. Tactful inquiries regarding the causes met with many different answers. Some hinted that it was due to the in-experience of the doctors, most of whom were recent graduates serving their compulsory stint in the rural areas. It was pointed out that people do not go to the hospital to see a doctor, but to see the man who is the doctor, provided he is of good local repute. Many laid the blame on failure to provide appropriate medicines and other facilities, so that the public lost faith in the service. Many others commented on the high fees levied by local authorities - $2.50 per day for a confinement and about $0.25 cents per day for illness. The more fundamental cause appears to be the general custom of civil servants having three or four jobs in order to make ends meet. Medical and para-medical staff all have private practices, many of which flourish. An unpublished inquiry into rate of pay for health staff commented that they were adequately paid for the amount of work they do.

63. In contrast, it was stressed by the Director of MCH that his staff is so over-loaded that they could not possibly undertake any extra nutrition work.

64. In the NDP regencies it is likely that the MCH system will be expected to provide many services. It may be necessary to have mobile clinics to reach those who are most in need. Having yet another paid service may be the only way of providing the necessary service. It would not involve extra staff so much as providing another wage-earning job for current staff. There are already 72 different categories of para-medical staff and one does not wish to advocate increasing the number.

65. Dr. Malasan is well aware of the problem and he and his Committee will be trying to find a way to solve the problem of providing adequate MCH services in the NDP regencies.

Applied Nutrition Projects

66. The Resident Representative of UNICEF felt that the ANP had been a failure, others have commented on how little has been achieved for the expenditure of $15 million. Professor Dradjat denies that they have failed. He maintains that had there been base-line data collected before the start of the projects, the results of evaluation would have been found to be very satisfactory. Health staff in the Province of East Java had an intermediate view; some were successful, others were not.

67. Of those visited, and they were show pieces, only one could be considered as having had any significant impact on the nutritional status of more than one extended family. It seems that they were designed mainly to increase the production of high cost protein — improved poultry, milk production, goats and fish. Those selected for ANP assistance were usually the more progressive and better off. One headman now had over 70 hens providing an average of 17 eggs per day. He had been self-schooled about replies to visitors. When asked what he did with the eggs, he insisted that he ate them all.
68. In the second five-year development plan it is intended to extend AMP to all provinces (26), but greater emphasis will be placed on self-help and the use of volunteer groups and village community organization.

69. It was made very clear to the Ministry of Health that the NDP is not in competition with AMP.

Supplementary Feeding

70. CARE has carried out the biggest supplementary feeding program in Indonesia, providing meals for school children in the Province of West Java. There are many reservations in BAPPENAS and elsewhere in GOI regarding supplementary feeding based on imported foods.

71. CARE has been working on the use of local foods, through the development of cereal and legume mixtures in which the individual proteins complement each other. Various mixtures have been tested; a small Wenger extrusion plant is in order and should arrive by September 1974.

72. CARE has worked out proposals for an Integrated Nutrition Project in West Java. This project has been agreed at working level, but has not been discussed formally with the Central Government. The aims of the project are:

(a) to develop, test and produce from locally grown crops a suitable food combination which will be provided as a supplement to vulnerable groups of the local population;

(b) to provide nutrition education and information particularly related to local problems; and

(c) through agricultural inputs and assistance to extension staff, to persuade small farmers to grow what is required.

Research Capability

73. There is very great need for technical assistance to strengthen the research capability and for some means of introducing an element of direction in the research carried out.

74. The laboratories of the Department of Food Science and Technology of the Agricultural University of Bogor are not well equipped. They have sufficient equipment to teach elementary food science, but no means of giving practical instruction in food technology, far less conducting research in food technology.

75. There is a nutritionist on the staff, but his work is mainly that of a laboratory technician. A recent example of his skill was the construction of a "home made" centrifuge, the only centrifuge the laboratory possesses.
76. The enthusiasm of Suhadi Hardjo, the Rector, was very infectious. He has given a lot of thought to what might be done. He is in favor of an institute dealing jointly with nutrition and food technology, but his proposal is to leave the present nutrition institute to deal with medical nutrition and the proposed new Institute should deal with non-medical nutrition and food technology.

77. There seemed to be no possibility of having one combined institute for nutrition, food science and technology and program planning. There are personality clashes and inter-ministerial jealousies which would be very difficult to resolve.

78. The assistance of consultants experienced in the direction of nutrition research and the direction of food technological research will be required to assist in the development of the research component of the NDP.

Program Planning and Evaluation

79. In view of the separation of nutrition research from food science and technology, it was considered that program planning should be established as one of the functions of the Nutrition Secretariat. Placed in this way, it would be more action oriented. Baseline data will be required for evaluation, but it is suggested that this should not be collected directly by the Program Planning and Evaluation Unit, but that the Nutrition Institute should be commissioned to carry out such studies.

80. Initially, the Unit would not be large but it would have to expand to meet future needs. As soon as it can be established, it should start on the collection and analysis of data for future NDP action in other Regencies.

Food Fortification

81. Progress regarding the iodization of salt has been limited. It is a delicate subject politically and a difficult subject technically in the circumstances prevailing. There are around 3,000 different salt producers and much of the salt is highly hygroscopic which may render it unsuitable for iodization. The feasibility of iodization of salt requires expert advice.

82. Alternatives suggested have been the fortification of wheat-flour or sugar, but such foods are outside the feeding patterns of the poorer families.

83. Following inquiries, it was found that sodium glutamate is widely used as a condiment by all strata of society in Java, Sumatra and Bali with its use expanding rapidly in Kalimantan and Lombok. Dr. Winarno and Suhadi Hardjo think there would be little technical difficulty in fortifying the sodium glutamate with sodium iodate. They will carry out trials in their laboratories.

84. It was also suggested that trials should be made in fortifying coconut oil with red palm oil, an excellent source of Vitamin A. Clear coconut oil is the popular choice and it will be a question of whether or not a mixture will be acceptable in taste and appearance. Tests will also have to be made regarding Vitamin A losses at frying temperatures.
85. Fortification of some popular food with iron is another requirement to combat nutritional anemia. Sodium glutamate might be possible for iron fortification as well as for iodine.

Recommendations

86. The National Nutritional Project (NMP) requires to be a truly Indonesian program, assisted by support from various agencies: the Bank, UNICEF, WHO, FAO, CARE, etc.

87. In view of the fact that any national nutrition program demands coordinated action by many ministries and departments and to avoid any duplication of effort or apparent competition in the provision of technical assistance, it is important that there should be local liaison between and coordination of action among international and bilateral agencies.

88. GOI requires to define a long-term, unambiguous food and nutrition policy so that all who are interested in the program can assist in a coordinated manner.

89. A national program only merits the title when the benefits of the program are felt nationwide; the immediate project should be planned so as to lead on to a national program.

Governmental Machinery

90. The intention of GOI to designate the Council for Peoples' Welfare as the body responsible for coordination of the NMP should be supported.

91. The administration of the NMP should be carried out by a Nutrition Secretariat under the aegis of BAPPENAS, but with the maximum of decentralization to the Provinces.

92. The intention of GOI to designate the Governor of a Province as the officer responsible for implementing the NMP within the Province, should be supported.

93. The status of the head of the Nutrition Secretariat should equate with Director-General; Secretary-General for Nutrition might be an appropriate title (Note: Only officers of the rank of Director General or higher may address a Provincial Governor directly).

94. In addition to serving the Council for Peoples' Welfare in matters relating to food and nutrition, the Nutrition Secretariat should be responsible for nutrition program planning, provision of scientific and technical advice on food and nutrition, and for social communication relating to food and nutrition.

95. While GOI does not want technical assistance in the form of a full time expert for nutrition program planning, its desire to have assistance through periodic visits of consultants should be supported.
96. The established organization of Nutrition Committees for ANP projects at provincial, regional, sub-district and village levels should be used, both in planning and implementing the NDFP and NNP.

97. The Governors of Provinces and Bupati of Regions require professional advice in carrying out responsibilities relating to the NDFP; the provision of Nutrition Program Officers at provincial and regional levels is considered essential.

98. Nutrition graduates should be given training in program planning, administration and communication through courses supported by technical assistance, but carried out in Indonesia; such Nutrition Program Officers should be staff either of the Nutrition Secretariat or of the Governor.

Nutrition Demonstration Project

99. The decision of GDI to have 2 regions selected for integrated nutrition demonstration projects should be accepted, with a region in East Java representing the more sophisticated local government and a region on Lombok Island representing the more traditional local administration.

100. The Regions of West Lombok and Bojonegoro have been recommended to the Task Force for the nutrition demonstration project.

101. Reorientation courses will have to be held for officials at provincial level, and at regional and lower levels in the regions selected.

102. Once regions have been selected, base-line data on food consumption and nutritional status should be obtained; UNICEF can probably fund such studies, during the period when the program request is being processed.

103. Although flood control or provision of irrigation may be deemed too indirectly connected with a nutrition demonstration project, it is considered that such intervention measures should be studied during the planning stage as possible alternative intervention measures.

104. In the regions selected, intervention measures aimed at target populations rather than blanket operations should be adopted wherever possible.

105. In the NNP, provision should be made for the expansion of the NDFP to contiguous regions in the same province, and to new demonstration regions in other provinces.

Research

106. The intention of GDI to set up an Institute for Food Technology associated with the Agricultural University, Bogor, should be accepted as the only workable arrangement.

107. There is need to strengthen and assist in the direction of nutritional research; the provision of a consultant for this purpose is essential.
106. A further consultant is likely to be required to assist in the planning for the Institute of Food Technology; it is unlikely that the consultant for nutritional research will be sufficiently experienced in food technology.

109. Nutrition program planning, which requires to be action oriented, rather than research oriented, would be better placed in the Nutrition Secretariat, rather than at either of the research institutes.

**Fortification**

110. Fortification of salt with iodine presents many difficulties; it is recommended that the UNICEF expert on salt-iodination should be the advisor on this subject (GOI will be asking for his assistance).

111. As an alternative, the fortification of sodium glutamate with iodine or iron or both should be investigated.

112. The possibility of fortifying the popular coconut-oil with palm-nut oil as a source of Vitamin A. should be investigated.

**Nutrition Education and Training**

113. Major revision of the content of nutrition education is required, probably best done in conjunction with the nutrition demonstration project.

114. The maximum use should be made of existing contact personnel, but they should be provided with teacher-proof teaching aids.

115. A much broader approach to influencing people's nutrition is required and a consultant will be required to create a systematic campaign out of all the methods, media, agencies and opportunities, which exist.

116. The objective of nutrition education should be beneficial behavioral change and not the acquisition of nutritional facts. This requires the establishment of a communications unit.

117. The volume of retraining and reorienting courses in demonstration project areas would warrant a well-equipped, mobile training team.

118. Priority will have to be given to the training of Nutrition Program Officers and a special course devised to meet their particular needs.

**Conclusions**

119. Based on the sound work which has been done by others, considerable progress has been possible during the period of the mission. It seems very likely that a request will be forthcoming from GOI before the end of the year, even if the target date of October 31 proves impossible.

120. It is considered that once the instrument issues dealing with governmental machinery for the program, possible obstruction will fall away.
121. Fortunately, it should prove to be possible to decentralize responsibility for the NUF. Effectiveness of governmental action is impressive in the provinces and regencies.

122. It is recognized that assistance will be required from consultants in various fields.

123. The Governor of the Province of East Java promotes his developmental slogan, "More Smiling". Let us hope there may be "More Smiling from Better Eating".

Acknowledgments

124. To list the names of all those who have helped the mission would be a very lengthy process, for sound advice and guidance came just as much from those at village level as from the senior governmental staff. Particular thanks are due to the staff of the Nutrition Directorate, who provided office accommodations, made all their records available, arranged the field trips, provided transport for them and proved to be an immense source of unrecorded information. The staff of BAPPENAS have been directly responsible for maintaining the rate of progress and Mr. Murshid's contribution, as chairman of the Task Force, deserves special mention.

125. Dr. K.V. Ranganathan, of the Resident Staff, proved to be a great source of knowledge regarding governmental procedures and the skills required to influence government. Special thanks are due to him for his unfailing assistance.

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Indonesia/PNP
National Nutrition Program

Integrated Planning and Coordinated Action

1. General Background

1.1 All programs for the improvement of human welfare require some degree of coordination; none more so than in the field of applied nutrition. A nutrition program cannot be considered in isolation. It involves many disciplines and departments, a complex of governmental activity, private enterprise, institutional assistance and, above all, response from the people themselves. This presents a formidable array of varying factors and differing motivations, which must be moulded into a practicable program.

1.2 Such a program depends on the economic and social conditions prevailing in a wide range of divergent ecological areas and at various socio-economic levels. It depends on the resources available to Government and the willingness of Government to apply these resources. The need is for coordination at all levels of governmental action.

1.3 For effective coordination there appear to be three factors of equal importance.

(a) a comprehensive and unambiguous, long-term policy, embodying specific demands for coordination;

(b) an unbiased, competent and acceptable coordinating body, which has adequate authority and flexibility; and,

(c) within agencies, units or personnel, which are capable of being coordinated.

1.4 To be firm, a long-term policy requires decision by the highest authority. Only in this way can those involved have a reasonable basis for their own planning. Vacillation in policy results in repeated departmental modifications to meet the policy changes and ultimately results in a state of complete confusion.
1.5 The characteristics of an effective coordinating body might include:

(a) a conviction of the soundness and vital importance of the program which it administers and a determination to ensure that it is carried out;

(b) the authority to carry out the approved policy relating to the program, with ready access to the source of policy in the event of obstruction;

(c) so composed as to have the respect of the disciplines on agencies to be coordinated, which is only possible if the representation is administratively competent, professionally qualified and has knowledge of the problems and the people;

(d) an unbiased approach in its efforts to attain harmonious collaboration among the different disciplines involved in the common purpose; availability /

(e) within each agency of effective units or personnel which are capable of being coordinated;

(f) a self-effacement permitting all credit to go to the executing agencies; and

(g) a capacity to shoulder responsibility for deficiencies and a resilience to be able to remedy any such failures.

1.6 It is vitally important that there is continuity, not only in the central body, but in the agencies coordinated. One country established a National Nutrition Committee, which met eleven times before collapsing. Six Ministries were represented but, on average, an individual representative attended only three times; one Ministry sent seven different representatives to seven consecutive meetings. The only factor of continuity in that Ministry was the file on the subject and, even if the file could be found, it formed as basis for coordination.

1.7 Although the governmental machinery, which may be established, can help, coordination is not exclusively an administrative process.
Rather, it is the reflection of a state of mind on the mode of behaviour of those who are striving towards common objectives. There must be understanding and respect for related endeavours and any desires for personal prestige on the safeguarding of departmental interests must be subordinated to the need to increase human welfare through better nutrition.

2. Alternatives Adopted Elsewhere

2.1 In many countries the initiative in nutrition planning and coordination devolve on National Institutes of Nutrition. By their very nature and definition such institutes are primarily devoted to research and training. They can only exert influence by advice and their efforts at coordination are inevitably at second hand. Normally, such institutes are founded on the basis of, or are dominated by one discipline.

2.2 In some countries an individual Ministry is allotted the task. In such circumstances nutrition tends to be relegated to a low priority among the many activities of a busy Ministry. There is a natural tendency to prefer objectives entirely within its own ministerial sphere of influence and control. Such objectives are much more easily administered and are much more satisfying to the personal ambitions of those involved, as credit for success cannot be in dispute and any lack of success is more easily hidden. Specialist Ministries are notoriously inept at coordinating the activities of other specialists, who, in turn, resent and resist extraneous attempts to exercise initiative and leadership over their activities. It may be possible, as in Malawi, where the Ministry of Agriculture is by far the most powerful, with the Life President as its Minister.

2.3 Other countries have adopted a National Nutrition Council or Committee. A study of some 32 countries, where such Councils or Committees have been established, provides 32 records of ineffective action.
2.4 In Zambia, a National Food & Nutrition Commission was established by Act of Parliament. It has had considerable success within limits, but suffers from two serious defects. Firstly, it is answerable to the Minister of Health (but not the Ministry) and this has lessen greatly the response from the Ministry of Agriculture. Secondly, it has, as yet, been unable to integrate a nutrition component into national development plans, but that should be realised, when planning data become available shortly.

2.5 Thus, there is no fully satisfactory precedent to follow and it would appear that GOI will have to evolve the system best suited to its needs. A successfully coordinated nutrition program in Indonesia would not only be of immense benefit to the people, but could provide a much-needed example for others to copy.

3. Possibilities

3.1 From a study of international experience and practice, it appears that a national nutrition program requires six components:

(a) a firm, unambiguous, long term policy;

(b) an administrative body with authority to coordinate and implement the policy;

(c) an executive body capable of carrying out the administrative decisions;

(d) a source of scientific and technical information and advice;

(e) facilities for training and research; and

(f) a decentralized organization to enable people to be involved meaningfully, in planning and implementing measures for their own nutritional improvement.

3.2 Policy. In some other countries nutrition policy has been a mere pious expression of wishful thinking unrelated to practical realities. There are those who maintain that policy must first be decided and the programme designed to fit the policy. The Oxford English Dictionary
Any course of action must be related to the programme to be undertaken. Perhaps policy/programme is a chicken and egg relationship; which came first. It seems best that a policy/program should be considered as an entity.

3.3 Once a policy/program has been worked out it is recommended that it should be submitted to high authority, say, the Development Cabinet, so that all Ministries will be committed to the policy/program.

3.4 Administration. It has been suggested that the Council for People's Welfare would be the most suitable coordinating body. No doubt it fulfils all the characteristics set out in paragraph 1.5. It is possible that, through no fault of their own, members may not be conversant with all the ramifications of a nutrition program. If so, an exercise in communication may be necessary.

3.5 The Council for People's Welfare is a high-powered body, well suited for taking administrative decisions and for making or recommending the policy/program. Members of the Council are very busy people and there requires to be the means to scrutinize in detail, what is put before them. It has been suggested that there should be a Nutrition Working Committee to undertake this task. Provided it can cover the principle disciplines and departments involved, such a suggestion would seem to be most appropriate.

3.6 The functioning of both the Council for Social Welfare, in relation to nutrition, and the Nutrition Working Committee will depend greatly on an active and competent secretariat. The functioning of the Council in relation to nutrition will vary directly with the quality of documentation placed before it. The Secretariat will have more than a full time job. The personnel of the Secretariat should be able to cover the following skills:

- Administration, governmental procedures, drafting memoranda,
presenting and arguing cases. Nutrition Science and nutrition practice; food production, storage, processing and distribution; economic planning and nutrition programming.

This is being idealistic. For example, there are very few nutrition programmers anywhere in the world at present. The need is to select personnel who can cover these aspects as best possible; meanwhile, there would be the opportunity to train personnel in the specialist skills required.

The place where the Nutrition Secretariat should operate requires consideration; the decision is also complied with the way in which nutrition planning is carried out. It is believed that the Nutrition Secretariat will be so involved in routine administration and execution of a nutrition program, that it would not have the time to do the study in depth, required to formulate detailed nutrition programmes for definite areas. This study is a form of operational research and can probably best be done at the Nutrition Institute.

The conversion of the 'academic' program into a form suited to practical action, would be a responsibility of the secretariat. Decision would, of course, rest with the Council. As a tentative proposal it is suggested that the Secretariat should be established in BAPPENAS and a Nutrition Program Planning Group be established in the Nutrition Institute.

Execution. The execution of the program and the implementation of the administrative decisions, would be the responsibility of the Secretariat, but on a 'collaborative' basis, for many Ministries and Departments would be involved. Execution is closely related to decentralization.

Scientific and Technical Advice. The Nutrition Institute is the obvious centre for scientific and technical information and advice. Its resources will require to be strengthened to fulfil this function. In particular, it is suggested that the library should have an information retrieval system, for all local information and be linked with international retrieval systems so as to have access to available knowledge on a global basis. Further, the Institute should be regarded as the 'clearing house' for all information on food and nutrition and measures should be taken to
ensure that all information is channelled there.

3.10 **Training and Research.** Both aspects are being considered by the Task Force.

3.11 **Decentralization.** This is a vitally important aspect, but no comment can be made at present.

Ewen C. Thomson

May 17, 1974.
THE NUTRITION DEMONSTRATION PROJECT

1. The Nutrition Demonstration Project (NDP) is only part of, but an important part of the National Nutrition Program. It will be closely connected with the other factors in the program, such as research and training, food technology, supplementation and fortification, food production, storage, preparation and distribution, nutrition education and communication relating to all aspects of the program.

2. The NDP aims at improving the nutritional status of the people of a Regioncy through integrated and co-ordinated application of appropriate intervention measures. What the particular measures may be depends on the problems prevailing in the selected Regioncy, for each area's problems demand individual understanding and response.

3. It is generally accepted that where malnutrition is a national problem, in the sense that it occurs throughout the country, it demands nationwide action. However, limitations of skilled manpower, equipment and other resources preclude the possibility of taking immediate action everywhere at once and there is need to ensure that the most effective use is made of the available resources.

4. NDP is not an end in itself; it should be the catalyst to spread effective action gradually throughout the whole country.

5. The choice of a suitable Regioncy for the NDP has been discussed thoroughly and various factors have been identified:
   
   (a) political and administrative support;
   (b) likely response from the people;
   (c) the presence of a malnutrition problem;
   (d) the presence of urban, periurban and rural populations
   (e) an average area, representative of conditions elsewhere;
   (f) where solutions are likely to be replicable;
   (g) and where ANP are functioning.
6. The program for the NDP requires to be on a sound scientific basis; the application of the scientific knowledge will require three tools: planning, administration and communication.

Planning

7. Techniques for providing a systematic approach to planning, executing and evaluating development programs have evolved rapidly during recent years. Planning, however, is only a tool, it is not an end in itself; careful judgement is required regarding the degree of sophistication to be adopted.

8. What is done can only be based on available knowledge and data limitations must be accepted. As new knowledge becomes available and from the evaluation of what has been done, the program can be revised and improved. There is nothing static about planning, it is an iterative process, with ample flexibility.

9. The first task is the collation of all available information; this includes both relevant data and related current activities. The factors involved include data relating to politics, administration, geography, nutrition, food, public health, economics, demography, sociology, education, etc. Related current activities are likely to involve health, agriculture, community development, education, economic planning, natural resources, food industry and non-governmental organizations.

10. The next task is analysis of the available data. What is the nutritional status of the people in the project area? What are the nutritional requirements, the nutrient deficiencies and the food deficiencies? Who are affected adversely, how are they affected and how badly; where do those affected live?

11. What are the trends demographically, economically, regarding food production and food demand; is it possible to make provisional food demand and supply estimates?
12. Then there are the factors which affect consumption. What are the food habits, patterns and beliefs? What is the situation regarding supply, distribution and marketing? What are the degrees of wastage pre-harvest, in storage, during processing, in distribution, during preparation and consumption? Do natural hazards, such as floods pose a threat? Is it possible to identify blockages in the food chain or to work out malnutrition pathways?

13. What are the gaps in knowledge, which would hinder or inhibit effective action; what can be done to find the answers?

14. From such an analysis it should be possible to identify provisional objectives and goals and the intervention measures, which are likely to be most effective. The alternative intervention measures require to be planned in detail and comparisons made of the cost effectiveness of the alternatives. There are very many possible intervention measures; a list of some possibilities is given as an annex, but this list is merely indicative, certainly not exhaustive.

Administration

15. The most perfectly planned program would be a mere paper exercise unless there is the governmental machinery to carry it out. With its multi-sectoral involvement, applied nutrition requires a high degree of co-ordination in the implementation of any program, not only at the level of central government, but through all stages down to the families who will benefit. At central and provincial levels, this aspect is being dealt with by others, but, within the demonstration Regency, consideration must be given to the means for carrying out any proposed program.
16. Meaningful involvement of the people in planning and implementing measures for their own nutritional improvement is a basic requirement and the means to bring this about may require working out. In the rural areas, the traditional methods of decision making probably still prevail and they require to be included in the process for bringing about beneficial change. Through adoption of what exists, the way can become open for technical assistance and planning.

17. The maximum use should be made of all agencies which are in direct contact with the families. This is likely to involve reorientation or in-service training courses, but results will probably be better if based on established and trusted relationships, rather than on the creation of a new cadre of field workers.

Communication

18. The vital tool to motivate both decision makers and those who will benefit is social communication. This is very different from the traditional information services, which have resulted in a mere outpouring of material. Social communication is a two way circulating flow of "messages", based on pretested material. It involves using every available means, media, agency and opportunity and moulding them into a systematic program. Such a program has five concurrent and continuing ingredients: "What to say", "How to say it", "Pretesting", "Operational use", and "Evaluation." All these aspects can be elaborated if desired.

Future Development

19. Improved nutritional status of the people in one Regency, although of local importance, would have little national significance in itself. It is only through the expansion of the successful activities throughout the Province and the introduction of similar activities in other Provinces, that national coverage and impact will be achieved.
As a part of the national proposals for nutrition, it has been suggested that a Planning Group should be established, probably at a national institute. Its activities could be regarded as operational research and it should be charged with the task of planning the expansion of the program, so that it develops into something which is truly national.

The following is one example of how expansion might take place. Within a Province there is an initial Demonstration Regency. When the demonstration has been established successfully, nutritional activities might extend into all Regioncies, contiguous with the Demonstration Regency. When activities in this extended area are operating successfully, there can be further extension to contiguous Regencies, and so on until the whole Province is covered.

Simultaneously, there should be the introduction of Demonstration Regioncies into other Provinces until, in due course, all Provinces are covered. It is most unlikely that the rate of progress will be even throughout the country. Reinforce success! Do not intensify effort, where response is slow; reinforce effort where results are being achieved and thus gain the greatest national benefit from the impact of resources.

Ewen G. Thomson

May 19, 1974.
POSSIBLE TYPES OF INTERVENTION MEASURES

Land use planning and irrigation.
Planned food crop production.
Expansion of small stock and poultry.
Development of corn, oilseeds, pulses, sorghams and potatoes.
Establish ecological and economic firms.
Integrate local farming practices into research on improved husbandry.
Strengthen extension staff and include nutrition in training.
Minimize food crop wastage.
Ensure adequate internal marketing.
Arrange localized variety trials for food crops.
Arrange for seed and chemical input distribution.
Develop and extend rural credit system.
Increase intermediary technology.
Develop local weaning mixtures.
Development of fisheries, production, preservation,
Fortification with Vit A., Fe, and I.
Hospital treatment of severe cases.
Laying down treatment regimes for rural centres.
Nutrition training for professionals and para-medical staff.
Training in early diagnosis.
Immunization programs.
Control of endemic disease.
Collection of vital statistics.
Ante-natal care.
Child Welfare Clinics (under 5 clinics).
Nutrition Rehabilitation Centres.
Health and Nutrition education.

Direction and inspection of hospital diets.

Monitoring institutional feeding.

Provision of potable water supplies.

School health service.

Formal nutrition education in schools, universities, etc.

Informal nutrition education, clubs, clinics, scouts, etc.

Adult education program.

Functional Literacy Program, with nutrition as function.

Correspondence Courses.

Courses for local leaders.

Production of teaching aids.

Use of mass media.

Agricultural and Home Economic Extension Services.

Relationship of work output and energy intake.

Encourage proper use of canteen facilities.

Improve incentive creating systems.

Feeding program for school children.

Supplementary feeding of under 5 children and pregnant and lactating mothers.

Motivate good nutrition for non-nutritional reasons.

Develop relationship of physical fitness and good nutrition.
Reflections on Task Force Meeting: 1st June 1974

The Task Force has been dealing with:

(1) Policy
(2) Nutrition Research
(3) Food Technology
(4) Demonstration Project
(5) Fortification
(6) Training

Certain aspects, which are vital for a national food and nutrition programme, may not have been adequately covered as yet:

(1) Programme Planning and Evaluation
(2) Provision of Scientific and Technical Advice
(3) Social Communication
(4) Nutritional Aspects of Food Production
(5) Integration of a Nutrition Component in National Planning
(6) Possibly, some aspects of Training

In the demonstration project there will be an example of a systematic approach to planning. Initially this will affect only two Regioncies; the methodology for preparing programmes for other Regioncies requires to be worked out. The query was raised in the Task Force Terms of Reference "Whether the Institute at Bogor is to be expanded to include food technology and a nutrition planning wing ....". There seems to be the intention to develop the Nutrition Research and Food Technology separately. It would, therefore, seem inappropriate to attach the Nutrition Planning Wing to either, as the planning would inevitably be biased towards the discipline, to which it was attached administratively. Furthermore, planning must be action oriented rather than research oriented. I shall follow this up later.

Originally, I had envisaged the focal point for scientific and technical information and advice, as being in the joint Institute for Nutrition, Food Technology and Planning. It would have been centred on the library, coupled with its information retrieval system and with links to international retrieval systems. This set-up would have required special ties with the very important agricultural production aspects. As the different facets are now to be separate this approach does not appear to be feasible. An alternative will be discussed later.

In his address to Committee B of the W.H.O. Assembly on 20th May, 1974 Dr. Bahrami, speaking on Health Education in developing countries said "efforts so far had failed, however, because they had been too limited to provide practical solutions and a much broader approach was required. This applies to an even greater extent to nutrition education. It will be essential to get away from the conventional approaches, which have achieved so little, and realize that the object is behavioural change, not the teaching of nutritional facts. This calls for a process of social communication, whereby every method, media, agency and opportunity is moulded into a co-ordinated communications programme. There must be a basic understanding of what motives may bring about behavioural change. To explain that eating
a certain food will be good for you, is unlikely to evoke response; to suggest that eating a certain food will make you attractive to the opposite sex is likely to appeal.

Social communication does not restrict itself to verbal, explicit and intentional transmission of messages, but includes all those processes by which people influence one another. It is concerned with the whole complex of relationships, through which ideas are exchanged, skills acquired, knowledge increased and behaviour changed.

In contrast to the limited success in combating malnutrition, great advances have been made by commodity producers in inducing a cautious public to purchase their products. Advertising has developed into a highly skilled profession and thus the Communications Expert has evolved. The same or similar techniques can be used for motives other than profit.

Far from being just a continuous outpouring of information, these techniques involve a careful study of the recipients' patterns of behaviour, the creation of messages based on this study and, in turn, a careful study of the recipients' reaction to the message.

Another important principle is to regard communication as a social diffusion process, passing through various stages from awareness to adoption. The first task is to create awareness of the problems of malnutrition and the benefits of better nutrition. From there, the objective is to stimulate active interest in solution to the problem and, when interest is strong enough, to encourage trial of the recommended changes. Then, finally to influence a conviction of the value of the trial so that a change in behaviour is adopted.

A Communications Unit, based on modern techniques, will be essential to give the national programme adequate support.

I raise the question of the Nutritional Aspects of Food Production because of its immense importance; perhaps the greatest single factor in improving the nutritional status of the people. Much has been done and is being done in this regard, but the evidence available would indicate that the most difficult nutritional problem will be to provide an adequate calorie intake for the expanding population.

Closely allied to this aspect is the integration of a nutrition component into National Planning. This should work in two ways: firstly, the national nutrition programme should be an integral part of the national development plan and, secondly, other aspects of the plan, should be considered from the nutritional point of view during the planning stage, so that any nutritional benefits or disadvantages may be considered before a final decision is taken.

I realize that there will be further collaboration and discussion on the training aspects, but, to ensure that national programme will succeed, training must concentrate on nutrition practice as distinct from nutrition science and with attention focussed on malnutrition pathways, rather than metabolic pathways. Much of the 'action' failure has been due to the
attempt to pass on too much science. The maximum use requires to be made of existing field personnel and facilities, but this will involve a massive retraining and reorientation exercise, with a well-trained, mobile staff to do the training in the field.

All training should be related to the job the trainee will carry out in the future, concentrating on the application of knowledge rather than the acquisition of knowledge. Before designing a specific course it is essential to know the detailed job description for which the training is being provided, so that the course will cover all the skills required in the performance of the job.

The training of Nutrition Programme Officers will require to be given special attention, for much of the success of a national nutrition programme will depend on them. A suitable post-graduate course will have to be worked out; unfortunately there is, as yet, no precedent to follow.

The expansion of the Demonstration Project into nation-wide action will require strong support of the field workers, by a central organization, whose first duty will be to implement the administrative decisions of the Coordinating Body. There seem to be other functions, which this central organization must undertake:

1. Programme Planning & Evaluation, integrated with the National Development Plan.
2. To be the focal point for scientific & technical advice, but in close collaboration with specialist institutions.
3. Social Communication and the provision of teaching aids.
4. Some method of co-relating nutrition training with practical needs.

Initially this could be a comparatively small unit, but as the scope of the national programme widens it will have to develop correspondingly.

Nutrition Secretariat  ➔  Liaison with other Institutions

| Planning & Evaluation | Scientific & technical advice | Social Communication | Training & Education |

Ewen C. Thomson

June 2, 1974.
Dear Ewen:

By now you have talked to Venkit and received -- and promptly responded to -- the cable from Dr. Kanagaratnam, but I did want to thank you personally for the excellent work in Indonesia and your willingness to return. We appreciate it all the more in recognizing your difficulty in getting away for long stretches of time.

We had a good chat yesterday with Mr. Sujoto, who spoke enthusiastically about both the project and your contribution. It seems clear to us that much has been set in motion. But it also is clear that the ultimate pay off of your work will be greater if you could stay in Indonesia through completion of the writing of the proposal.

I am sorry to have been away during your Washington stay, but I did enjoy reading through your comprehensive and very useful report. Congratulations on this, and especially on the annexes, which seemed to me to be an exceptionally good example of technical assistance in the process of project preparation.

Your notion of fortifying monosodium glutamate is an intriguing one and deserves pursuing. As I understand it, MSG is centrally processed (therefore, easy to fortify) and reaches all portions of the population. Are you familiar with any research efforts in Indonesia or elsewhere (possibly in Japan by Ajinomoto, the largest producers of MSG)? Venkit is making several inquiries from this end.

Your suggestion about adding palm oil to coconut oil also is of interest, but would not most of the oil be processed at the village level -- making the control and logistics of fortification virtually impossible?

Jim Baldwin mentioned to me his conversation concerning possible work that you might execute from home; specifically a syllabus that might provide the basis for internal Bank-training seminars and written guidelines that could be given to the Bank's agricultural staff to suggest how they might take into account the nutrition implications of a proposed project. On the latter,
Mr. Ewen Thomson  

Jim had not been made aware that preliminary steps (see the attached) have been taken. This is an outgrowth of the meeting you and I had with the East Africa agriculture staff when you were in Washington (and similar meetings with other Regions) in which requests were made for quantitative guidelines. If you have a few minutes, we would very much appreciate your reactions and suggestions concerning this. The need, of course, is to provide a guideline that is sufficiently comprehensive to be useful in flagging attention to the potential problem, while at the same time being simple enough not to overburden the field staff. (Our judgment is that if the work related to the guideline is too taxing, the effort may receive no attention at all.)

On the issue of the syllabus Jim raised with you, we would be grateful if, while in the U.K. after your next Indonesia trip, you had the time and interest to do a draft designed for staff training. What we have in mind is a detailed outline of what might be included in a two-day training course (three, if you think necessary) that (a) would sensitize agriculture projects staff to the nutritional implications of their projects and (b) create a consciousness among them to be on the lookout for adding nutrition components to agriculture projects. You had a good flavor of the caliber, interests and background of Bank agriculture staff during our session with the East Africa group. The opinions expressed there were typical of those expressed in similar meetings with other Regional staffs. They are extremely knowledgeable about food production, but often less familiar with uses and impact of that production. Rather than discussing the problem in general terms, my inclination would be that a case study approach may be more useful. (Cases demonstrating both how by not taking nutrition into account there may have been negative nutritional consequences, as well as cases demonstrating how specific nutrition components might be added to agriculture production projects.) Given your extensive background both in agriculture and nutrition administration, you are in an excellent position to help us bridge the two fields.

Should you like to undertake this syllabus, we think that before you begin it would be necessary to have a more comprehensive briefing, and this could probably be more effective in several personal discussions in conjunction with your next post-Indonesia trip rather than by mail. However, if you are willing to take this on, you may want to have the task in the back of your mind and begin giving some preliminary thought to how it might be handled.

Enclosed are some rough notes that may be useful as you begin to think about this.

Again, thank you greatly for your contribution on Indonesia. We look forward to your continued involvement.

Sincerely,

Cleared w/and cc: Mr. Venkitaramanap, PNP
Mr. Kang, PNP
cc: Ms. Husain/Mr. Zaidan (o/r)
Mr. Jones (o/r)

Inclosures

Alan Berg  
Deputy Director for Nutrition  
Population and Nutrition Projects Department
Discussions with Mr. Even Thomson (June 25-26) and comments on Mr. Thomson's Back-to-Office Report regarding the nutrition component of the Population and Nutrition Project - INDONESIA.

1. I had fairly extensive conversations with Mr. Thomson regarding the nutrition project in Indonesia. These broadly confirmed the conclusions of his detailed Back-to-Office Report.

2. The report itself is very useful, and gives a clear picture of the present status of work on the nutrition project. Mr. Thomson's main findings are that:

   (a) While a separate nutrition coordination body is not proposed to be set up, a Nutrition Secretariat, which will be established in the BAPPENAS (the National Planning Commission) will service both the Council (of ministers) for Peoples' Welfare and a professional committee to be set up under the Council.

   (b) The Task Force set up in BAPPENAS to prepare the nutrition project has been meeting regularly and has appointed six committees to deal with policy, nutrition research, food technology, regency nutrition demonstration projects, fortification and training.

   (c) While the time-schedule is to prepare a final consolidated draft of the request for aid by October 31, it will not be delayed beyond the end of the year.

   (d) The committee of the Task Force dealing with the nutrition demonstration project (NDP) has decided that the NDP be taken up initially in two areas, one in East Java (Bojonegore Regency) and the other in West Lombok. Data regarding these areas is being collected and is expected to be available soon. After this is done, the committee expects to analyze the data, identify specific problems and specify appropriate intervention measures. When this analysis is complete, the committee would, according to Thomson, need a "resource person" (a term used to define a consultant or expert). This is expected to be by August 1974, and Mr. Murshid has requested Mr. Thomson to be the "resource person" and visit Indonesia in August/September 1974.

   (e) Consultants are needed to help:

      (i) In the preparation of the nutrition research and food technology components of the project;

      (ii) In the fortification of salt with Iodine/Iron (a UNICEF expert is being asked for by COC); and

      (iii) In the preparation of a suitable nutrition campaign. A mass communications expert is needed for this.
(f) Training of nutrition program officers to provide professional advice to Governors and Aupatis is needed. The next time, training requirements, in general, need to be spelt out much more clearly than now. This can be done only after job descriptions are clearer.

Machinery for Coordination

3. Mr. Thomson has discussed at length the various aspects of the machinery for coordination (in Annex I of his Back-to-Office Report which is available at extension 5493) which is a copy of a paper prepared for Mr. Murshid, the chairman of the Task Force. Subsequent developments seem to have been greatly influenced by this paper. Regarding the chain of arrangements for coordination, Mr. Thomson himself is skeptical about the usefulness of a professional Committee to service the (Ministerial) Council for Peoples' Welfare. He feels that the Secretariat proposed to be established in BAPPENAS is important. His view is that there should be a Secretary General for this Secretariat - this designation being intended to enable direct communication with Governors of Provinces, who would be primarily responsible for the nutrition projects. Mr. Thomson explained that he would prefer that the Nutrition Planning group be part of the Secretariat rather than be located in the Institutes of Research. Up to the time of Mr. Thomson's leaving Indonesia, the relevant Presidential instructions on the subject had not been issued. Mr. Thomson's expectation is that these should be ready soon.

Nutrition Demonstration Project

4. While earlier preference, including the personal choice of Dr. Drajat, had been for areas in Central Java and Jakarta, Mr. Thomson appears to have succeeded in persuading GOI to drop these ideas and to locate the NDF in East Java and Lombok Island. East Java has a more sophisticated administration, a responsive head of the Health Administration and a dynamic Governor who is keenly interested in the subject of nutrition of Bojonegara (population 872,000). The area selected in East Java is suitable because it has some serious malnutrition problems. 55% of the people of this regency live in a surplus tract and 25% in a definitely minus area. A history of successful work with applied nutrition programs in the minus area and the possibility of increasing agricultural production in the regency as a whole, given the necessary resources, are among other factors in favor of selecting the area for the NDF Bojonegara town as a suitable urban component. Choice of West Lombok Island has been influenced by the need to try the demonstration in an area with a traditional administration and pronounced nutritional problems. During discussions, Mr. Thomson also clarified that there were likely to be transport and communication problems in West Lombok, which should be specifically handled in the design of the project.

Design of the Nutrition Demonstration Project

5. Mr. Thomson has advised GOI that the details of nutrition intervention programs should emerge from an analysis of the data regarding each of the areas selected. Hopefully, by the end of July 1974, this should have been worked out. Mr. Thomson told me that Mr. Murshid expects that a visit by Mr. Thomson in August/September 1974 should be useful to finalize the details of the intervention programs. This is vital. Unless these intervention programs are detailed at least to some degree of finality, it would be difficult to estimate costs.
Research Programs - Institution Building

6. Mr. Thomson is of the view that the proposal of G0I to set up an Institute for Food Technology associated with the Agricultural University Bogor should be accepted as a workable arrangement. Work in regard to project preparation on this has advanced much more than in the sector of nutrition research. Regarding the coordination of work in the Nutrition Research Institute and the proposed Food Technology Research Institute, Mr. Thomson is hopeful that suitable arrangements can be worked out. His preference is to place nutrition program planning in the proposed Nutrition Secretariat, rather than in the Research Institute.

Fortification

7. G0I is asking for assistance from a UNICEF expert on salt-iodization. Mr. Thomson has touched on the possibilities of exploring the fortification of sodium glutamate with iron or iodine or both. This will be gone into by the Research Institute separately.

Nutrition Education and Training

8. Mr. Thomson recommends a functional approach to nutrition education, as distinct from the currently adopted, rather traditional, methods. He has advised the setting up of a communications unit, and a well equipped mobile training team in the demonstration areas. He feels that a consultant will be required to create a systematic campaign out of all the methods of media, agencies and opportunities which exist.

Further Action Needed Based on Mr. Thomson’s Report and Discussion With Him

9. I feel that just at present, we may not need to communicate the findings of Mr. Thomson to the G0I. We should, however, find out from G0I whether and when they need Mr. Thomson to return. From this point of view, a letter or telex to Mr. Gordon suggesting that he explore the acceptability of Thomson’s return to Jakarta in August/September 1974 seems to be necessary.

10. Secondly, we must find out again through IBRD Jakarta, whether and when the G0I needs consultants (a) on the Food Technology Research Institute and (b) mass-communications to prepare component on nutrition education.

Cleared with and cc: Messrs. Berg, Zaidan, PNP
cc: Dr. Kanagaratnam/Mr. Baldwin, PNP
Mr. Gould, RAP
Mr. Jones, PNP (a/r)
Ms. Rusain, PNP
Div. Files

SV:dr

Indonesia/PNP
OUTGOING WIRE

TO: THOMSON
ACORNS, ROUNDHILL, OLD WOKING ROAD
SURREY

DATE: JULY 15, 1974 (549)
CLASS OF SERVICE: LT (ext. 549)

COUNTRY: ENGLAND

TEXT:
FOR EWEN THOMSON
REFER TELEPHONIC CONVERSATION WITH VENKIT STOP KINDLY CONFIRM AVAILABILITY FOR CONTINUING CONSULTANCY ON NUTRITION PROJECT COMPONENT IN INDONESIA FOR SIX TO SEVEN WEEKS FROM AUGUST 26 STOP REGARDS

KANAGARATNAM

NOT TO BE TRANSMITTED

AUTHORIZED BY: Dr. K. Kanagaratnam
DEPT. Population and Nutrition Projects
SIGNATURE: (Signature of Individual Authorized to Approve)
REFERENCE: Indonesia/PNP

CLEARANCES AND COPY DISTRIBUTION:
Cleared with and cc: Miss Husain, PNP
66: Dr. Kanagaratnam/Mr. Baldwin, PNP
Mr. Berg, PNP
Mr. Zaidan, PNP
Mr. Kang, PNP - MRS. STONE-PERS.
Division Files

For Use By Communications Section

Checked for Dispatch:
FROM: DJAKARTA
July 11, 1974

987 VENKITARAMANAN
REUR 1211.

PRIMO - INTERMINISTERIAL DEGREE ON CREATION OF COORDINATING MACHINERY FOR IMPLEMENTATION OF NUTRITION PROJECT INCLUDING COMMITTEES AND SECRETARIAT IS BEING PROCESSED AT CABINET SECRETARIAT AND EXPECTED TO BE ISSUED SHORTLY.

SEGUNDO - MURSHID INFORMS THAT (AA) GOI DECIDED ON WEST LOMBOK ISLAND AND MADURA REPEAT MADURA IN PLACE OF BODJONEGORO AS TWO AREAS FOR THE NUTRITION DEMONSTRATION PROJECT. (BB) DR. MALASAN AND OTHERS SCHEDULED TO VISIT THE TWO AREAS LATE JULY TO COLLECT NECESSARY DATA.

TERTIO - MURSHID CONFIRMS AND WELCOMES THOMSONS AND OTHER CONSULTANTS VISIT END AUGUST. (AA) HE AGREES NEED FOR ONE CONSULTANT TO WORK ON FOOD TECHNOLOGY RESEARCH INSTITUTE COMPONENT. (BB) AS FOR MASS COMMUNICATION CONSULTANT, BOTH RANGANATHAN AND MURSHID FEELS THAT AMRITMAHAL COULD PERFORM THE TASK.

QUARTO - SUJOTO VISITING WORLD BANK JULY 15 - 25 FOR WATER PROJECT NEGOTIATIONS. YOU MAY CONTACT HIM DURING HIS WASHINGTON VISIT. REGARDS

KANG
TO: INTBAPRAD
JAKARTA
COUNTRY: INDONESIA
TEXT:

FOR KANG

AA) MR Ewen Thomson consultant population and nutrition project reports that project development for nutrition component of population project is proceeding satisfactorily. Stop Grateful you look into status of following:

ALPHA) ISSUE OF INSTRUCTIONS REGARDING THE CREATION OF COORDINATION MACHINERY FOR IMPLEMENTATION OF NUTRITION PROJECTS - IN PARTICULAR COMMA THE COMMITTEE TO BE SET UP TO SERVICE THE COUNCIL FOR PEOPLES WELFARE AND THE SECRETARIAT IN THE RAPPENAS STOP

BETA) DECISION ON AND STATE OF PREPARATION OF DATA REGARDING THE TWO AREAS CHOSEN FOR THE NUTRITION DEMONSTRATION PROJECT VIZ BOEJENAGARO IN EAST JAVA AND WEST LOMBOCK ISLAND STOP

BB) Thomson reports that Mr. Murshid and he had agreed that Mr. Thomson may visit Jakarta towards end August for a month to help finalize the outlines of the Nutrition Demonstration project stop Grateful you ascertain that Mr. Thomsons visit in August/September is convenient for GOI STOP

PAGE 2

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AUTHORIZED BY: Dr. K. Kanagaratnam
DEPT. Population and Nutrition Projects
SIGNATURE (Signature of Individual Authorized to Approve)
REFERENCE: Indonesia/PNP

CLEARANCES AND COPY DISTRIBUTION:

Cleared with and cc: Mr. Zaidan, PNP
cc: Dr. Kanagaratnam/Mr. Baldwin, PNP
Messrs: Berg, PNP
Gould, EAP
Jones, PNP (o/r)

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Checked for Dispatch:
THOMSON SUGGESTS THERE IS NEED FOR CONSULTANTS ON:

A) FOOD TECHNOLOGY RESEARCH INSTITUTE COMPONENT

B) MASS COMMUNICATIONS EXPERTISE TO BUILD UP A RELEVANT NUTRITIONAL EDUCATION CAMPAIGN

KINDLY ASCERTAIN FROM MURSHID/SUJOTO THE POSITION REGARDING THESE SO THAT WE CAN PROCEED TO IDENTIFY SUITABLE PERSONNEL

REGARDS

VENKITARARAMANAN

NOT TO BE TRANSMITTED

AUTHORIZED BY:

Dr. K. Kanagaratnam

DEPT.
Population and Nutrition Projects

SIGNATURE

REFERENCE:
Indonesia/PNP

CLEARANCES AND COPY DISTRIBUTION:
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c: Dr. Kanagaratnam/Mr. Baldwin, PNP
Messes: Berg, PNP
Gould, EAP
Jones, PNP (o/r)

SV:dr

For Use By Communications Section

Checked for Dispatch
From: Jakarta

June 18, 1974

Distribution: Population Projects

Mr. Sandberg

867 Venkataramanan Copy Kanagaratnam, Berg

RE: NUTRITION PROJECT DEVELOPMENT

AAA - COPY THOMSONS PAPER WITH JONES, TASKFORCE IS CONCENTRATING ON PROJECT COMPONENTS OF GUIDELINE. POINTS IN THOMSONS PAPER WERE CONSIDERED JUNE 14 WHEN INTER-MINISTERIAL DEGREE UNDER DISCUSSION BY GOI. ACCEPTABLE ASPECTS OF PROPOSALS HAVE BEEN INTEGRATED WITH EXISTING FRAMEWORK. MURSHID EXPECTS DEGREE WILL ISSUE THIS WEEK.

BBB - TASK FORCE MET JUNE 17 WITH SUJOTO IN ATTENDANCE. AGREEMENT REACHED ON TERMS OF REFERENCE FOR EACH OF SIX COMMITTEES. CHAIRMEN OF COMMITTEES WILL MEET EACH MONDAY. NEXT MEETING TASK FORCE JULY 22 AFTER NATIONAL NUTRITION CONFERENCE JULY 16-19.

CCC - THOMSONS FIELD TRIP TO EAST JAVA AND LOMBOK COMPLETED JUNE 16. PRELIMINARY REPORT GIVEN TO TASK FORCE RECOMMENDING WEST LOMBOK AND BOJONEGORO (EAST JAVA) REGIONIES FOR DEMONSTRATION PROJECT. MASALAN DESIGNATED IN CHARGE PLANNING FOR DEMONSTRATION PROJECT.

DDD - THOMSON DUE ARRIVE WASHINGTON JUNE 24. GRATEFUL RESERVE ACCOMMODATION DUTCH INN GEORGE TOWN. REGARDS

THOMSON, RANGANATHAN
Introduction

1. In accordance with the terms of reference dated April 12, 1974, I visited Indonesia from April 29 to May 11, 1974. I met with a number of representatives of the Government of Indonesia and staff of UNICEF. Dr. K. V. Ranganathan of the Resident Staff participated in almost all the meetings and his wealth of information and continuing access to the highest decision-making levels in Indonesian Government were of the greatest assistance to me. Mr. Ewen Thomson, Consultant, also was at Jakarta during the last few days of my stay. Mr. Thomson and I discussed the results of my talks with various Government of Indonesia officials so that Mr. Thomson could continue from where I left off.

Summary of Findings and Recommendation

2. (a) The Government of Indonesia's interest in the development of a nutrition project for IDA financing continues to be keen. However, concrete steps have not so far been taken in regard to the finalization of the detailed outlines of the project. During my stay, the Task Force, which had already met once or twice, was reorganized, and held its first effective meeting. This meeting, under the chairmanship of Mr. Murshid (Special Assistant to the Deputy Chairman, BAPPENAS), was conducted in a business-like manner and can be considered to have set up procedural and operational guidelines which justify hopes of completing a fairly detailed project outline by October 1974. Certain time targets have been set by the Task Force in regard to the preparation of the project ready for appraisal by September-October 1974.

(b) While the Government of Indonesia is against the setting up of a coordinating body exclusively for nutrition, it is willing to consider the establishment of a separate secretariat and a committee for that purpose under the National Council for People's Welfare (already established). This appears to be a satisfactory compromise at this stage. We have to urge the early setting up of this secretariat as well as the establishment of a suitable core-staff in BAPPENAS to deal with nutrition.

(c) GOI's present thinking is in favor of developing a discrete and separate institute for food technology research -- distinct from, but working together with, the Institute of Nutrition at Bogor. In view of the difference in technical skills, approach, and organizational arrangements needed for research in food technology as compared to nutrition, I would recommend that GOI's views be accepted. There is a need to assign suitable consultants to assist GOI in the finalization of the project for the Institute of Research on Nutrition as well as Food Technology.
(d) As regards the choice of the location of the nutrition demonstration project, GOI's preference seems to be Central Java, although a final decision is still to be made. It is recommended that the nutrition demonstration under preparation take into consideration:

(i) the recent evaluation of A.N.P. (Applied Nutrition Program);

(ii) the features of the Young Human Resources Development Program evolved by GOI and UNICEF; and

(iii) the experience in regard to the Child Day Care Center in Jakarta. I would also recommend that suitable expertise in mass-communication techniques be made available to GOI for finalizing the details of the nutrition education program.

(e) While GOI is concerned about the political problems which may arise as a result of intervention among small salt producers while taking up a salt-iodization program, it continues to be keenly interested in its early actualization. We have to await the detailed outlines of the project now being prepared. I would recommend that suitable consultants be provided even at the stage of finalization of the project (i) in regard to salt-iodization both in the small- and large-scale sectors and (ii) in regard to salt fortification in general.

General Background

3. (a) Repelita II — BAPPENAS officials have, just now, finished the drafting work on the Second Five-Year Plan (Repelita II). The chapters in Repelita II on nutrition and health as well as on food and agriculture spell out the broad outlines of the national policy and plan for nutrition. It is within the broad confines of this policy-frame that GOI expects to work out the project which is to be financed by IDA. There is no likelihood of any conflict between the project under preparation and the policy statement in the Repelita inasmuch as the Repelita is in sufficiently general terms for us to fit in the contours of the nutrition project contemplated in the draft guidelines of March 25, 1974.

(b) Evaluation of the Applied Nutrition Program — Considerable importance is attached by BAPPENAS and Health Ministry officials to the already completed evaluation of the Applied Nutrition Program undertaken with the joint support of the UNICEF and GOI. While we could not get access to the final version of the report, we understood from conservations with BAPPENAS and UNICEF officials that the thrust of the report is towards a newer version of the Applied Nutrition Program which is administered by the Ministry of Health. The emphasis is to be on the involvement of local volunteer groups and village community organizations in the process of nutrition-education. The evaluation report is also stated to have emphasized the need to concentrate on the lower-income families, the landless and the poorer landowners.

Policymakers, both in the BAPPENAS and the Ministry of Health, indicated that A.N.P. is to be extended to the whole country. That is to say, representative areas in every district in the country will be brought
within the purview of A.N.P. My recommendation is that in the event of such a decision being taken, the proposed nutrition demonstration project should take up some of its intervention programs in and around a few A.N.P. locations so as to test out the usefulness of the "Applied Nutrition" concept.

(c) Young Human Resources Development Program — Another aspect of BAPPENAS' approach to the nutrition project is the inter-relationship of the latter with the Young Human Resources Development program worked out by BAPPENAS in concert with UNICEF. This program proposes a multilateral restructuring of the country's activities for the mental and physical development of the children. Integrated development of the child is to receive considerable attention in this program. The program visualizes the utilization of various volunteer agencies, such as the Butsi volunteers (the Youth Corps), the Pramukas (the Scouts) and the women's voluntary associations, especially the organizations of the wives of Government officials who are a potentially powerful group.

Coordination

4. The new emphasis on programs of social welfare including nutrition is highlighted by the importance attached to the periodical meetings of the Council for Peoples' Welfare. The special attention given to the council by the Minister of State for Peoples' Welfare, and the participation of the President himself in two of the meetings of the council have led the BAPPENAS to argue against the creation of additional national entities specifically for the purpose of coordination of nutrition programs. In particular, the creation of a separate Nutrition Board is viewed with disfavor in the light of the failure of the earlier Food and Nutrition Board in the Ministry of Agriculture (Pertanian), which was set up on the advice of FAO. BAPPENAS officials, however, agreed that there may be justification to set up a committee of coordination to serve the national council for Peoples' Welfare in respect to nutrition-related matters. Dr. Dradjat, Director-General in the Ministry of Health, indicated that such a committee might be set up and that he himself might chair this committee.

5. BAPPENAS and the Ministry of Health recognize the need for a compact secretariat to help the activity of coordination. Indeed, one of the first priorities for the Task Force is to define clearly the function of coordination. Once this is done, GOI has to identify an acceptable group of Indonesians of the right background to organize this secretariat. BAPPENAS is aware of this and engaged in the task of selecting suitable persons.

6. BAPPENAS itself lacks adequate manpower to concentrate on this vital subject. We have suggested to Mr. Sujoto, Deputy Chairman of BAPPENAS, that it is desirable and necessary to employ one or two Indonesians with the right aptitude and background to help BAPPENAS in this task. It is my view that the establishment of core-staff in BAPPENAS for the purpose is a condition precedent to the success of the proposed project.
Strengthening of Research Capability

7. Discussions with officials of the Directorate of Nutrition, the Institute of Nutrition at Bogor and BAPPENAS, convinced us that the component of the project relating to research is getting clearly defined. Further development of the Institute of Nutrition at Bogor offers a number of advantages from the point of view of long-term planning and implementation of nutrition programs in Indonesia. GOI is thinking in terms of locating training for nutritional-planning also at the Institute of Nutrition at Bogor. The presence of the Agricultural University at Bogor itself will help the reorganized and expanded Institute of Nutrition to draw on the services of a well-trained team of agroeconomists and agronomists as well. I believe that it will be necessary to assign one or two suitable consultants to work with the Institute of Nutrition on the plans for expansion. The need for this has been emphasized in earlier reports and BAPPENAS officials appear to agree on this. The choice of consultants and timing of their visits may await the results of Mr. Thomson's discussions.

Food Technology Research

8. GOI's thinking seems to be converging towards the creation of a separate Institute for Food Technology rather than as part of the Institute of Nutrition Research. The officials of BAPPENAS and the Health Ministry as well as the Ministry of Industry are particularly of this view.

9. I agree with this view. The approach to food technology research, while closely related to nutrition, has to be different from that of nutrition research. Food technology research concerns problems of design of machinery, process control costing, and market testing which are, normally, not areas within the competence of nutrition researchers. The mix of scientific disciplines which goes into food technology research is quite different from nutrition research. Besides, the controlling influence of the Ministry of Health on the proposed Food Technology Institute as part of a Nutrition Research Institute is likely to be more of a constraint than a help. Taking these factors into consideration, it seems best to start work on the creation of a separate Institute of Research for Food Technology. Problems of shortage of personnel are no doubt there. These have to be solved by an appropriate training program and induction of foreign experts, wherever necessary. Suitable consultants can be brought in from the planning stage itself.

10. It remains to be seen, however, as to how exactly the subgroups to be set up by the proposed Task Force to resolve the problems of coordination between two institutes, and the shortage of personnel. One suggestion made by me to the GOI is the establishment of separate autonomous governing bodies with a few common members for the Institute of Food Technology as well as for the Institute of Nutrition.

Organization of Research

11. One important aspect relating to research arises from the recent attempt of the GOI to rationalize the administrative arrangements for scientific research. It is understood that the Minister for Research has
a proposal to bring all research institutions under the control of his Ministry. This proposal for administrative reorganization is still under the consideration of concerned Ministries. Whether the Minister for Research will ultimately succeed in the attempt to transfer all research units to his unified control is not clear at this stage. Dr. Djat, even with these plans, appeared confident that there is likely to be no change of administrative arrangement so far as the Ministerial control of Nutrition Research Institute is concerned. This proposal need not, therefore, affect the preparation of the project.

Nutrition Demonstration Project

12. The identification of a suitable area for locating the Nutrition Demonstration Project and specification of its likely subcomponents has not yet been completed. A number of ideas are being considered. In this context, the final recommendation of the WHO mission consisting of Dr. Scrimshaw, Dr. Levinson, et al., who visited Indonesia in January 1974 is being awaited with much interest. BAPPENAS and Health Ministry officials have already been guided, to some extent, by their earlier discussions with this team in regard to the contours of a likely nutrition intervention project.

13. The preferred location for the project in the minds of GOI officials is Central Java. Needless to say, the Task Force, as well as other officials of the BAPPENAS, recognize the importance of involving the Ministry of Interior and the local administration in the decision on both the location and the components. We emphasized to GOI officials the importance of spelling out the criteria for selection of the area on as objective a basis as possible. We also stressed the need for indicating a clear line of administrative command, to ensure that the program works efficiently. I have also emphasized to the GOI officials, the urgency of consulting the officials of the Ministry of Interior in regard to the location of the project so that the outlines of the proposed activities can be clearly defined.

Urban Component of the Nutrition Demonstration Project

14. GOI attaches considerable importance to the working of what is known as the Karang Balita — Children's Welfare Program — in Jakarta. This program, initiated by the energetic Governor of Jakarta, has just commenced over the last year or so. We visited one of these centers. Karang Balita appears to incorporate the nutrition rehabilitation model. The slum children with a high degree of malnutrition are identified and brought to the Karang Balita which is located near a health center. The rehabilitation center is staffed by a pediatrician, a nurse, as well as a nutritionist besides helpers. The mothers come and stay during the day. The cost per child per day comes to about Rp. 105 (US$0.25), a relatively high figure, implicit in the concept of nutritional rehabilitation. If we are to think of a component of this nature in the Bank project, we will have to scrutinize the high cost elements more carefully. We have indicated the important issues arising in this concept for further consideration by Mr. Thomson and advice to the Task Force.

15. Some of these are:

(a) The period of time for which the children at risk are kept at the center.
(b) The composition, cost and availability of the food which the center supplies to the children.

(c) The arrangements for ensuring that relapse to II and III degree malnutrition does not occur, and if it does, is monitored.

(d) The prospects of the families continuing to provide adequate food to the children when at home.

16. One of the good features of Karang Balita is that it transcends the normal "nutritional rehabilitation" concept and concerns itself with integrated child welfare. It also uses the Red Cross volunteers as well as other voluntary agencies. These features are worthy of consideration in the nutrition demonstration project.

The Role of Nutrition Education in the Nutrition Demonstration Project (N.D.P.)

17. During our discussions, we emphasized the role of nutrition education in the N.D.P. This has been accepted by the BAPPENAS planners as well as by Kesahatan, the Ministry of Health. The use of mass communication media such as radio and the film is vital in this regard. GOI's approach, which emphasizes the role of face-to-face communication, utilizing local volunteer organizations, needs to be respected. At the same time, there is need for involving expert mass communication agencies in developing the nutrition education campaign using various mass media and in evaluating its response. From this point of view, it would, in my opinion, be useful to assign an expert in mass communication techniques to advise GOI authorities on the formulation and implementation of nutrition education programs.

Fortification, in particular, Iodization of Salt

18. While there is considerable interest in solving the problems of goitre and cretinism, the approach towards iodization seems somewhat hesitant because of the technical problems anticipated in iodizing the salt produced in small salt factories and the political problems involved in introducing a measure of compulsion among the decentralized salt producers. The technical problems, as have been clarified to GOI, are not insurmountable. A UNICEF expert, Mr. Cyril HoneyMoon, is available and UNICEF is willing to send him, when GOI asks for him. Once the technical problems of iodization are sorted out, the organizational problem of grouping small salt factories into cooperatives for ensuring economic iodization have to be solved. The problems of marketing iodized salt, which is sold through a decentralized network have also to be tackled. The sub-committee of the Task Force is aware of these problems and is getting ready a detailed plan of action for which political approval has to be obtained.

19. The fairly large salt factory at B.N. Garam, Madura, which is state-owned, and the single largest source of salt supply to Sumatra, offers an easy and straightforward solution so far as Sumatran consumers are concerned. Here, however, there may be a conflict of priorities. It is understood that GOI has been having negotiations with certain Dutch private industrial groups for converting this factory, at least partly, in the immediate future,
to production of industrial salt. If this is decided on, one easy avenue of ensuring supply of iodized salt to Sumatra will be closed. It is my recommendation that the intentions of GOI in this matter should be ascertained. If the B.N. Garam salt-works will continue to produce edible salts, for the next ten years, at least, a project component for salt-iodization in Madura should be worked out.

20. There is no clear indication of interest yet regarding fortification of salt with Fe/vitamin A. Regarding Fe fortification, we have suggested to the GOI the possibility that either one of the workers from Bogor visit India or a consultant be called in to advise. As for vitamin A fortification, there has to be an appraisal of various techniques available in the Indonesian context. A salt fortification consultant with specific experience in vitamin A fortification has to be brought in.

Time Schedule

21. The reorganized Task Force, which met under the chairmanship of Mr. Murshid during my stay consists of representatives of the Ministries of Health, Agriculture and Industry. Mr. Murshid himself belongs to BAPPENAS. The Task Force decided to meet again within a week or so and then divide itself into a number of subgroups. The subgroups are to be set up so as to concentrate on specific components of the project. Certain broad time schedules were also drawn up, with the objective of completing the preparation of a project by October 1974. The Task Force decided to have a project ready for appraisal by September or October 1974.

22. I had detailed discussions with Mr. Ewen Thomson, who arrived in Jakarta during the last phase of my stay in Indonesia. He and I visited Mr. Sujoto, Deputy Chairman of BAPPENAS, as well as Dr. Dradjat. Mr. Thomson is expected to assist the GOI and the Task Force in finalizing the project by the scheduled dates.

Cleared w/and cc: Messrs. Berg, Zaidan, PNP
cc: Messrs. van der Tak (3), PAS
Baldwin, PNP
Gould, EAP
Jones, PNP
Kang, PNP
Lerdau, Asia Proj.
Bravo, Info & Public Affairs
Dr. Ranganathan, IBRD, Jakarta
Mr. Thomson, PNP Consultant

Svenkitaramanan:dr/cj

Indonesia/PNP
OUTGOING WIRE

TO: INTBAFRAD
   JAKARTA

DATE: JUNE 7, 1974

CLASS OF SERVICE: TELEX

COUNTRY: INDONESIA

TEXT:

Cable No.: ALPHA

FOR RANGANATHAN AND JONES

WE HAVE DISCUSSED URTEL 793 AND REQUEST COPY OF THOMSONS PAPER REFER CCC THEREIN AT THIS STAGE WE HAVE ONE MAJOR CONCERN RE ITEMS THREE AND FOUR COMMA WE REQUEST THAT IN YOUR DISCUSSIONS WITH GOI YOU KEEP IN MIND NEED TO FOCUS CLEARLY ON ALREADY INDICATED PROJECT COMPONENTS VIDE GUIDELINE OF MARCH 74 STOP WE WOULD NOT WANT THAT AS A RESULT OF THOMSON PAPER ATTENTION BE DIFFUSED BY FOR EXAMPLE INTRODUCTION OF NEW INTERMINISTERIAL CONFLICTS THROUGH PROJECT STOP IT IS IMPORTANT TO PROCEED WITH PROJECT PREPARATION QUICKLY AND FOR THIS INTEGRATION OF PROPOSED ASPECTS WITH EXISTING FRAMEWORK OF PROJECT VITAL

BETA

REGARDING GHASSEMI HE WILL START HIS ASSIGNMENT LATE AUGUST OR EARLY SEPTEMBER SINCE HE IS NOT AVAILABLE BEFORE THAT TIME REGARDS

VENKITARAMANAN

NOT TO BE TRANSMITTED

AUTHORIZED BY: K. Kanagaratnam

DEPT: Population and Nutrition Projects

SIGNATURE: (Signature of individual authorized to approve)

REFERENCE: INDONESIA/PNP SVenkitaramanan/ GZaidan/rb

CLEARANCES AND COPY DISTRIBUTION:
Cleared with and cc: Mr. Zaidan
cc: Dr. Kanagaratnam/Mr. Baldwin
   Mr. Berg
   Mr. Gould
   Div. Files

For Use By Communications Section

Checked for Dispatch.
FROM: DJAKARTA
June 6, 1974

793 ZAIDAN

REUTRX S29 NUTRITION PROJECT DEVELOPMENT AND FURTHER MYTX 705.

AAA RE TASK FORCE. SECOND MEETING TASK FORCE HELD JUNE FIRST
WHEN REPORTS RECEIVED FROM SIX COMMITTEES. (1) POLICY STATEMENT
IS AWAITING CLARIFICATION OF IDEAS OF OTHER COMMITTEES (2)
FOOD TECHNOLOGICAL PROPOSALS INCLUDE AGRICULTURAL PRODUCT
PROCESSING LABORATORY AND DEVELOPMENT OF FOOD PROCESSING,
PRESERVATION, STORAGE, NEW PRODUCTS AND SENSORY EVALUATION
(3) NUTRITION RESEARCH PROPOSALS WERE EXPANSIVE AND REQUEST WAS
MADE FOR TECHNICAL ASSISTANCE (A) PROVISION OF CONSULTANT FOR
RESEARCH INSTITUTIONS AND (B) VISIT OF LOCAL STAFF TO ESTABLISHED
INSTITUTE OF EXCELLENCE. RE CONSULTANT GRATEFUL YOU PURSUE
VISIT BY GLASSEMI SOONEST AND RE VISITS PROPOSED TO PLAY DOWN
AS USEFULNESS DUBIOUS DURING PROJECT PREPARATORY STAGE. (4)
PROGRESS REGARDING FORTIFICATION PROPOSALS HELD UP FOR LACK
OF INDUSTRIAL ADVICE ON SALT WHICH SHOULD BE FORTHCOMING SHORTLY
(5) TRAINING CONSIDERED AT MANY LEVELS BUT THERE IS NEED TO
KNOW SPECIALIST REQUIREMENTS AS REVEALED BY WORK OF OTHER
COMMITTEES. MEETING OF ALL COMMITTEE CHAIRMEN ARRANGED FOR JUNE
8 PARTICULARLY TO ASSIST CHAIRMEN COMMITTEES POLICY AND TRAIN-
ing. REPRESENTATIVE MINISTRY OF INTERIOR JOINED TASK FORCE WHICH
IS IMPORTANT IN RELATION TO DELEGATION OF RESPONSIBILITY TO
PROVINCIAL GOVERNORS, NEXT MEETING TASK FORCE JUNE 17.

BBB DEMONSTRATION PROJECT. THOMSON ATTENDED THREE MEETINGS
DEMONSTRATION PROJECT COMMITTEE. PAPER ON NUTRITION DEMONSTA-
RATION PROJECT DISTRIBUTED TO COMMITTEE MEMBERS AND ACTION PROCEEDS
ACCORDING TO ITS PROPOSALS. THOMSON VISITED SURABAYA AND BLITAR
AND MET EAST JAVA PROVINCIAL NUTRITION COMMITTEE, BLITAR
KABUPATEN NUTRITION COMMITTEE AND ONE KACAMATAN COMMITTEE. ALSO
Saw examples which indicated many activities undertaken but
effective action lacking. Thomson impressed by local awareness
that there are nutrition problems but awareness coupled with
confused thinking about causes and interventions. Interest
strongly expressed about possible integrated action. Best
prospects seem to be in building on what has been started hence
selected regioncies should have ongoing amp activities.
Thomson leaves on June 6 with demonstration project committee
to visit four regioncies in Tuban, East Java and Lombok to select
two for demonstration. Preliminary field investigations likely
to reveal gaps in knowledge which could inhibit or hinder
planning.

Thomson considers certain essential aspects of a national
nutrition program not adequately covered as yet namely (1)
program planning and evaluation (2) future provision of scientific
and technical information and advice (3) social communications
(4) nutritional aspects of food production (5) integration of
a nutrition component into national planning. Thomson has
prepared paper for Murshid on these aspects which may be inte-
grated with existing project components. Inter-ministerial
decree re governmental organization for the program not yet
issued and there is hope points from paper may be embodied in
decree.

As committee work now proceeds expectation for completion proposal
now late fall. Regards

Thomson, Jones, Ranganathan
You will visit Jakarta from about June 1. Ms. Jones will stay for about 10 days and Mr. Mills for about 14 days. You will work together with Dr. Rangathan and other members of the Resident Staff, as required. You should also contact the representatives of other multilateral and bilateral donor agencies as appropriate. Local travel may be undertaken as necessary.

2. The principal objectives of the mission are to assess what progress is being made with credit 300-ID, and with preparations for a second population/nutrition credit.

3. More particularly, Mr. Jones will:
   a) review progress made with preparation for the second population credit;
   b) ascertain whether a nutrition task force has been established and what progress Mr. Thomson has been able to make with preparation for an administrative structure for policy and operations, and for research;
   c) ascertain the present situation with respect to vehicle procurement; and
   d) obtain data needed to update project costs to produce revised expenditure and disbursement schedules.

4. Mr. Mills should ascertain progress being made with the civil works component of credit 300-ID, and more particularly will:
   a) obtain data needed to update the cost of civil works included in the project, in order to produce revised expenditure and disbursement schedules;
   b) assess the current validity of the construction timetable dated November 14, 1973, and if, as is thought likely, it is behind schedule, ascertain the reasons therefore and suggest how it might be brought up-to-date and maintained; and
   c) ascertain the role of the Public Works Department in the construction of project facilities, particularly in respect of constant on-site supervision.
5. You will liaise with Mr. Michael Gould of East Asia and Pacific Department who will be in Jakarta during your visit.

6. On your return, you will prepare a brief Back-to-Office report summarizing the findings and conclusions of your mission.

HJones/dlf

Cleared with and cc: Mr. Gould, East Asia & Pacific
cc: Mr. Baldwin, FIP
Mr. Berg, FIP
Mr. Zaidan, FIP
Mr. Kang, FIP
Mr. Burfield, FIP
Dr. Ranganathan, (Jakarta)
Mr. van der Tak, Office - V.P., Projects Staff
Mr. Loerdau, Assistant Director Projects - Asia
Messrs. Bennett/Hakim, Controller's
Division Files

300-IND/FNP
FROM: DJAKARTA
May 20, 1974

705 HUM JONES

RE: UNRIDA NUTRITION PROJECT DEVELOPMENT

THOMSON HAD MEETINGS WITH SUIITO, DRADJAD AND STAFF, KARYADI,
BANK AGRICULTURAL STAFF AND INTERNATIONAL AGENCIES. MAY 16

MURSHID REQUESTED THOMSON PREPARE PAPER ON GOVERNMENTAL ORGANIZATION AND COORDINATION: PAPER HANDED OVER MORNING MAY 16 MURSHID TO DISCUSS WITH MINISTER AFTERNOON MAY 16. GOVERNMENTAL ORGANIZATION FOR NUTRITION PROGRAM BEING DEALT WITH AT HIGHER LEVEL THAN TASK FORCE. JOINT INTERMINISTERIAL DECREE EXPECTED TO ISSUE BEFORE END OF MAY. COUNCIL FOR PEOPLES WELFARE LIKELY COORDINATING BODY WITH ADEQUATE SUPPORT. TASK FORCE MET FOR 4 HOURS MAY 16. SIX SUB-COMMITTEES AND CHAIRMEN APPOINTED AS FOLLOWS (1) FOR INVENTORY OF CURRENT AND PAST NUTRITIONAL ACTIVITIES AND POLICY STATEMENTS CHAIRMAN SUPARDAN, (2) FOR FOOD TECHNOLOGY CHAIRMAN WIRJOWAN, (3) FOR RESEARCH CHAIRMAN DARWIN KARYADI,
(4) FOR NUTRITION DEMONSTRATION PROJECT CHAIRMAN MALASAN, (5) FOR FOOD FORTIFICATION CHAIRMAN BERNI KODIYAT, (6) FOR TRAINING
CHAIRMAN WIRJOWAN. DEMONSTRATION PROJECT COMMITTEE MEETS MORNING MAY 22 THOMSON IN ATTENDANCE. THEREAFTER THOMSON WILL VISIT PROPOSED ALTERNATIVE REGIONS IN CENTRAL AND EAST JAVA.

NEXT PLENARY SESSION TASK FORCE JUNE ONE WHEN COMMITTEES REQUIRED REPORT PROGRESS ON ALL ITEMS OF TERMS OF REFERENCE AND ON PROPOSED COURSES OF ACTION FOR COMING MONTHS. REGARDS

RAGANATHAN
May 13, 1974.

Mr. Saadillah Mursijd MPA
Staff Chusus Deputy II
Bappenas
Jakarta.

Dear Mr. Mursijd:

I am writing this letter to you in continuation
of the telephone conversation which we had on Saturday morning
(May 11, 1974). As requested by you I am sending hereunder the
terms of reference for Mr. Ewen Thomson who is consultant with
the World Bank for the preparation of the Nutrition Project.

Yours sincerely,

K.V. Ranganathan

cc: Dr. Dradjad Prawiranegara
Mr. Ewen Thomson, Consultant - PNP

K. Kanagaratnam, Director - PNP

Indonesia: Preparation for Nutrition Project - Terms of Reference

April 29, 1974

1. You will visit Indonesia for about six weeks from May 8, 1974. There you will meet with and assist Government officials in the preparation of a nutrition project suitable for IDA assistance. In Jakarta, you should maintain close contact with Dr. K.V. Ranganathan of the Bank Group’s Resident Staff. He will put you in touch with Mr. S. Venkittaranaman who will be in Jakarta for a few days at the start of your mission. Mr. Venkittaranaman is assisting the Government to establish a task force responsible for the preparation of the project.

2. More particularly, the objectives of your mission will be:

a) To assist the Government in determining the locus and type of organization best suited to develop and implement a national nutrition program. This would involve identifying the most suitable department of Government which could include a permanent core group responsible for the nutrition program, as well as the optimal size and composition of such a group. It would also require an assessment of the present nutrition research capability in Indonesia and assist the Government in determining how best this could be strengthened organizationally. Once this has been determined, another consultant will assist the Government in the technical details of project preparation for the research component.

b) To assist the Government in making preparations for a nutrition demonstration project using appropriate Government agencies in a selected regency (kabupaten). The demonstration would include several types of intervention, such as nutrition education, food supplementation, vitamin A mass prophylaxis, together with provision for basic data gathering and evaluation. The objective of the demonstration is not so much to demonstrate that the specific interventions work, but to show how a variety of interventions can be administratively coordinated in one program to improve the nutritional status of the most vulnerable groups - pregnant and lactating women and children up to the age of six years.

3. You should be guided in your approach by the draft terms of reference prepared for the nutrition task force, as they may be accepted by the Government.

4. You should liaise as required with the representatives of other multilateral agencies in Jakarta.
5. You may travel locally within Indonesia as required, but should first seek the prior clearance of the Director of the Resident Staff.

6. You will return to Washington by about June 24, for one week in order to write a brief account of your findings, conclusions, and the action expected to result from your consultancy.

HJones/dlf

Cleared with and cc: Mr. Gordon, Jakarta
Mr. Gould, East Asia & Pacific

cc: Mr. Baldwin, PNP (o/r)
Mr. Berg, PNP
Mr. Zaidan, PNP
Mr. Kang, PNP
Mr. Jones, PNP
Mr. Burfield, PNP
Mr. van der Tak, Office - V.P., Projects Staff
Dr. Ranganathan, Jakarta
Mr. Venkitaramanan, Jakarta
Division Files

Indonesia/PNP
FOR RANGANATHAN ONE REYRTEL 532 PROPOSED NUTRITION CREDIT.

WE FULLY UNDERSTAND SITUATION AND APPRECIATE YOUR ADVICE. WE HAVE GONE AHEAD IN SEARCH OF CONSULTANTS IN RESPONSE TO YOUR REQUESTS AND IN CONTEXT MY DISCUSSIONS WITH SUMARLIN ON PROJECT CONTENT. FROM PAST EXPERIENCE OUR ASSESSMENT IS THAT IT SEEMS UNLIKELY THAT PREPARATION WILL PROCEED AS AGREED WITH SUMARLIN UNLESS CONSULTANT ADVICE AVAILABLE SOON TO ACT AS CATALYST.

PLEASE IMPRESS ON INDONESIANS FOLLOWING:

ALPHA WHILST POLICY DECISION WILL CERTAINLY BE MADE BY GOI THOMSON WILL BE AVAILABLE TO GIVE EXPERT ADVICE AND CAN GET ON WITH TECHNICAL WORK ON DEMONSTRATION PROGRAM.

BETA TIMING OF VISIT IS GOVERNED BY AVAILABILITY AND OVERLAP WITH VENKIT AND SECOND CONSULTANT AND IT IS ONLY TWO WEEKS IN ADVANCE OF THAT INDICATED IN MY LETTER OF MARCH 25 TO SUMARLIN.

GAMMA IF OPPORTUNITY MISSED NOW IT WILL BE VERY DIFFICULT TO FIND ANOTHER CONSULTANT OF THOMSON’S CALIBER.
OUTGOING WIRE

TO: INTRAFRAD
   JAKARTA

DATE: APRIL 17, 1974

CLASS OF SERVICE: TELEX

COUNTRY: INDONESIA

TEXT:

DELTA CONSULTANTS ARE BEING MADE AVAILABLE AT BANK EXPENSE.
IN VIEW OF LIMITED TIME PLEASE ADVISE SUMARLIN'S REACTION SOONEST. THOMSON
IS NOW PLANNING TO LEAVE FOR WASHINGTON AND JAKARTA IN TWO WEEKS AND HE
REQUIRES EARLY INDICATION OF STATUS.

TWO UNICEF ADVISORS.

OUTLINED
UNFPA CONCURS IN APPROACH/IN PARA THREE IN MYTEL DATED MARCH 29. PLEASE
SEND COPIES FINAL AGREEMENT FOR RECORD.

REGARDS

KANAGARATNAM

NOT TO BE TRANSMITTED

AUTHORIZED BY:
K. Kanagaratnam

DEPT.
Population and Nutrition Projects Dept.

SIGNATURE
(SIGNATURE OF INDIVIDUAL AUTHORIZED TO APPROVE)

REFERENCE:
Indonesia/PNP

ORIGINAL (File Copy)

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CLEARANCES AND COPY DISTRIBUTION:
Cleared with and cc: Mr. Gould
               cc: Mr. Baldwin
               Mr. Berg
               Mr. Zaidan
               Mr. Jones
               Messrs. Bennett/ Hakin

For Use By Communications Section

Checked for Dispatch: 
Mr. S. Venkitaramanan

K. Kanagaratnam, Director - FNP

Terms of Reference - Operational Mission to Indonesia: Nutrition Project

1. You will visit Indonesia from April 29 for about two weeks. You will liaise closely with Dr. Ranganathan of the Resident Staff in Jakarta, and meet with representatives of multilateral agencies as necessary.

2. The objective of your mission is to assist the Indonesian Government in establishing a task force for the preparation of the proposed nutrition project. To this end you will:

   a. Discuss the composition of and terms of reference for the task force, as sent to H.E. Dr. J.B. Sumarlin on March 25, 1974;

   b. Ascertain what technical assistance is required. In this respect, you should note that arrangements are being made to make available a consultant to assist with overall nutrition planning, and the proposed demonstration program, and a second consultant to assist with the detailed planning of research institutions once the organizational problems have been resolved; and

   c. Assist the Government to prepare a detailed time schedule for the work of the task force.

3. On the completion of your mission you will prepare a brief back-to-office report.

HJones/dlf

Cleared with and cc: Mr. Gould, East Asia & Pacific
                   Mr. Baldwin, PNP
                   Mr. Berg, PNP
                   Mr. Zaidan, PNP
                   Mr. Kang, PNP
                   Mr. van der Tak, Office V.P. - Projects Staff
                   Mr. Lerdau, Assistant Projects Director - Asia
                   Mr. Burfield, PNP
                   Dr. Ranganathan, Jakarta
                   Division Files

Indonesia/FNP
March 29, 1974

Mrs. Elizabeth Sullivan
Field Consultant
American Foundation for
Overseas Blind, Inc.
Kotak Pos 31 SB/5G
Surabaya, Indonesia

Proposed Regency Demonstration Program

Dear Betsey:

It was very kind of you to send the material of the Vitamin A deficiency project in Indonesia. They include much useful information, particularly on the practical problems of field implementation. As the CDD project request stands at present, it includes a demonstration program in a typical regency. This would cover not only "traditional" interventions such as food supplementation and nutrition education, but others including needed changes of emphasis in agricultural programs, and specific interventions such as those required to combat blindness and goiter. The objective is not just to demonstrate that each intervention in itself is either possible or effective (in most cases we should, by now, know) but rather to test the feasibility of a wide-ranging program (for both rural and urban areas), effectively coordinated to meet specific targets, and capable of being evaluated.

There has been some talk about the suitability of a regency in Central Java for such a program. Others say that Central Java has had too many demonstrations and that a regency in another province would be a better choice - South Sumatera has been mentioned. With your field experience, I would be interested to have your reaction to this problem of location. The parameters of choice would include suitable population size, efficiency of regency administration, presence of malnutrition problems, and replicability.

Please give my best wishes to Bob and the Meltons. Thank you again for the papers.

With kind regards,

Yours sincerely,

Huw M. Jones
Population & Nutrition Projects Department

Cleared with and cc: Mr. Berg, PNP
cc: Dr. Kanagaratnam/Mr. Baldwin, PNP
Indonesia/PNP Mr. Zaidan (o/r), PNP
Division Files
March 28, 1974

Mr. Venkitaramanan
11 Crescent Avenue
Kesavaperumal Puram
Greensway Road
Madras 28
India

Indonesian Nutrition Project Guidelines

Dear Venkit:

As promised, I am attaching a copy of the guidelines for the Indonesian nutrition project task force which we have sent to Minister J.B. Sumarlin. You will see that we have restricted the number of components (or directions), to try and get the GOI to focus quickly and clearly on the essential elements. We have asked Ranga to advise Mr. Sujoto that the Bank would be able to provide two consultants. One would assist in resolving the organizational problems of a central management group, and the necessary institutional research capability. A second could help to prepare a detailed proposal for the latter, once the organizational situation has been determined.

Alan has also asked me to attach a copy of the Back-to-Office Report on his India mission, a subsequent letter to the Finance Ministry and project guidelines. These are for your personal background information in case you should have discussions with the DEA before your departure.

I hope that your personal problems are reaching a solution and look forward to hearing that you will be able to go to Jakarta - and come on to Washington later.

With best personal regards,

Yours sincerely,

Huw M. Jones
Population & Nutrition Projects Department

Attachments.
HJones/dlf
Cleared with and cc: Dr. Kanagaratnam and Mr. Berg, PNP
cc: Mr. Baldwin, PNP
Indonesia/PNP Mr. Zaidan (o/r), PNP Division Files
1. In accordance with terms of reference dated January 11, 1974, I visited Jakarta from January 20 to February 6. Whilst in Jakarta I worked closely with Dr. K.V. Ranganathan of the Resident Staff, and was joined by yourself from February 4-7.

2. This report is in three sections - a review of ongoing project activities; preparation for a second population project; and preparation for a nutrition project. The report which follows has been read and fully endorsed by Dr. Ranganathan. A Supervision Summary is attached.

A. POPULATION PROJECT 300-END

Project Description

3. Amount of Credit

| Amount withdraw as of February 28, 1974 | US$ 13,200,000 (IDA) |
| Amount irrevocably committed as of February 28, 1974 | US$ 13,200,000 (IDA) |
| Date of Credit Agreement | US$ 665,000 (IDA) |
| Effective Date | US$ 665,000 (IDA) |
| Closing Date | US$ 2,522,000 (IDA and UMPA) |
| Current Exchange Rate | April 20, 1972 |
| | November 2, 1972 |
| | June 30, 1975 |
| | US$ 1.00 - 115.5 Rupiah |
| | 1 Rupiah - US$ 0.00235 |

The project comprises:

A. The construction, equipping, furnishing and staffing of the following facilities:

(i) ten new schools to graduate a total of about 50 nurse-midwives and about 500 auxiliary-nurse midwives annually; and

(ii) six provincial training centers each for about 50 people, and ten sub-training centers, each for about 50 people, to provide in-service family planning training for personnel working in family planning.

B. The construction, equipping, furnishing and staffing of the following facilities to provide expanded opportunities for family planning services:

(i) about 250 rural maternal and child-health and family planning centers, ranging in size from about 100 m² to about 400 m²; and

(ii) about 30 urban maternal and child-health and family planning centers, ranging in size from about 100 m² to about 500 m².
C. The construction, equipping, furnishing and staffing for a demonstration field postpartum program in East Java, of about 40 such rural maternal and child-health and family planning centers in a region to be selected in consultation with the Association.

D. The construction, equipping and furnishing of:

(i) a national headquarters building in Jakarta for the NFPCB, for a total staff of about 125; and

(ii) six provincial headquarters buildings for the NFPCB, each for a total staff of about 40, at Surabaja, Semarang, Jogjakarta, Jakarta, Denpasar and Bandung.

E. The procurement of equipment and its utilization for the improvement of facilities for evaluation, demographic training and family planning research, at:

(i) NFPCB national and provincial headquarters;

(ii) Institute of Demography, Jakarta; and

(iii) Population Studies Center, Institute of Economic and Social Research, Jakarta.

F. The procurement of vehicles and spare parts, for personnel engaged in family planning activities, and of maintenance shop equipment.

G. The procurement and operation of mobile information units and other equipment to improve family planning communications media, techniques and services.

H. The establishment and maintenance in about ninety hospitals to be selected with the approval of the Association of hospital postpartum programs, to provide family planning information, education and services during and after pregnancy.

I. Employment of about 8,600 additional family planning field-workers (including supervisory staff) to improve motivation for family planning.

J. Preparation of curricula and other programs for the introduction on a national scale of education in the field of population.

K. The carrying out of such studies as the Borrower and the Association shall agree to be necessary for the proper planning, carrying out and evaluation of results, of the Project and of the population programs of the Borrower and the training of personnel for such purposes.

L. The establishment and operation of an adequate system of procurement and distribution of supplies necessary to implement the family planning program of the Borrower at the clinic and field operational level.
Summary and Conclusions

4. a) The national program, and with it the Joint Project, still faces management problems which are essentially caused by weakness of middle level executive staff. Problems of entrenched interest, weak communication between departments of the NFTCB, and failure to define the functions of implementing units adequately, exacerbate the situation. Routine problems at staff level are not dealt with effectively and expeditiously, leading to frustration, reluctance to assume responsibility and slow implementation. Financial procedures are the most common administrative bottleneck, but until the NFTCB staff show more competence in dealing with the present system, there is little hope that the Ministry of Finance and EPRA will consider any suggestions for their modification. Progress with the several components is spotty, and depends very much on the initiative of individuals and the ability of advisers to influence day-to-day administration. Disbursements remain slow, primarily because of delays in starting the construction program, and the problems resulting from the various Government orders concerning the import of vehicles.

b) The principal recommendations are that:

(i) the reorganization of the project management consultants' team to strengthen its managerial inputs be carried out as quickly as possible;

(ii) continuing pressure be put on the NFTCB to review and improve its staffing position; and

(iii) the sequence of bi-annual supervision missions is maintained.

Disbursements

5. a) To February 28, 1974, US$665,000 of the IDA credit had been disbursed, and the same amount from the UNFPA credit. In addition, a further US$1,251,000 has been irrevocably committed. A similar amount is committed from grant funds. Because of a large price increase between enquiring and firm order, the Government cancelled an irrevocable commitment for US$636,000 for 1,500 Vespa scooters, in January.

b) IDA Credit: Disbursements

<table>
<thead>
<tr>
<th>Item</th>
<th>Disbursed</th>
<th>Irrevocable Commitments</th>
</tr>
</thead>
<tbody>
<tr>
<td>I  Civil Works</td>
<td>-</td>
<td>400,000*</td>
</tr>
<tr>
<td>II Furniture &amp; Equipment</td>
<td>-</td>
<td>861,000</td>
</tr>
<tr>
<td>III Vehicles</td>
<td>109,000</td>
<td></td>
</tr>
<tr>
<td>IV Consultants, Experts and Overseas Training</td>
<td>413,000</td>
<td></td>
</tr>
<tr>
<td>V  Research and Surveys</td>
<td>163,000</td>
<td></td>
</tr>
<tr>
<td>VI Operating Costs</td>
<td>605,000</td>
<td>1,261,000</td>
</tr>
<tr>
<td>VII Unallocated</td>
<td></td>
<td></td>
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</tbody>
</table>

* Equipment for Mobile Information Vehicles.
6. In order to review progress made with the first population credit (300-IOD), and as an essential preliminary in determining the scope and content of a second credit, a series of component meetings was arranged by the Director of the PMU at the suggestion of the mission. They were attended by PMU staff, IFCB Bureau staff, consultants, and the staff of the implementing units. The meetings were well attended, bringing together, in some cases for the first time, senior staff responsible for project and program implementation. Not only was the exercise useful in identifying and discussing particular component problems, it also highlighted the major administrative problems facing the IFCB in the implementation of the national program.

7. The main points arising from the discussion of individual components were:

a) Field Worker Program

1) The Field Worker (FM) Program is run as a special project of the IFCB under the energetic direction of Mr. Soejati. By the end of November 1973, 5,116 field workers had been trained and were operational. An additional 1,025 group leaders, 127 supervisors, and 23 coordinators were also in position. The targets for the end of the current program year (March 31, 1974) were:

<table>
<thead>
<tr>
<th>Field Workers</th>
<th>Group Leaders</th>
<th>Supervisors</th>
<th>Coordinators</th>
</tr>
</thead>
<tbody>
<tr>
<td>6,696</td>
<td>1,435</td>
<td>138</td>
<td>23</td>
</tr>
</tbody>
</table>

It is doubtful whether the target of field workers will be achieved. The provinces of Jakarta, Yogyakarta and Bali have a full complement of field workers; West Java has 60% of its target (for the 1971-75 plan), Central Java 70%, and East Java 70%. Field workers are said to be responsible for about 60% of all new acceptors. A variety of hard books, leaflets, and flip charts have been produced and are in use.

11) The main problem facing the FM program is that of paying field workers an adequate salary. At present they are paid Rp. 4,000 per month and claim incentive payments for new acceptors. Of the Rp. 500 incentive now paid to each clinic, a field worker should receive Rp. 200 for all IUD acceptors, or 100 for an oral contraceptive acceptor, or Rp. 50 for a conventional method. The remainder goes to the clinic itself and other workers. No check is made by the Center on the distribution of the incentive by the clinic, and there are numerous complaints that field workers are not paid. The program chief had initiated discussions with BAPPENAS and the Ministry of Finance, and apparently obtained their concurrence to raise salaries to Rp. 5,000 and drop the incentive payments. The salaries of group leaders, supervisors, and coordinators would also be raised. A complication to the general salary problem was the fact that an increase of 400% in civil service salaries had been announced by the President.

b) An updated disbursement schedule is now being prepared.
but no instructions had been issued and there was no budgeting allowance for FY74/75. Teachers' salaries have been raised, however, and as the post of a teacher is permanent and full time, many field workers who had earlier been lured from the teaching profession by a higher salary, were now returning. In Yogyakarta alone, 30 field workers had recently resigned for this reason. To hold field workers, a salary of Rp. 7,500 per month was thought adequate, but EPPMEMS had resisted this increase. Field workers are temporary staff on two-year contracts and are not covered by general salary increases. For this reason also, their payment of salary is sporadic and uncertain. Payments to field workers in this fiscal year had been made only from April through October 1973; only 23% of the budgeted amount had been disbursed. Lack of receipt was holding up further payments. The general freeze on civil service recruitment, which has been a major policy of the COI for the last five years, militates against making field workers permanent staff.

iii) From calculations of the expected performance of field workers, the mission was of the opinion that more than half would actually lose money by the proposed raise to Rp. 5,000 and the loss of incentives. In attempting to retain and improve the status of field workers, the program chief suggested that instead of recruiting the 1,200 field workers together for FY74/75, the bureau would only recruit 200 and use the savings to pay higher salaries. The project would concentrate its efforts on re-training and improving follow-up, at the expense of motivation. Lack of transportation seriously hinders the mobility of field workers, - only 1,500 bicycles are in use. The position should improve with the delivery of 3,500 more bicycles provided by the project in March-April 1974.

iv) The discussion illustrated the rather ad hoc way in which the NFTCB bureaus work. Bureau chiefs have always been allowed to discuss matters with their opposite numbers in EPPMEMS and the Ministry of Finance, usually in advance of discussions within the Board itself. Vested interests and personal prestige have been built up, and the Deputy Chairman I faces considerable problems in instilling policy discipline within the Board. The operational and financial policy implications of the well intentioned proposals of the bureau chief had not been considered at higher levels of the NFTCB, before the EPPMEMS discussions.

v) For the record, the following incentives are also paid:

<table>
<thead>
<tr>
<th>Position</th>
<th>Incentive</th>
</tr>
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<tbody>
<tr>
<td>Provincial Governors</td>
<td>Rp. 100,000 per month</td>
</tr>
<tr>
<td>Regency Staff</td>
<td>Rp. 200,000 per annum</td>
</tr>
<tr>
<td>Canat</td>
<td>Rp. 1,000 per month</td>
</tr>
<tr>
<td>Lurah</td>
<td>Nothing</td>
</tr>
</tbody>
</table>

Receipts (SFD) covering the payment of Rp. 56 million disbursed for incentives in the current fiscal year are still outstanding. Exceptions to SFD financial procedures are being made to maintain the flow of incentives.

b) Paramedical Training

i) Discussion on this component elicited the somewhat surprising news that the AHS concept, upon which much of the project was built, had been
changed in favor of a community health nurse or PHX. The PHX concept evolved at a series of workshops held during 1973. A series of documents giving the job description of the new category of staff and the proposed curriculum were obtained from the Ministry of Health and are now being studied by Mr. Kannamthan to assess the implications of the change in the context of the development of the project. The final decision to establish the PHX was taken by the Secretary General of the Ministry of Health in November 1973. Whilst the Deputy Chairman II of the NFPC and his bureau chiefs seemed aware of the change, the Deputy Chairman I (also PIU Director) had not been kept in the picture. The operational and financial consequences of such a policy change appeared not to have been considered.

ii) The main reasons for the change are:

a) because peripheral health workers would have to work largely without supervision a professional worker was required; and

b) by adding one year to the training course, making it three years instead of two, the starting salary and professional prospects of the health worker are improved considerably.

iii) The para-medical education component is being pushed forward with some vigor. The new PHX status has been defined, and decreed, and a basic training curriculum prepared. The PHX curriculum comprises four semesters over two years in a training school followed by "on intern apprenticeship for six months in the community within the framework of preparing for service in a rural community or at a Public Health Center, and a further six months at a hospital preparing for hospital service". A supplementary program for the conversion of auxiliary nurses and auxiliary midwives has also been prepared. This lasts for one year and consists of 26 weeks of practical on-the-job training. The first such course is scheduled to start at Sidonjo on March 15, 1974, to produce staff for the demonstration field postpartum project at Kojarka. Because of the autonomy of each province in the operational aspects of health affairs, responsibility for running the course rests with the IHSS of East Java who receives only general technical direction from the Ministry of Health (in this case Bureau V) in Jakarta. The translation of the center's intentions into reality by the East Java authorities will have to be monitored carefully.

iv) In establishing the first supplementary course at Sidonjo, the familiar struggle between East Java and the center threatens to delay implementation. As conversion courses started, the center's original intention was to phase out PHC and PHN training, but East Java is not phasing out PHCs yet and has no PHNs. In consequence, PHNs will have to be recruited from Yogyakarta and East Java for training. This has produced interminable logistical problems which, at the time of the mission's visit, attempts were being made to solve. There was urgent need for domestic accommodation, teaching equipment and transport, at Sidonjo school as a result of the policy change.
v) There appeared to be some doubt as to whether the IIM school at Surabaja was to be built. The mission pointed to the need for close coordination with the IMF, particularly on the FCO so that the civil works time schedule was not affected. Responsible staff of the Ministry of Health later assured the mission that the Surabaja IIM school was required.

c) Family Planning Training

1) The mission was advised that two STC locational changes were required – from Sukoharjo to Gend, and from Tungsung to Pati. The Government was asked to advise IIM formally and to ensure that the decision was made known to the IMF immediately.

2) Mr. Arit Mahal, the training adviser, arrived for duty on 21 January. His first priority will be to help to resolve the question of which agency is responsible for managing the FP training centers.

d) Information and Communication (I and C)

1) A draft plan of action for I and C has been prepared for the national program for the period 1974/75. In addition, a plan of action has also been prepared and approved for the five-year period of the Joint Project. The latter provides the basis for one-year work programs and budgets. Budget estimates have been prepared for the next fiscal year – 1974/75.

2) Detailed plans have been drafted for a clearing house and documentation center. It is proposed to purchase a batch of documentation from the East-West Center in Hawaii. Equipment lists have been finalized and handed to the Logistics Bureau for procurement.

3) A draft agreement between the Government and UNESCO by which the latter would assist with a fellowship program was forwarded to UNESCO in August. By the time the mission’s departure, no confirmation had been received. This seriously delayed plans to send five people to a modular program for professional development at the East-West Center. The Government persuaded that until the agreement was concluded, advance funds could not be requested from IDA. At the last possible moment, UNESCO responded to frantic cables for authorization to accept the management of fellowships, and went even further by advancing the necessary funds. (As a last resort, the IIM had obtained financing from USARD which, in the event was not used.) The image of UNESCO is somewhat tarnished by its failure to expedite this and other agreements, and by the inability (because of internal procedures) of its representatives in Jakarta and Bangkok to speak with an authoritative voice. This concern is reflected in the strong wording used by Government in forwarding the latest agreement.

iv) The I and C bureau plans to send staff on study tours of three months duration to other countries such as India and Korea. Two of two will be sent – one from the IFTGB and one from the Ministry of Information.
v) Plans were being developed to produce and duplicate materials to provide software for the Mobile Information Units (MIU). The mission participated in the discussion of a draft request (prepared by Sakai, Eito, and Okura) to UNESCO to assist with the production of a 16mm film, slide strips, etc. Because of the weakness of the Information Ministry's FP unit, which should be the main implementing unit, the basic idea was to ask UNESCO to monitor the use of local production facilities and resources including those of the NTCE itself, but not to allow UNESCO to use its own production units and thus restrict the use of local knowledge and capabilities. As drafted, the agreement did not meet these objectives; in fact, it provided an administratively impractical scheme by which the NTCE, having put up the money, would be repaid in large part by UNESCO for its services. Other ways are being sought to produce the required materials. In the meantime, budget provision has been made for maintaining and operating the MIUs from September 1974 onwards, and a training program for operating staff has been drawn up.

vi) This component progresses reasonably well, but mainly because of the direction which comes from the adviser. It progresses despite the negative direction from the Deputy Chairman II and the Bureau Chief. Their efforts are directed towards maintaining the status quo and in this lies the seeds of difficult relationships with the Deputy Chairman I. The I and C bureau is still very much concerned with implementation, particularly in the production of materials. The interests implied by this are considerable. In addition, the adviser thinks that the Ministry of Information, which should be the implementing unit, is too weak to carry out the program (and the project). Planning of the 1974/75 budget was, however done with the cooperation of the Ministry. An agreement with UNESCO is being prepared by which UNESCO will recruit a communications adviser for the FP unit in the Ministry of Information and recruit other short-term consultants as provided in the project.

c) Civil Works Component

i) The mission was asked to note the program of the civil works component of the project. Preparations for 15 type D MCI/FP centers were the most central activity of the MIU. Working drawings and relevant documentation had been completed. The mission was able to have a set of drawings sent to Washington for consent. The temporary lack of a translator and non-availability of commercial translation services held up translation of the supporting documents for Bank consent. Activity on Mojokerto construction was then two months behind schedule according to the time schedule drawn up and agreed only last November. Drawings and documents were sent to Surabaja on February 1 and by February 21 the tendering process was to have been completed. The bids would be evaluated and announced by March 1.

ii) Of 351 sites, 323 have been approved on a 'first-stage' basis. Second-stage certificates, which depend on site surveys, are being scheduled
in parallel with the construction schedule. Most of the sites which have not yet been acquired are in Jakarta where land is difficult to find – particularly as someone (allegedly 1FA) insisted that 2,000 sq. meters of land be made available per MCH/FP center site. Of the ten sites required for STC, however, only one has been acquired under the 'first-stage' basis.

iii) The General Policy Statement was to be available by February 1 but has still not been received. The Master Plan was being reviewed in the PIU by the Project Management Consultants (PMC) and should have been available by mid-February; it has not been received.

iv) There were complaints by the Project Construction Coordinator (PCC) and the PMC of the work of the Appointed Architect (AA) – that he lacked coordination in producing detailed drawing designs, resulting in errors which took time to rectify. Step of the PMC has been spending three days a week in Bandung helping the AA. The AA has other work, and was not properly organized to deal with the Joint Project. Step reported that in November the AA had made staff changes and that his performance had improved. It was still not satisfactory, however. It appears that planning data is inadequate, but the PMC reported that the AA is incapable of adequately expressing and pressing for his requirements.

v) The PCC and PIU complained that the AA/NFPCB contract was not strong enough and had no sanctions, except with respect to the final payment (section 3.03 (xii) of the NFPCB/AA contract). The PCC had held up payments to force the pace but this had had little effect. The move was, in any case, illegal and the PIU did not want to repeat it. Neither the PCC nor the PMC had seen the time schedule referred to in Appendix 3 CH 3 in the contract, until the mission asked for a search and it was produced. It was discovered that it had never been signed by the NFPCB and was in any case, clearly outdated. The mission suggested that the latest time schedule dated November 24, 1973, be formally substituted.

vi) The mission was unable to find out whether the PCC or AA had collected cost data and information on probable escalation trends. This information was requested but not supplied.

f) Population Education

i) Dr. Kandau of the Ministry of Education, and in charge of implementation of the Population Education component, outlined the progress made thus far and drew the NFPCB’s attention to major handicaps. Training sessions to develop ‘critical mass’ of teachers have been held, as well as workshops to complete instructional materials and training packages.

ii) The problem of lack of staff, transport, office equipment caused by the shift of responsibility from the IPP to a new family planning unit in the Ministry of Education have still not been satisfactorily resolved. They are surrounded by the difficulties of getting money from the NFPCB. Dr. Kandau complained of the difficulties of coordinating activities with the
Hospital Post-Natal Program

1) There was also reports of inadequate definitions of responsibility and of lack of funds during discussions of this component. The Ministry of Health is the responsible implementing unit but the doctor in charge (Dr. Probajo) was clearly ineffective and pre-occupied with other matters. Whilst the program appears to be functioning in relation to the 26 original hospitals, little, apart from payment of honoraria to doctors, appears to have been done in respect to the additional 36 hospitals. No reports were being received from these 36 hospitals, no supervision visits had been made, no follow-up directives have been issued, no paramedical training had been done, and no manuals have been prepared. The Ministry's reaction was to blame the NPPCB for dealing directly with the hospitals, both by passing money directly to hospitals, and by instructing them to report directly to the NPPCB's Reporting and Recording Bureau. To complaints that honoraria had been paid to doctors only from April through October 1973, the NPPCB countered that as receipts had not been received no further funds could be made available. Ministry officials said they could do nothing until they knew details of payments.

ii) The weakness of the Ministry of Health staff, however, was very noticeable, and the mission was assured that the Director General, Dr. Soebagto, would pay personal attention to the implementation of this component. Within a few days of the discussion, Dr. Probajo was sent to East Java on a supervision visit, and a replacement for him was scheduled to be in office by April 1. On the other hand, the financial and operational control exercised by the NPPCB is clearly frustrating for the implementing unit, and leading to confusion.

iii) Plans are being made to add a further 30 hospitals in the coming fiscal year. With the present poor project status of the program in the existing 58 hospitals, no additions are justifiable.

Field Post-Natal Program

1) Despite financial constraints and the problem of finding a permanent project office, this component progresses relatively well. The training of health controllers was completed in September 1973. A continuation rate survey has been made and data will be available by the end of March 1974. Cards for the service statistics system have been printed and the clinical trials of the system are scheduled to start in May. An inventory of all clinic equipment is complete. Preparations are now being made for a MAP study, and a mid-range fertility study.
11) The slowness in accounting for money is delaying further payments. In the meantime, the project runs on money borrowed from the East Java provincial government. A high caliber counterpart for Dr. Sullivan is still being sought; there is a reluctance on the part of suitable candidates to work in Medan. The lack of transport is a serious problem. The clinics will not be complete until at least July 1, and staff will not be available until October. The letter point gives Dr. Mardan (MMS, East Java) further ammunition to his repeated requests to substitute minibuses for AMIs/FMIs.

1) Research and Evaluation (A and B)

1) The discussion on Research and Evaluation was remarkable in that for the first time it brought to the attention of Deputy Chairman I and III, the existence of the supplementary letter to the Credit Agreement (which are of importance beyond this particular component). In a previous meeting the attention of the new adviser (Dr. Leung) had been drawn to the Appraisal Report. Both instances illustrate the somewhat fleeting attention which the Deputy Chairman III (Dr. Harjono) is giving to the preparation of an effective A and B component. The arrival of Dr. Leung in November should have helped to focus attention, but Dr. Harjono travels abroad frequently and is involved in work for the Central Bureau of Statistics. He is clearly more concerned with establishing his professional reputation by becoming involved in research, rather than managing an operational research program. The Deputy Chairman I is aware of the situation and will press for a more energetic program, prepared in accordance with the original project guidelines.

3) Transport

1) 3,500 bicycles have been ordered and are scheduled to arrive in Medan and Surabaja in May. The import of vehicles has been thrown in complete confusion by the Government’s order on January 22 that no sedans or station wagons could be imported GBU. As a result, the importation of one Holden (already ordered and paid for) has been cancelled. It appears, at the moment, that of the 370 vehicles for which bids have been called recently, 255 will not be regarded as sedans and station wagons, but clarification has been sought from the NIPCE. The contract for 115 mobile information units has been concluded, but no shipping company will accept an order until it is assured that the Government will allow importation. An order for 1,600 Vespas was cancelled by the PNIU because of a considerable increase in price between the original enquiry and the placing of the order. UNICEF has been asked to find an alternative, such as Suzuki.

11) A draft agreement for the two transport advisers is in preparation. The NIPCE is considering the curricula vitae of two advisers.

4) Financial and Administration Procedures

1) Subsequent to the last supervision mission in June, and Mr. Saito’s mission in July 1973, the PNU made two attempts to tackle the problems associated with the Government’s financial procedures. The Deputy Chairman I called a meeting of various implementing groups but the responsibility level of those attending was too low for decisions to be made. Subsequently another attempt was made by Dr. Halid when he met with Mr. Mirzahid, special assistant to Mr. Sujoto, Deputy Chairman II of BAPPENAS.
11) At this meeting the HFPCB proposed:
   a) the preparation of one central HFPCB DIP;
   b) the consequent abolition of the DIP Supplement (which provides for reimbursable expenditures);
   c) to carry a "general" line in its budget; and
   d) several other revisions to the budget process.

The meeting's discussions were reported to Mr. Sujoto who replied very quickly but very negatively on all points. His reply, basically, was to the effect that until he was confident that the HFPCB's staff had demonstrated its competence to work with present budget procedures, he would not accept their need for revision. In the process, he also rejected the role played by the FIC in advising Dr. Hafid on budget procedures. The meeting and its response unfortunately put an end to efforts to straighten out financial procedures, which remain a severe constraint on the development of the national program. As the Joint Project was designed to be implemented through the national program, the difficulties of project realization are essentially those of the program.

111) In the coming fiscal year the eight central DIPs will be reduced to three in an effort to streamline procedures. The DIP will cover administration, basic facilities, and operations respectively. The project leader for the first will be Dr. Sugeng, and for the second Dr. Ida; no project leader has been proposed, as yet, for the third DIP.

1v) There were several complaints from implementing units of the difficulties in getting money from the HFPCB, and that this led to a lack of a sense of responsibility and considerable frustration. The other major problem facing Dr. Hafid is to get the HFPCB to implement, as well as accept, the policy that the HFPCB is a coordinating and not an implementing Board. The staff of the other two departments of the HFPCB clearly have vested interests in implementation and are loath to relinquish the roles which they have played since the Board's inception. Implementing units object to the fact that for each line item in an approved operational plan, reference has to be made to the appropriate project leader and bureau in the HFPCB each time money is required; inevitably, the Deputy Chairman and Bureau Chiefs are also involved in this 'double approval' system. Dr. Hafid was sympathetic to the mission's suggestion that there should be greater devolution of financial and operational responsibility to the implementing units. The HFPCB would still have control through its responsibility for the annual DIPs and through its supervisory role.

v) Updated charts showing the position of family planning within the GOI administration and the HFPCB organization, are attached as Annexes 1 and 2 respectively.
0. **Advisers**

a) **Project Management Consultants**

1) After the meetings in Washington last December with the Consultant's principals and Mr. Hafid, the mission was surprised to find Mr. White back in Jakarta as team leader. Contrary to what one had been led to believe, Mr. Breier of FNML had not acted as team leader during Mr. White's leave; he (Mr. Breier) had been in California. Prior to the mission's arrival, Mr. Hale (the systems analyst) had resigned with effect from April 30. During the mission's visit, Dr. J. McNaughton from FNML visited Jakarta. He had several meetings with Dr. Suardjono, Dr. Hafid, and the mission, and also met with Mr. Gordon.

2) Dr. Suardjono made it clear that he did not want Mr. White, but made it even more clear that the NFFC did not want Mr. Breier. Indeed, both Mr. McNaughton and the mission were left in no doubt that the NFFC did not want Mr. Breier. The reputation of FNML was clearly responsible for most of the trouble and possibly clearance of equipment and vehicles which the consultants had experienced. During the present mission, it was discovered that in January 1973 FNML had imported a car as the personal property of Mr. White, but had not handed it over to him.

3) Dr. Suardjono did not want a replacement for Mr. Hale. He felt that, whilst Mr. Hale was personally acceptable, his ideas were removed from the Indonesia operational scene, too sophisticated, and not understood by the staff of the NFFC. Dr. Suardjono criticized the EPC as concentrating too much on the civil works aspects of the project and not giving enough attention to the general management and coordination of all the project's components. Mr. Suardjono also supported Dr. Hafid's contention that Mr. Saunders replacement as program adviser should be someone who could work with (rather than advise) the Bureau of Planning, and of Supervision. Mr. Hafid also considered that this replacement (who should be more junior than Mr. Saunders) should also give his executive support. Dr. Suardjono also asked for an administrator as team leader; this did not mean that the position could not be filled by an architect or an engineer, but that broad management experience was essential. One factor complicating the proposed changes is the fact that Mr. Suardjono is not a qualified architect.

4) In the course of several discussions, the NFFC agreed that it might be better if Mr. Saunders' place was not filled and that the junior management adviser was to take Mr. Hale's place on the EPC team. It was said that there was no need for a program adviser as detailed program advice was being provided by individual advisers.

5) Mr. McNaughton was given draft terms of reference for a team leader and planning adviser. He was sympathetic to the needs of the NFFC and promised to communicate with them as soon as possible. In the meantime, both the NFFC and FNML have agreed to retain Mr. White until he is replaced. In subsequent conversations with the mission, Mr. McNaughton said he would contact...
the Bank to discuss the NFFCB's requirements as he saw them and discuss candidates for the two posts. Mr. McNaught was very pleased with the outcome of his visit; he thought the NFFCB more ready to discuss problems and requirements than during his previous visit in June 1973.

b) Other Advisers

1) The position of Mr. Saunders has been discussed above in paragraph 5(a). Dr. Anrit Kabal assumed duty on January 91 as training adviser. Dr. Sauradjono has asked Mr. Salkefeld to remain for a third year as communications adviser. He has also asked Dr. Huntington, whose position under a WHO/UNFPA financed scheme will cease when the project is terminated on April 30, to retain as medical adviser to the NFFCB and Ministry of Health. Dr. Huntington has yet to agree to the arrangement. (There is later evidence that neither Mr. Salkefeld nor Dr. Huntington will accept the requests.) The problem of their effectiveness is of increasing concern to most advisers. There is a growing questioning by the COI of the need for external, and particularly technical assistance. At the NFFCB, advisers are becoming frustrated with the inability of the management to cope with the program's personality problems.

ii) The principal constraints seen by advisers are:

a) failure to achieve internal coordination in the NFFCB has resulted in the isolated development of bureau activities, failure to assume responsibility, and failure to achieve effective coordination with the implementing units;

b) ineffective internal NFFCB communication;

c) failure to achieve the confidence and cooperation of implementing units; and

d) failure to staff the NFFCB adequately in terms of quality and quantity.

iii) Dr. Leing reported for duty last November as Research and Evaluation Adviser. The mission found that he had not been briefed as to the content or purpose of the Joint Project or its relationship with the national program; the omission was repaired. The Population Council is still looking for an adviser for EXAMS; the latest candidate who seems to be acceptable to both parties is Dr. Alden Speer.

iv) Two candidates for the advisory position for transport management and maintenance have been given to the NFFCB for consideration. An agreement covering their appointment has yet to be finalised.

9. Conclusions

i) The problems which affect the national program also impede the implementation of the Joint Project with which it is integrated. Essentially, these problems are:
a) weakness of executive staff, and particularly the Bureau of Planning, and of Supervision;

b) internal NFPCB lack of communication;

c) failure to define the functions of the implementing units and to give them adequate responsibility and effective support; and

d) vested interests within the NFPCB resisting change which is expressed as a MIU versus the rest of the NFPCB struggle. The MIU is seen as a new crop with considerable resources and a dangerous potential for upsetting the status quo.

The situation is becoming polarized around the personalities of the Deputy Chairman I and II, with the Chairman failing to exert discipline and dynamic leadership, to resolve the problems.

ii) This has resulted in uneven progress in software components, particularly those which fall within the responsibility of the Deputy Chairman II.

iii) Whatever the facts (and many are still unknown), there is general adverse comment on the procedures used to implement the civil works component. They are categorized as costly and complicated. The attitudes reflect adversely on Bank assistance.

iv) The problems of the project management consultants' performance have been recognized by both parties and efforts are now being made to recruit more effective staff and to accelerate momentum.

v) The staff problems of the NFPCB are held largely accountable for problems with financial procedures, and until the former are resolved the Government will do little, if anything, about the latter.

vi) There is a general feeling that consultants and advisers to the NFPCB are becoming weary, because of their apparent ineffectiveness.

vii) Despite these problems, the Joint Project is making progress and having an effect on improving the management of the national program as a whole. The continued rise in the number of new acceptors, however, has created a dangerous air of complacency among staff who have been with the program since its inception, and see this as evidence of their effectiveness.

10. **Action to be Taken**

a) Write to the Chairman of the NFPCB and reiterate the mission's conclusions which have already been given orally.

b) Press the MIU principals to act expeditiously in the selection and direction of a new team leader.

c) Maintain the sequence of bi-annual supervision missions.
d) Prepare a version of this part of the report for transmittal to the UNFPA.

B. SECOND POPULATION PROJECT

11. During the mission, discussions were held with officials of BAPPENAS, KPPKBC, the Ministry of Health and other departments about the content, timing and preparatory work required for a second population credit. The question as to whether this credit would also have nutrition components was left open. The two parts will be prepared separately although the time schedules covering their preparation have been synchronized should a decision be made to process them simultaneously in the Bank. In any case, they will be administered separately in Indonesia.

12. The mission based its work on a letter from the Deputy Minister of BAPPENAS which called for a review of the implementation of Credit 300-LN0 before a decision was made on components for the second project. This was done during the component review made in connection with the ongoing project, and referred to primarily in this report. It was clear that there was no progress with which sufficient progress had been made to justify additional funding at this stage, with the possible exception of the Field Workers program.

13. As a result of discussions, it was agreed that the second project would:

a) be prepared for Bank financing only, although potential assistance from other agencies would be taken into account in determining content;

b) be a continuation of the first project only if its components were sufficiently well developed to justify further financial assistance;

c) be as simple as possible in realization, working in with ongoing Indonesian practices and procedures, particularly in the area of construction;

d) be implemented within three years from December 1975 and regarded as an interim credit prior to a general review of possibilities for extended program assistance as a third project;

e) avoid assistance which would prove cumbersome in implementation because of Indonesian financial regulations (i.e. the 'sharing' concept for operating costs); and

f) be confined to the program in Java and Bali.

14. The following were determined as the probable components of the project:
a) support for the National Family Planning Training Center, with particular reference to the development of a management training capability;

b) strengthening of the health infrastructure by:
   i) providing some 60 mobile clinical units to extend NCH and FP services in rural areas,
   ii) provision of about 150 puskesmas health centers in each of the last three years of the second Repolita, and
   iii) provision of new schools and training facilities for community health nurses (MK);

c) the establishment of an institution for the development of information related to the introduction of policy measures designed to slow down fertility rates in addition to the developing national family program; and

d) such assistance for transport and equipment as may be required.

15. Project preparation will be coordinated by a Task Force led by Dr. Hafid (Deputy Chairman I of the KPPKB) with about five members (including two advisers). The Task Force will complete its work by October 31, 1974 in time for Bank appraisal in November/December 1974. Terms of Reference for the Task Force were drafted and discussed with Dr. Hafid. They were accepted as the basis for the Task Force’s work, and are in Annex 3. It was agreed that before Bank appraisal the project would be prepared completely, including site details and construction procedures. The Government referred to the manner and speed with which primary schools had been built. These were apparently constructed under the aegis of Empatis, and handbooks were prepared (a copy is available for Mr. Burfield) covering all phases of construction.

16. The possibility of an ERO assisted component for FP education among worker’s organizations was raised. It was agreed that it sounded more suitable for UNFPA financing, and that the Government would first approach the UNFPA.

C. NUTRITION PROJECT

17. Mr. Venkitaraman (consultant) joined the mission for one week from February 4 to 9. Prior to his arrival, the possible content of a nutrition component of the second project had been discussed with Mr. Suwoto of MINTRNAS and Dr. Bradjat of the Ministry of Health. The general question of nutrition project development had also been discussed with Mr. David Houston (UNICEF representative) and members of a WHO nutrition mission which visited Indonesia in January.

18. In previous discussions on nutrition, it had been agreed with the Indonesian authorities that the work of the WHO (contracted to MIT) mission
would have to be taken into account in project preparation for possible Bank assistance. Two meetings were held with the mission, which comprised Dr. James Levinson, Dr. N. Serinshaw, Dr. Joe Wray, Dr. R. Brevett, and Ms. Barbara Underwood. The mission had been requested by the Ministry of Health, somewhat against the advice of RAPENAS. Dr. Bradjat was disappointed in that it had fallen short of his expectations - he had thought it would stay for three months and leave behind a set of project packages; it stayed for one month and prepared a draft report by mid-March. As presented by Dr. Bradjat, the mission left seven recommendations:

a) Improve production of soy beans - the production of animal protein being still too costly;

b) Develop nutrition education, which should be coupled with a supplemental feeding demonstration program;

c) Conclude the AID evaluation, and emphasize greater effort in this direction, improving its coordination and administration;

d) Develop a large-scale pilot project on the eradication of vitaminosis by mass prophylaxis;

e) Develop a fortification program
   - of salt with iron and iodine,  
   - of wheat flour;

f) Draft and promulgate food control legislation; and

g) Develop projects covering:

1) supplementary feeding in rural areas based on village community organizations, and

2) a day care center approach for children in urban areas.

19. There is no clear direction as to which Government organization is responsible for the development of a national nutrition program. Until now the Ministry of Health has taken the lead, but RAPENAS, holding to the view that a nutrition program has a wider connotation than health, has tried to establish direction. It has not, however, had the resources or time to do this adequately. There is, therefore, a discreet tug-of-war between the two. The Health Ministry's latest move was to announce a national nutrition plan and a series of projects by which it could be implemented; it does not appear to have been noticed outside the Ministry itself.

20. As presented by the mission to Deputy Minister J.B. Suman of RAPENAS, the nutrition component of the second project would consist of:
a) Institution Building - strengthening of the Institute of Nutrition Research at Bogor, including the development of a Food Technology Institute;

b) Food Supplementation Demonstration Program - to be carried out in a selected regency with a nutrition education program;

c) Fortification Programs, possibly including:
   i) Vitamin A/iron fortification of salt;
   ii) Pilot project for iodization of salt and distribution of iodized salt; and
   iii) Vitamin A fortification of sugar and wheat flour; and

d) Training.

Some of these components coincide with the observations of the WHO mission; others are fundamental requirements of a national nutrition program in whichever way it is developed.

21. Guidelines for a task force to be established by BAPPEMPAS for project preparation were prepared by Mr. Venkitaramanan and have been received in Washington. They are being reviewed and will be transmitted to BAPPEMPAS. One of the main objectives of the task force will be to recommend the organizational structure required to implement a national nutrition program including a Bank-assisted nutrition project.

22. As a result of conversations with Mr. Baxton, UNICEF has informally promised technical assistance for project preparation. He has postioned development of nutrition inputs by UNICEF until the Bank's project has materialized. Mr. Venkitaramanan recommended a visit by Dr. Cyril Honeycomb from Bangkok to assist with preparation for a salt iodization component. Other assistance may be forthcoming from UNICEF; but the Bank should be prepared to provide consultancy time, particularly for institution-building.

23. The agreed timetable for project preparation was similar to that for the second population project (see Annex 3). It was, however, made clear that the one would not be made dependent on the other. Whilst it would be convenient to proceed the two components simultaneously, the Bank was not insisting on this arrangement. Administratively, it was clearly understood that population and nutrition would be handled as separate subjects in Indonesia.

D. NATIONAL PROGRAM PERFORMANCE

24. To the end of December 1973, the national program had recruited 312,250 new acceptors for the 1973/74 program year. This represents 64.5% of the target for this year; achievement is behind the 75% mark which should have been reached by this date. The monthly totals of new acceptors are shown in the following tables:
New Acceptors

<table>
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<th>Month</th>
<th>Oral contraception</th>
<th>IUD (percentage)</th>
<th>Others</th>
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<tr>
<td>April</td>
<td>101,432</td>
<td>57.1</td>
<td>32.4</td>
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<td>May</td>
<td>85,359</td>
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<td>29.5</td>
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<td>June</td>
<td>85,697</td>
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<td>27.4</td>
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<td>July</td>
<td>85,123</td>
<td>59.5</td>
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<tr>
<td>August</td>
<td>82,559</td>
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<tr>
<td>September</td>
<td>83,859</td>
<td>58.8</td>
<td>25.5</td>
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<tr>
<td>October</td>
<td>65,800</td>
<td>59.7</td>
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</tr>
<tr>
<td>November</td>
<td>70,518</td>
<td>61.7</td>
<td>23.2</td>
</tr>
<tr>
<td>December</td>
<td>122,210</td>
<td>64.0</td>
<td>22.5</td>
</tr>
</tbody>
</table>

It will be seen that, for only the second time in nine months, the monthly figure was above the number required each month to achieve the annual target.

25. The number of FP service outlets has increased slightly from 2,116 in April to 2,213 in December. Of these, 95.9% reported on their activity in December. The program is almost exclusively Government operated. Of the total registered clinics only 4.1% were operated privately. The Ministry of Health is responsible for the operation of 92.6% of the clinics, with the armed forces and other Government agencies responsible for the remaining 7.4%. There has been no change in this balance since the last supervision mission.

26. Since the last mission, the figures in the table above relating to the contraceptive mix have shown a marked reversal of the shift towards the IUD. During the program year the proportion of women accepting the IUD has fallen from 32.4% to 22.5%. There were corresponding increases in the number of those taking oral contraceptives and conventional, particularly condoms.

There has been a decrease in the number of condom acceptors in Jakarta, but a sharp rise in Yogyakarta from 31% in April to 56% in December. The swing away from the IUD towards the oral contraceptive appears to be general throughout Java and Bali. One reason may be the surfacing of latent opposition by Muslim organizations, which can be countered by providing orals instead of the IUD.

27. The performance of West Java has improved considerably during the current program year. It is, at present, the only province which is maintaining the pace of achievements needed to meet its annual target. Performance in the city provinces of Jakarta and Yogyakarta is well below average. Performance in the other three provinces reflects that of the national program generally.

28. During the year, the average number of hours per clinic session has been close to five hours. The number of new acceptors per reporting clinic declined from 77.6 in March to 63.6 in April and to 31.1 in October, rising to 56.8 in December.
29. There is no new data available on continuation rates. It is apparent from clinic returns, however, that the number of clients coming for revisits has risen rapidly during the current program year from 551,126 in April to 715,231 in December, an increase of 33%. Oral contraceptive revisits rose by 11%, and revisits to collect condoms by 6%. Revisits in connection with IUD and foam tablets fell by 4% and 19% respectively.

30. Over the period April-December 1973, the hospital postpartum program recruited 26,270 new acceptors - 73% of those recruited in the 1972-73 program year. Compared with the national program, the returns show more acceptors favoring IUD insertions (37.1%), and a correspondingly smaller proportion of those accepting oral contraceptives (42.4%). The percentage of condom acceptors (10.0%) was surprisingly high, but this was affected by the proportionately large number of hospitals in Jakarta which recruited 23% of the total condom acceptors.

31. To reduce dependence on AID assistance for contraceptives, the Government has concluded an agreement with Schering for the local manufacture (from imported materials) of Durynol, which will be sold to the IIPCD at Rs. 70 (17 US cents) per cycle. With the assistance of the Population Council, IUD production will start this year at the Pioneer Plastics Factory. It was also reported that a contract between the Governor of Jakarta and the London Rubber Company had been concluded for the construction in Jakarta of a factory to manufacture condoms.

Attachments

HJones/dlf

Cleared with: Dr. Kanagaratnam, MPH
Cleared with and cc: Mr. Zaidan, MPH
cc: Mr. Baldwin, MPH
Mr. Berg, MPH
Mr. Kang, MPH
Mr. Burfield, MPH
Dr. Ranjanath, Jakarta
Mr. Grovesnor, Jakarta
Mr. van der Tak (3), Office - V.P., Projects Staff
Mr. Ebstain, Information & Public Affairs
Mr. Riley, International Relations
Mr. Gould (2), East Asia & Pacific
Mr. Lerdau, Assistant Director Projects - Asia
Messrs. Dematt/W.C. Chang, Controller's
Mr. Asser, Legal
Division Files

300-IIPD/2MP
INDONESIA: FAMILY PLANNING STRUCTURE

President

Minister of Peoples Welfare

N.F.P.C.B.

Local and International Agencies

Implementing Units

Central Government

Provincial Government

National Council for Guidance of Family Planning

Minister of:

- People's Welfare
- Interior
- Health
- Information
- Education & Culture
- Religious Affairs
- Manpower
- Transmigration
- Social Affairs
- Finance
- Bappenas
- Defence & Security

Inclides:

- A.B.I.T (Armed Forces)
- MUI (Muhammadiyah)
- D.G.I. (Council of Churches)
- PTUI (Labor Union)
- Inst. of Demography
- Leknas
- W.H.O.
- Ford Foundation
- U.S. I.D.
- Population Council
- UNICEF
- UNESCO
- UNFPA
- IBRD

Inclides:

- Ministry of Health
- Ministry of Information
- Ministry of Education and Culture
- Ministry of Social Affairs
- Ministry of Religion
- Indonesian Planned Parenthood Association
Terms of Reference for the Task Force for the Second Indonesian Population Project

1. The objective is to prepare a detailed, costed population project proposal, suitable for IDA appraisal and financing by October 31, 1974.

2. (a) A task force will be established to coordinate the preparation of the proposed components. It is to be headed by Prof. Dr. Hafid, Deputy Chairman I, NPPCBI, as Chairman. The other members will consist of Dr. Nasid (representing BAPPENAS), Dr. Soebagio (representing the Ministry of Health), Dr. Mukhono (representing the Ministry of Education), Mr. Geoffrey Salih (communication adviser) and Mr. Anrit Mahal (training adviser). The task force will be appointed by the Chairman of the NPPCB on February 18, 1974.

(b) The chairman of the task force will appoint whoever is required to provide specialist advice, and will be assisted by the non-Indonesian advisers to the NPPCB as necessary.

(c) The chairman will also use the services of the population specialist on the World Bank's Resident Staff in Jakarta.

(d) The Chairman of the NPPCB will make provision for a small secretariat during the operation of the task force.

3. Following a review of the Joint Population Project (Credit 300-IND), it has been determined that the components of the second credit will consist of:

(a) support for the National Family Planning Training Center;

(b) i. provision of mobile clinical units to extend MCH and FP services in rural areas;

ii. provision of about 150 puskesmas health centers in each of the last three years of the Second Repelita; and

iii. provision of new schools and training facilities for PKK (Family Health Nurses);

(c) the establishment of an institution for the development of information related to the introduction of policy measures designed to slow down fertility rates in addition to the developing national family planning program; and

(d) such assistance for transport and equipment as may be required.

4. Assistance under the second credit will be confined to the islands of Java and Bali, particularly the provinces of W. Java, Central Java and Yogyakarta.
5. The task force will pay particular attention to the procedures needed to implement the second credit. It will review the procedures used in Credit 300-JEB, and propose financial procedures it considers the most effective. The task force should also consider and recommend the most expeditious procedures, consistent with established government standards, for the construction of buildings.

6. The task force should report to the Chairman of the NFFCB by October 31, 1974. It should have the necessary information ready to make provision in the DPU's for the 1975-76 budget at the appropriate time.

7. The task force will assemble, in the most complete detail possible, all the data needed to support the proposal. For civil works it should include preliminary drawings, cost data, and a list of sites.

8. In developing the components, the task force should consider the following guidelines:

   (a) National Family Planning Training Center (NTC)

   The following data will be required to examine and detail the proposal for a national family planning training center.

   A. 1. Short note on the past functioning of the NTC prior to 1971-72, with particular reference to responsibility for management.

   2. Details of activities of NTC since 1972-73:

      (a) complete details of number and category of personnel trained for the national program, as well as ITPA;

      (b) staffing position, past as well as present;

      (c) activities undertaken outside Jakarta;

      (d) details of training research;

      (e) details of training evaluation; and

      (f) relationship with NTB and NFFCB.

   3. Particulars on adequacy of present building, transport and equipment.

   4. Note on the library of NTC.

   B. 1. Projection of training load of the NTC during 1974-76 with particular reference to training of trainers, leadership training, etc.

   2. Future plans for training research and evaluation.

   3. Future plans for taking leadership in technical coordination of the training system for Indonesian FP program.
4. Future plans for development of library and information retrieval facilities.

5. Role of NTIC in technical support to other FP training activities in Indonesia both through NTIC and as well as other agencies like the Ministry of Education (including medical education), para-medical training, etc.

6. Detailed list of future projections during 1974-78 for building space, equipment, staff, stipends and other operational expenditure and transport to carry out the planned activities of the NTIC.

7. If addition to existing building is required, details of availability of building space in the present location.

(b) (i) Mobile Clinic Units

The task force should consider previous experience with mobile units in Indonesia. It should consider the strategy for their use - are they intended to extend services to areas of difficult terrain (?), or areas now lacking a rural health infrastructure (?), or will they have an essentially supervisory function? How do they relate to plans for the development of the static health infrastructure? What will their family planning function be? Additional staff will be needed - will each unit have an assigned staff? - will it draw from existing staff on a rota basis - and will staff be increased to serve mobile units? At the kabupaten level, how will each unit operate? It would be helpful to detail the operation of one unit, describing its coverage, possibility of reaching remote villages, and its relationship to static health services at kecamatan level and below. The task force should draw up specifications (both vehicle and equipment) for a mobile unit, its cost, and the cost of operating such a vehicle (salaries of additional staff, gasoline, maintenance, etc.) for an average year's operation. Whilst the general basis for distribution may well be one unit for each kabupaten, the task force should closely analyze requirements which might not have such a simplistic basis.

(ii) Construction of Puskesmas

Details of the present situation of static health services will be required, as well as the proposed construction program for Puskesmas health centers in Java and Bali. For each location details of existing buildings should be provided to justify the construction of new buildings.

For a Puskesmas center, the proposed staffing, functions, financing, and operations should be described. Preliminary designs of the buildings (including houses) should be provided and detailed construction costs assessed. National building cost estimates in the Second Ropelita should be examined with care and revised as necessary to take account of local conditions and price escalation. The procedures to be used to realize the first two years of the construction program should be described, including the lines of responsibility for financing, supervising and constructing the buildings.

The task force should establish the work load for health and family planning of each Puskesmas over the last three years. This should include the number of deliveries, home visits, clinic attendance, ante and post-natal clinics,
number of family planning acceptors (by method) and number of follow-up visits. The current staffing position of each Puskesmas to be constructed should be provided and, as necessary, details for improving staff strengths.

The estimated operating costs of a typical Puskesmas over one year should be assessed.

(iii) Support for Puskesmas

In preparing a proposal for support for Puskesmas, mainly in Central and West Java and Yogyakarta, the task force should consider the overall manpower development program of the Ministry of Health. It should assess the training needs of Java and Bali and analyze how the proposed schools will be able to meet those needs.

For each training school the number of graduates should be given, accounting for dropouts during tuition. The tutor training problem should be investigated to ensure that there will be adequate provision of tutors for the new schools. If inadequate, proposals for providing the necessary number should be considered.

Sites should be provisionally selected. Preliminary drawings, construction and operating cost data should be prepared. In this regard, the work done in implementing the first credit should be drawn upon.

(c) Population Institution

The objective is to broaden the national approach to population problems, beyond the present, developing, family planning program. A comprehensive population policy should consider the full range of population phenomena and the various ways in which they interact with economic, political, social, legal and cultural factors. In order to focus attention on these problems, stimulate study and discussion, and assemble information, an institution is required. The task force should consider the most effective institution for suggesting what policies are required to implement the "beyond family planning" approach, and how best they could be realized. The institution might be a National Commission reporting to the President, a unit of PAKEMAS, a population studies center attached to a university, or a separate institute created for this purpose. Whatever entity is created, its work must be closely related to the policy decision-making machinery of Government. It is not the intention to create a purely academic institution.

The task force should recommend on:

(i) management;
(ii) organization and relationship with other Government departments;
(iii) staffing;
(iv) functions; and
(v) finance.
(a) Transport and Equipment Requirements

The future transport and equipment requirements of the national program, as well as those for components of the second credit, should be detailed. Specifications should be drawn up and costed. Local considerations (such as the recent CKD decision) should be taken into account. Procurement sources and packaging should be considered in relation to IDA procurement policies. A realistic delivery schedule should be prepared.

Drafted in Jakarta
February 7, 1974
IBRD & IDA: SUPERVISION SUMMARY

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<th>Section</th>
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<td>8.5</td>
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| Section II: COST ESTIMATES | Local Currency ($m) | 20.2 | 20.2 | 20.2 |
|                            | Alien Currency ($m) | 12.8 | 12.8 | 12.8 |
|                            | Total Project ($m)  | 33.0 | 33.0 | 33.0 |

| Section III: MAJOR DATES FOR PROJECT IMPLEMENTATION | Effective Date | 11/2/72 | 13/2/72 |
|                                                      | Procurement Completion |
|                                                      | Project Completion |
|                                                      | Closing Date | 6/20/78 | 6/20/78 |

| Section IV: PERFORMANCE RATING | Last Report | This Report | Performance Trend | Nature of Problem |
| Problem-free project | 1. | | Improving | Financial |
| Minor problems | 2. | X X | Stationary | Management |
| Major problems - under control | 3. | | Deteriorating | Technical |
| Major problems - not under control | 4. | | | Political |

| Section V: MISSION SCHEDULE | Current FY | Next FY | Last 2 Missions | Next Mission | Last Supervision Report | Last Progress Report |
|                            | 6 | 6 | 6/73 | 1/74 | 6/74 | 8/73 |

| Section VII: EXPENDITURE (Man-hours) | Plan | Actual - Procurement | Other |
|                                  | | 17 | |

| Section VII: COMMENTS | Include where appropriate comments on status of project associated technical assistance |
| The project is being implemented through the national family program, and the problems of realizing the objectives of that program directly affect project performance. |

1/ Does not include US$450,000 in irrevocable commitments to UNICEF for vehicle procurement.

2/ Does not include estimate of $2.8 million irrevocably committed to UNICEF for vehicle procurement.
March 25, 1974

H.E. Dr. J. B. Sumarlin
Deputy Minister
BAPPENAS
Taman Suropati 2
Jakarta, Indonesia

Nutrition Project

Dear Dr. Sumarlin:

In continuance of our discussions last month about the development of a nutrition project proposal suitable for IDA financing, I am attaching draft terms of reference as requested for your consideration for issue to the Task Force which the Government proposed to establish for this purpose. In subsequent talks with Mr. Sujoto, it was agreed that Mr. Murshid would probably chair the Task Force. The Task Force would be a small group of officials from interested departments who would be immediately responsible to Mr. Sujoto for the coordination of preparation and for recommending whether specialist technical assistance was required in any particular field.

The probable project components are as defined during our discussions. They are small in number and specific in direction so that the project will be of direct assistance in getting a national nutrition program off the ground. Before the Task Force can start the actual preparatory work, there are several policy decisions which will require immediate attention. Perhaps the most urgent is to determine how, and by which entity a national nutrition program, will be operated. Also of importance is a decision on the broad organizational pattern of an effective research capability.

Once these policy decisions have been taken, the Task Force will be able to proceed with detailed preparatory work.

The evident commitment of the Government towards a strong policy support for an expanded program of nutrition related activities is most heartening. I look forward to continuing Bank assistance in its further development.

With kind regards,

Yours sincerely,

K. Ramagaratnam
Director
Population and Nutrition Projects Department

Attachment
HJones/dlf
March 20, 1974

Prof. Dr. Andries Querido
Academisch Ziekenhuis Leiden
Leiden, The Netherlands

Indonesia - Salt Iodization Project

Dear Dr. Querido:

Thank you for your letter to Alan Berg of January 22nd, 1974. A possible nutrition project has been discussed with the Government of Indonesia which proposes to establish a Task Force responsible for the coordination of project preparation. A salt iodization component has been included in the tentative project which the Government proposes to ask the Bank (or, more properly, the IDA) to finance. The proposed project also includes the establishment of a demonstration program of nutrition interventions, probably in Central Java, which could well act as a vehicle for your proposal. Responsibility for defining and preparing the project, however, rests with the Government of Indonesia. Once the preparation is complete, the project will then be appraised by the Bank.

Hopefully the several stages, through which a credit is processed and eventually approved, can be completed by about July 1975. We would not expect the project to be effective (i.e. in operation) much before the end of 1975.

A staff member is visiting Indonesia again in April to see how project preparation is developing, and I shall keep you in touch with developments.

Yours sincerely,

Huw N. Jones
Population & Nutrition Projects Department

HJones/dlf
Cleared with and cc: Mr. Berg, PNP
cc: Dr. John E. Stanbury
MIT, Cambridge, Mass.
cc: Dr. Kanagaratnam/Mr. Baldwin/PNP
Mr. Zaidan, PNP
Division Files

Indonesia/PNP
S. VENKITARAMANAN, I.A.S.,
Finance Secretary.

Fort St. George,
Madras.9.
S. INDIA.


Dear Heuw,

I herewith enclose a copy of the draft guidelines which I had prepared for the Nutrition project in Indonesia. Just before I left for Djakarta, I also sent Dr. K.V. Ranganathan a letter, copy of which I enclose. As you would see from the letter, I had requested Mr. Murshid to immediately set up a group to work on the project. I had also informed him about the possibility of UNICEF giving assistance for the preparation of the projects. I hope (a) Dr. K.V.R. and Murshid follow up this line and (b) Murshid is prodded to take further steps.

My best regards,

Sincerely yours,

(S. VENKITARAMANAN)

To
Mr. Heuw Jones,
Population and Nutrition Deptt.,
International Bank for Reconstruction and Development,
WASHINGTON D.C. 20433,
U.S.A.

I will be sending you the other materials separately in case you need them. Otherwise, they can be with me for the trip in April 74. You can let me know.
Dear Dr. Ranganathan,

I write this with reference to the status of the further work on the formulation of the nutrition project. I have had a series of meetings separately with Dradjat, Dave Haxton, Ummoto and Suojota. I also met Murshid today. The point of interest is that Suojoto has decided today to have a small group under Murshid and including Dradjat to formulate the project. The name of Saleh Afif was not mentioned today either by Suojoto or Murshid. They may involve some staff member from Affs Organisation but they recognise that the work is essentially on the health sector.

We have tentatively agreed on the following components of the nutrition project to be prepared now for consideration in detail in April:

1) Strengthening of the Institute of Nutrition Research at Bogor, including the development of training facilities.

2) Development of a Food Technology Institute. (Today, Dradjat came round to our earlier advice that a separate institute is necessary)

3) Food supplementation for target groups in a selected regency -- To be accompanied by studies and evaluation

4) Fortification -- (a) Pilot projects for vitamin A & for Salt (Dradjat is keen on Fe also)

(b) Pilot project for iodisation of salt.

(c) Pilot projects for vitamin A fortification of sugar and flour.

(cont'd.)
(5) Vitamin A prophylaxis - oral capsules to reach nearly a million children - stepwise expansion based on the results of evaluation - now ongoing.

No separate nutritional status studies are involved except insofar as they are needed - and can be done - in one regency being taken up for supplementation programs. Simpler and less costly studies can be evolved. This will be covered in the guidelines which I am preparing.

Assistance for the project preparation team:

I have communicated UNICEF (Dave's) concurrence to get Cyril Honeykunfi from Bangkok for work on small scale codisation. There are a number of technical and administrative problems involved in this. Therefore, Murshid should send across a requisition to UNICEF quickly. He has promised to do this by Monday, 11-2-74. Some prodding by you will help.

Dave Hayton (UNICEF) is willing to assist with funds for helping in the projectisation of Repeleta II. Dave suggested a form of words which will enable UNICEF to do this without making it appear that it is doing the Bank's work. He has no objection but he feels it best to put it this way "UNICEF is willing to help the Bappenas task force on nutrition with both Indonesian and foreign technical help so that the fully policy and operational implications of Repeleto II on nutrition can be worked out. UNICEF will direct its help towards the objective of concretising the general plan into definite projects". Murshid is aware of the general idea. You may want him to get into touch with Dave/Unimoto straightaway. I have suggested to Murshid that he should get, as early as possible, through UNICEF if need be, Indonesian experts on nutrition, rural sociology and economic planning to help him.

Regarding the Institute of Nutrition and Food technology Institute, the Bank may wish to send one or two experts after clearing the names with Government of India.

I have reached a tentative agreement with Pradjat and Murshid that the project outline will be ready by mid April '74.

(contd.)
I have set the same target dates for this as indicated by Heuw Jones for the Population component. This really means that Murshid or someone under him should start work even now in right earnest.

I shall send the draft guidelines to Washington DC within three to four days.

I feel I will need to work on them at least for two full days more. I hope to get a day off on Tuesday and Thursday next week. Anyway, I shall mail the guidelines before Friday week. I shall send you also a copy for your information. Obviously, till Washington D.C. clears it, it is not to be passed on - although I have asked most of the questions in a rough way to Suaspendi and others.

I am sorry to leave without seeing you. But I have a Cabinet meeting to be in attendance on 11th February '74. I hope I have been of some assistance to you.

Hoping to see you soon and with best regards,

Yours sincerely,

Sd/-

(S. Venkitaramanan)

Dr. K. Kanagaratnam  
Director Population and Nutrition  
Projects Department  
1818 H Street, N.W. Washington D.C. 20433  
U.S.A.

Dear Mr. Kanagaratnam,

Population and Nutrition Projects in Indonesia

Referring to your letter to Professor Widjojo Nitisastro of December 6, 1973, I would like to inform you, that a task force under the chairmanship of Dr. Hafid, Deputy I/Director PIU BKKBN - will start its activities this month. This task force as an extension of the task force for preparing the Second Five Year Family Planning Development Plan, will review and appraise the first phase, and ultimately develop a project proposal for phase II of the Population Credit. However, six months period should be given for the task force to finalize that proposal.

Meanwhile now we have already a basic policy and programmes on food and nutrition improvement as a chapter of the draft of the Second Five Year Development Plan. At the same time, a nutrition mission from MIT and sponsored by WHO is at present in Jakarta. We do hope that we can discuss some problems for further operational programmes on nutrition, some of them mentioned in your letter.

However, due to some considerations we came to a conclusion, that during this early stage, it would be better if we have two separate teams for population and nutrition projects. In its progress later, than we will make a decision whether we have to integrate these to components into one single project or to put into two separate projects.

We are looking forward to seeing you by the time you visit Jakarta next month and discussing substantial problems concerning population and nutrition projects.

With kind regards,

Yours sincerely,

Dr. Suwardjono (BKKBN)
Dr. Pradjat (Depkes).

Co.: 1. Dr. Suwardjono (BKKBN)
2. Dr. Pradjat (Depkes).

Mrs. Sumarlih  
Vice-Chairman
January 14, 1974

Mr. S. Venkitaraman, Consultant

K. Kanagaratnam, Director - FNFD

INDONESIA - Nutrition Component of Second Indonesia Credit
Terms of Reference

1. You will visit Jakarta from 3 February for about one week and there meet with myself and Mr. Jones. During your mission you will to the extent possible:
   a) assist in the determination of the outline of nutrition components for possible Bank assistance;
   b) prepare draft terms of reference for consultants to assist the Government of Indonesia in preparing the components for Bank appraisal; and
   c) outline the appropriate steps needed to be taken by the Government and a timetable which should be followed.

2. Whilst in Jakarta, you should prepare a brief note on your findings and recommendations.

HJones/dlf

Cleared with and cc: Mr. Gould, East Asia & Pacific
cc: Mr. Baldwin, FNFD
     Mr. Berg, FNFD
     Mr. Zaidan, FNFD
     Mr. Kang, FNFD
     Mr. Jones, FNFD
     Mr. van der Tak, Office - V.P., Projects Staff
     Dr. Ranganathan, Jakarta

Indonesia/FNFD
January 10, 1974

Mr. Alan Berg  
Deputy Director for Nutrition  
World Bank  
1818 H Street, N. W.  
Washington, D. C. 20433

Re: Maternal Nutrition - Family Planning  
Indonesia

Dear Mr. Berg:

Would you be kind enough to substitute the enclosed proposal for the one sent to you on January 7th.

Sincerely,

Ann Savarese
Secretary to Mr. Walter
DUTCH - INDONESIA PROPOSAL

FOR

COMBINED MOTHER-CHILD NUTRITION
FAMILY PLANNING AND HEALTH ACTION

This low cost mini-test program should open the way for major successes on a national scale.

Results easily understandable to women everywhere will be available within one year.

Proposal: In the Jakarta area feed 250 pregnant mothers visiting BKIA centers and hospitals 17 grams of soya flour protein per day for the last three months of their pregnancy. The protein is in the form of a dry flavored powder to be mixed with water as used. Birth weights will be recorded and photographs of mother and baby taken one month after birth. Photographs of the babies will be the best evidence to other mothers of the success of the program.

Basis: (1) A 5 year study by a Dutch scientific group in both Holland and Indonesia (Prof. Arens and others) has recommended adding 5 to 10 grams of soya flour protein to the daily diet and the building of a pilot plant to produce such flour in Indonesia out of Dutch aid funds. To start this imported flour (less than 1 ton) should be used. Ample lands for soy bean cultivation are available in Sumatra and elsewhere.

(2) A 6 year Taiwan study (the Sui-Lin project) on maternal nutrition conducted jointly by Johns-Hopkins University of the U. S., Namru II of the U. S. Navy and the Taiwanese government, as reported by Dr. Hsueh of Hopkins and others in scientific journals, urges concentration of such protein help on pregnant mothers.

(3) Current medical thought that such protein help in the third trimester of pregnancy will give most of the benefits of a full feeding program at a small fraction of the cost.
Advantages: (1) Family Planning: picture of the healthy babies produced by such a program should make women more willing both to use family planning methods and good nutrition.

(2) Nutrition: the baby should receive these advantages:

(a) better memory, learning rate and motor coordination,
(b) better survival rate; and
(c) more efficient metabolism and thus lower life time food needs.

(3) Prestige: A successful program in Jakarta makes more likely its acceptability in other areas. Crown Princess Beatrix, the mother of 3 young, healthy boys, has indicated her willingness to come to Indonesia in conjunction with the use of Dutch aid and a combined Mother-Child Nutrition, Family Planning and Health Campaign.

(4) Political Acceptability: Most governments want programs that show results within a short time. Six months to a year is ideal.

(5) The success of this proposal would make it more likely that private producers would take on the main burden of a national program - with such subsidies for poor areas as the government may determine.

Follow up: The world-wide experience of IFF in working with UNICEF, other nations and the scientific community on related matters is available.* If desired, the experience of the Johns-Hopkins staff can also be enlisted.

Henry G. Walter, Jr.
Chairman

January 10, 1974

*a powdered formulation of soy flour and flavor has been prepared and tested by IFF. It is mixed with local water to make two 12 ounce servings per day.
January 10, 1974

Prof. Dr. Andries Querido
Academisch Ziekenhuis Leiden
Leiden, The Netherlands

Dear Dr. Querido:

Thank you for your promptness in sending to us the proposed project for the eradication of goiter and cretinism in Indonesia. A member of our staff will be discussing a possible nutrition project with the Indonesian Government later this month and will benefit from your efforts. Also, we have taken the liberty of seeing that a WHO-sponsored nutrition planning team that currently is working with the Health Ministry in Indonesia will be aware of your proposal.

Sincerely,

Alan Berg
Deputy Director for Nutrition
Population and Nutrition Projects Department

cc: Dr. John B. Stanbury
MIT, Cambridge, Mass.

cc: Mr. H. Jones, PNPD (w/incoming)
bcc: Dr. F. J. Levinson (w/incoming)

Aberg: cj
File: Indonesia-Nutrition
January 7, 1974

Mr. Alan Berg
Deputy Director for Nutrition
World Bank
1818 H Street, N.W.
Washington, D. C. 20433

Re: MATERNAL NUTRITION - FAMILY PLANNING
INDONESIA

Dear Mr. Berg:

Herewith a memo outlining an Indonesian proposal I would hope to discuss with you before leaving for Indonesia in mid February. I write you because I believe it is in accord with the principles outlined in your "The Nutrition Factor" - the best I have read on the subject.

We have some hope for this plan. It was discussed in principle in Indonesia about a year ago. It also has the personal endorsement of Prince Bernhard of Holland and his daughter who are well and favorably known to President Soeharto. It also has the support, so far as the soy supplementation goes, of a Dutch study mission.

The purpose of the proposal is to get something small enough to give significant results within a year.

As you so well point out, few people read reports. We believe the photos of mothers and babies are crucial - both for the politicos and for other mothers.

Linking maternal feeding and family planning seems like a good bet. It draws on a lot of experience.

We hope if the plan went in Indonesia, it could be used as a model in many other places. If countries like Brazil want to omit the family planning, fine.
Hope we can discuss soon.

Sincerely,

Henry G. Walter, Jr.

HGW/s
DUTCH - INDONESIA PROPOSAL

FOR

COMBINED MOTHER-CHILD NUTRITION
FAMILY PLANNING AND HEALTH ACTION

This low cost mini-test program should open the way for major successes on a national scale.

Results easily understandable to women everywhere will be available within one year.

Proposal: In the Jakarta area feed 250 pregnant mothers visiting BKIA centers and hospitals 10 grams of soya flour protein twice per day for the last three months of their pregnancy. The protein is in the form of a dry flavored powder to be mixed with water as used. Birth weights will be recorded and photographs of mother and baby taken one month after birth. Photographs of the babies will be the best evidence to other mothers of the success of the program.

Basis: (1) A 5 year study by a Dutch scientific group in both Holland and Indonesia (Prof. Arens and others) has recommended adding 5 to 10 grams of soya flour protein to the daily diet and the building of a pilot plant to produce such flour in Indonesia out of Dutch aid funds. To start this imported flour (less than 1 ton) should be used. Ample lands for soy bean cultivation are available in Sumatra and elsewhere.

(2) A 6 year Taiwan study (the Sui-Lin project) on maternal nutrition conducted jointly by Johns-Hopkins University of the U.S., NAMRU II of the U.S. Navy and the Taiwanese government, as reported by Dr. Hsueh of Hopkins and others in scientific journals, urges concentration of such protein help on pregnant mothers.

(3) Current medical thought that such protein help in the third trimester of pregnancy will give most of the benefits of a full feeding program at a small fraction of the cost.
Advantages: (1) **Family Planning**: picture of the healthy babies produced by such a program should make women more willing both to use family planning methods and good nutrition.

(2) **Nutrition**: the baby should receive these advantages:

(a) better memory, learning rate and motor coordination,
(b) better survival rate; and
(c) more efficient metabolism and thus lower lifetime food needs.

(3) **Prestige**: A successful program in Jakarta makes more likely its acceptability in other areas. Crown Princess Beatrix, the mother of 3 young, healthy boys, has indicated her willingness to come to Indonesia in conjunction with the use of Dutch aid and a combined Mother-Child Nutrition, Family Planning and Health Campaign.

(4) **Political Acceptability**: Most governments want programs that show results within a short time. Six months to a year is ideal.

(5) The success of this proposal would make it more likely that private producers would take on the main burden of a national program - with such subsidies for poor areas as the government may determine.

**Follow up**: The world-wide experience of IFF in working with UNICEF, other nations and the scientific community on related matters is available.* If desired, the experience of the Johns-Hopkins staff can also be enlisted.

Henry G. Walter, Jr.
Chairman

January 7, 1974

*a powdered formulation of soy flour and flavor has been prepared and tested by IFF
Dear Mr. Berg:

I enclose two copies of a proposal to the World Bank which was written by Professor Querido. I have been through it and am in full accord with it. I visualize my own role in this project, however, as being entirely secondary to Professor Querido's. If you need further information, I would be glad to hear from you or come to Washington if need be, and I am sure Professor Querido would be glad to supply such further information as might be indicated.

Very sincerely,

John B. Stanbury, M.D.
Dear Sirs,

The enclosed proposal for a project aiming at the eradication of goitre and cretinism in Indonesia has been developed in consultation between A. Querido (Leiden, Holland), R. Djokomoeljanto (Semarang, Indonesia) and J.B. Stanbury (Boston, U.S.A.) against the following background, information and experiences.

1. A. Querido has been involved over the past years with several missions to Indonesia. Some of them were for the WHO as a temporary consultant in workshops on objectives of medical education, evidently geared to community medicine. Two other visits were related to government mission for bilateral aid in hospital upgrading, and finally a field survey on goitre and cretinism in central Java was performed in a cooperative project from Semarang medical faculty and Leiden medical faculty with Querido as project leader. Preceding these recent investigations a 6 months expedition was carried out in 1962 in the Central Highlands of New Guinea with the same objectives. And finally he visited Latin American countries and attended workshops in that area as a temporary consultant for endemic goitre and cretinism problems of the Pan American Health Organization.

2. J.B. Stanbury first became interested in studies on endemic goitre in 1951, when he took a team to study the problem in Western Argentinia. In 1961 he became a consultant to the Pan American Health Organization for endemic goitre in Latin America. He organized a group of investigators from a number of countries into a functioning group which continues to sponsor and undertake research and field programs. He is a consultant to studies on endemic goitre in central Africa. He has organized and participated in many meetings on thyroid problems in many countries.

3. The extensive investigations in central Java have been prepared for about 2 years by an Indonesian doctor from Semarang, Dr. R. Djokomoeljanto. This colleague is now for one year in Leiden in order to work on a thesis based on the central Java observations and for training in methods necessary for endemic goitre and cretinism. The first part of his thesis is concerned with the collection of existing information on goitre and cretinism in the entire Indonesian Archipelago. A map has been constructed of these data, and is attached to the project proposal.
As you will understand the financial estimates are rough approximations. Some are based on informations from firms with experience in Indonesia. For salaries of full time academic staff generally $300.- per month are used as tentative level. Training abroad is estimated to cost for a single person, travel included, about $10,000.- per year.

The Indonesian Health Authorities are aware of the problem of endemic goitre and cretinism in Indonesia. As you certainly know however, in this huge country, with its great problems of development and the logistic difficulties, many obstacles may be encountered when the central government tries to implement measures, because of lack of sufficient adequate personnel. In the Department of Health (Departemen Kesehatan) the key persons are: Dr. Djaka Sutadiwiria, secretary general, and Prof. Dradjat D. Prawinanegara, director general of health sciences. They are well informed about our activities in central Java.

Since however an extensive program as proposed for the entire country, has to get under steam first, and experiences have to be acquired on a smaller scale, I like to raise the question to consider first a contact with the province of central Java (in fact a large country with 25 million people), with Semarang (Dr. R. Djokomoeljanto) as headquarters. The governor of this province, mr. Moenadi, is very active and interested, and will certainly welcome and support such action, as we know from experience.

We sincerely hope that our proposals will be received with approval. We are looking forward to receive your comments in not too distant future.

Most sincerely yours,

A. Querido.
December 6, 1973

Professor Widjojo Nitieastro
State Minister
BAPPENAS
Taman Suropati 2
BAPPENAS Building
Jakarta, Indonesia

Assistance for Possible Nutrition Project

Dear Professor Widjojo:

With reference to Mr. Baldwin's letter of October 24, 1973, I now attach a resume of the conclusions of the nutrition consultants who visited Indonesia in June, 1973. From the report of the consultants' visit, and from your discussions with Mr. Zaidan, it appears that there are several components which together might form the basis for a project designed to help in the preparation for a major national attack on the malnutrition problem. The Bank would be prepared to consider assisting the Government in developing these components subject, however, to a further in-depth review of their technical feasibility. The Task Force was, inter alia, charged with making preparations for a Bank project and the Government of Indonesia may wish to consider the following possibilities for Bank assistance:

a) a study to develop operational nutrition programs based on the nutrition policy set out in the second Five-Year Plan;

b) a feeding program to be delivered in association with the health and family planning services delivery systems for pregnant mothers and young infants, say in one large regency, with nutrition education and evaluation elements;

c) support for the development of effective food technology and nutrition institutes;

d) fortification of salt with iodine (and/or a mass inoculation campaign against goiter); and

e) a training program to develop the manpower required for a national attack on malnutrition.
Regarding the next operational steps, you may remember that during your discussion with Mr. Zaidan the question was raised as to whether nutrition elements to be financed by the Bank should be included in a broad nutrition and population project or whether the nutrition elements should be included in a separate project. We have come to the conclusion that it would be easier and more efficient for us to consider these elements in the context of a combined population and nutrition project. We are fully aware that nutrition and population are quite separate activities administratively in Indonesia, and I wish to assure you that we will view the nutrition and population elements as quite distinct operations, in particular with respect to their implementation. We would very much like to learn from you, in due course, of the Government's plans to tackle the nutrition problem administratively and, in particular for the immediate future, where responsibilities for the preparatory steps will be assigned.

I might also add, that the preparation time necessary for the proposed project elements outlined above differs greatly. In particular, the study to develop operational nutrition programs in the context of the Second Five-Year Plan is an essential preliminary to the preparation of the other elements and should start at an earlier stage. We would be prepared to consider funding it retroactively from the proceeds of the proposed second population-nutrition credit or, if possible, from the Technical Assistance credit. Mr. Gordon and Dr. Ranganathan are in the picture on this and I am sure they would welcome your discussing further this and other points I have raised in this letter. The Bank would be prepared to assist the Government in preparing the terms of reference, estimating the costs and discussing the implementation and timing of the proposed nutrition study if the Government so wishes. I look forward to seeing substantial progress in the planning and conceptualization for this activity by the time I visit Jakarta in the first week of February next year.

With best wishes.

Yours sincerely,

K. Kanagaratnam
Director
Population and Nutrition Projects Department

Attachment

HJones/dlf

Cleared with and cc: Mr. Gordon (Jakarta), Mr. Berg (PNPD) & Mr. Gould (East Asia & Pacific)

cc: Mr. Baldwin, Mr. Zaidan & Mr. Jones (PNPD)
Dr. Ranganathan (Jakarta)
Indonesia Div. Files
INDONESIA: Report of a Nutrition Identification Mission

1.01. A Bank mission visited Jakarta in June 1973 to review nutrition activities in Indonesia and to recommend to the Bank areas of possible assistance in the nutrition field. It consisted of Dr. K.V. Ranganathan of the Bank's Resident Staff in Jakarta, and Mrs. J. Jackson and Mr. S. Venkitaramanan (consultants); Dr. Anderson (consultant) was closely associated with the mission's work. The following report summarizes the mission's findings and recommendations.

1.02. The mission found that there was considerable interest at all levels of government in Indonesia in developing a broad based national nutrition program during the second five-year plan period. BAPPENAS has established a task force to recommend a nutrition policy and a nutrition plan. There is need for technical assistance to optimize these intentions. In this regard, a WHO nutrition planning mission is to visit Indonesia in January 1974. There is an urgent need to coordinate the nutrition activities of government departments and international agencies. The multiplicity of institutes working more or less independently has a diluting effect on potential and resources. Institutional development would be an important project component.

1.03. The nutrition task force has also been asked to identify possible components for a Bank financed nutrition project. The task force was provided with a background paper on nutrition planning by Mr. Venkitaramanan. There are two lines of possible assistance which are not mutually exclusive.

(a) The first is to develop nutrition components in the second population credit, preparatory work on which has just started;

(b) The second is to wait until the Government has determined its policy and program and consider project development from that point.

From the possible timing of the effectiveness of the second population credit, however, it appears that the inclusion of a nutrition component might unduly delay the development of a national nutrition program. Preparatory work by the task force, assisted by a consultant group as required, would be faster. Components of an IDA assisted project might include:

a) a study to develop an operational nutrition programs based on the nutrition policy set out in the second Five-Year Plan;

b) a feeding program to be delivered in association with the health and family planning delivery systems for pregnant mothers and young infants, say in one large regency, with nutrition education and evaluation elements;
c) support for the development of effective food technology and nutrition institutes;

d) fortification of salt with iodine (and/or a mass inoculation campaign against goiter); and

e) a training program to develop the manpower required for a national attack on malnutrition.

The State of Nutrition in Indonesia

2.01 Any inquiry into nutrition of the people of Indonesia is hampered by lack of reliable statistical data and of planned investigations into particular problems. However, Government officials and staff of international organizations agree that malnutrition is widespread, varying in degree from frank clinical deficiency to the sub-clinical state.

2.02 Infant and toddler mortality is a useful indicator of the nutritional status of the vulnerable section of the population. In 1956, 1960 and 1968 "diseases peculiar to early infancy" have ranked first in the tables of dominant causes of mortality issued by the Ministry of Health. The statistical data for Indonesia (1963) of infants and toddlers show high levels of mortality in 0-4 year old group (about 90 per 1,000 live births) and probably understate the situation. The latest figures from Bali (1972) record infant mortality as 125 per 1,000 live births, i.e. half the total deaths in the island. Estimates using data from the 1961 and 1971 censuses show an average infant mortality rate in the intercensal period of 137 per 1,000 live births for Indonesia as a whole. The rate was higher in rural areas (147/1,000) than urban areas (112/1,000). By comparison, the infant mortality rate in 1970 in the United States was 21 and in Sweden 13.

2.03 The effects of undernutrition in pregnancy are seen in premature, feeble babies with high mortality and morbidity rates. The survivors have impaired physical growth. In addition, malnutrition before birth interferes with the development of the brain and the resulting children are slow learners with a lower IQ than well nourished children. The debilitated mother is unable to care for her children properly, thus decreasing their chance of survival.

2.04 The average diet is predominantly carbohydrate with a low protein and fat content with rice the most significant foodstuff for both calories and protein. The FAO commodity analysis of 1970 indicates the food supply per capita per day has remained fairly stable over the last 10 years. If the distribution of foodstuffs were equal, 1,900 calories would be marginally adequate. Food distribution in a population never is in accordance with physiological needs and although there is sufficient food in some areas throughout the year, recurrent food shortages are a feature in less agriculturally favourable areas and among the low income groups. In 1968, Van Veen pointed out that 49% population lived in areas where the food supply fell
below the national average. The high rate of population growth is likely to bring about a worsening of the situation. Shortage of calories reduces stamina and the ability to sustain physical work. The effect will be marked among adolescents whose food requirements are higher than for adults.

2.05 Protein availability of 44g per caput per day (6g from animal sources) has changed little in the years 1960-70 and is undesirably low. The utilization of the protein for tissue formation is likely to be suboptimal due to relative deficiency of some essential amino acids. Health staff report that protein malnutrition is commonly seen in pregnant and lactating women, toddlers and children. Infants make good progress whilst breast fed but their condition deteriorates after weaning. Protein malnutrition results from a combination of an inadequate weaning diet and poor hygiene. The severe form, Kwashiorkor, is seldom seen at the health centers now.

2.06 Goiter is prevalent in the mountainous areas and the incidence has increased since iodisation of salt was stopped. A survey of school children was undertaken by the Department of Nutrition, University of Indonesia and the Ministry of Health. Goiter was present in 60-90% children in areas of Bali, East Java, North and West Sumatra.

2.07 Anaemia is widespread throughout Indonesia and is present in both sexes. The recent Labour Substitution Study undertaken with Bank assistance found that 45.5% of a sample of about 1,000 male road and canal reconstruction workers as well as rubber plantation workers, most of whom suffered from iron deficiency anaemia. The Department of Nutrition, University of Indonesia found anaemia present in 60-70% pregnant women. In a random sample of pregnant women in Bali (rural and urban areas), 50% women had haemoglobin levels less than 9g haemoglobin %. Both iron and protein deficiency were considered to be contributing factors. Although the prevalence of anaemia is high, intensive studies of its etiology have not been undertaken.

2.08 Food tabus have a strong influence on the diet of pregnant and lactating women, infants and toddlers and they operate to restrict the use of some of the available foodstuffs. One consequence of the application of food tabus is the Vitamin A depletion of the mother during pregnancy when she avoids fruit and leafy vegetables. Another is that there is a high incidence of Vitamin A deficiency in infants after weaning. Deficiencies of the Vitamin B complexes and of Vitamin C are seldom seen.

2.09 The effects of poor diets are exaggerated by concomitant diseases such as hookworm, and ascaris and in some areas cholera and malaria. Infections increase the need for protein and other essential nutrients. The result is high infant mortality and morbidity, retarded development and a reduction in both mental and physical capacity.

2.10 The precise nature and magnitude of the nutritional deficiencies requires further investigation but sufficient is known to indicate an urgent need for corrective action. This should include an examination of the implications of nutritional deficiencies for national development. The effectiveness of improved nutrition as a means of reducing the severity of childhood infections and of preventing forms of blindness, anaemia and retardation...
has been clearly established for some time. The case for investment in better nutrition on other grounds has only recently been advanced and is as yet less clear. But one could conclude that because malnutrition interferes with a child’s motivation and its ability, it limits the potential payoff of an investment in education. In many poor areas, the uncertainty of raising children to a productive age because of high infant and child death rates induces over-compensation which if often assumed to be a major factor in the bearing of large families. Although a substantial lowering of infant and child mortality as a means of influencing birth rates is not sufficient of itself, overcoming malnutrition, the prime contributor to child mortality, may be an important factor in the lowering of the population growth rate in the long run. One can also assume that improvements in nutritional status will increase a worker’s productive capacity, and as a result increase the flow of earnings. There are other areas in which improved nutrition could be expected to yield other economic benefits, but in some ways the most important benefit is its contribution to human well-being.

Research and Development Studies

3.01 Indonesia has a long history of good nutrition work dating from the time of Eijkmans but surprisingly little data on the overall nutrition status of the population is readily available. Some of the information that exists is not easily available and the coverage is very spotty. There is a lack of data on the national level relating to infant and maternal mortality and causes of death, birth weights and growth rates of infants and children, as well as the incidence and severity of malnutrition. Statistics seen in the provinces are unreliable on the grounds of sample size or the bias connected with the relatively small proportion of the population who use the health services.

3.02 The Institute of Nutrition, Bogor, has compiled a bibliography of published research works and there have been a number of planned surveys, some unpublished. Household food consumption and food selection data will be available later this year for AMP areas. A broader picture would emerge if the published and unpublished studies were gathered together. Nevertheless, the planning schedule for a nutrition program should make provision for selected surveys in the target area under the guidance of research institutes or universities. The surveys should be chosen with evaluation in mind.

3.03 Studies of the nutritional implications of agricultural, industrial and trade policies should also be undertaken. Price policies may act in a manner which is injurious to nutritional objectives whereas a small shift in prices may enable increased production of commodities which are essential from the nutritional point of view. Similarly, trade policies may lead to the export of important food items.

3.04 The two most important institutions undertaking research work in the nutrition field are the National Academy of Science (LIPI) and the Institute of Nutrition at Bogor. In the biological sciences, fundamental research in genetics seeks to increase productivity through new varieties of soya bean and rice. Other investigations aim at increasing the amount of available
food by better methods for preservation of fish and utilization of soya bean. In 1970, the National Institute of Economic and Social Research (LEKMAS), one of the component institutions of LIPI, collaborated with the Directorate of Nutrition in the Ministry of Health in a study on the social and cultural aspects of food patterns and food habits in five rural areas of Indonesia.

3.05 The Institute of Nutrition at Bogor is the most important center for nutrition research in Indonesia. It works in collaboration with the Directorate of Nutrition and the Institute for Medical Research, Ministry of Health and the Department of Research, Ministry of Health and the Department of Nutrition, University of Indonesia. The Director also has a teaching role in the SEAMO course (see para 5.01) and at the Agricultural University, Bogor. The staff of 20 graduates in biological sciences and nutrition are currently engaged in a number of investigations:

- Nutrition anaemia in pregnant and non-pregnant women, adult males and children.
- Nutrition survey in pre-school children.
- Food analysis and the biological evaluation of food.
- Food consumption patterns in different areas.
- A study on fermentation of soy products.
- Aflotoxins in food and their relation to liver carcinoma.
- An acceptability trial and evaluation of a protein rich food supplement. This foodstuff consists of rice flour, small fish meal, powdered dried tempe and peanut oil.
- Surveys for the incidence of goiter and of Vitamin A deficiency have been completed.

Much of this work is of the survey type to define the problem, rather than research in depth. Equipment seems reasonably adequate for present needs but this situation could change with an alteration in research objectives. There is a paucity of library facilities, including staff and finance for the purchase of books and journals, and equipment to use with microfilms.

3.06 Some work in food technology is being done in the Agricultural University at Bogor, in the Institute of Chemistry and Chemical Technology, which is also in Bogor, and at the Institute of Technology in Bandung. Laboratory scale equipment only is available and there is need for expansion to pilot scale. There is no proper food technology institute in Indonesia and the development of such an institution should have high priority.
Government Departments

4.01 There is a Directorate of Nutrition in the Ministry of Health and a Food and Nutrition Unit in the Ministry of Agriculture. The Food and Nutrition Unit was formed with the help and advice of a Consultant for FAO in 1969. It exists on paper but does not meet and has not implemented the policy set out in the Decree of Minister of Agriculture No. 121/kpts/vm/3/1968.

4.02 In Government, both "vertical and horizontal" coordination are necessary and need to be strengthened. Within a department, there should be direct transmission of ideas and instructions from central Government to the provinces and then to regencies, districts and villages. Policy and priority need to be clearly stated to obtain effective action through such a chain of authority.

4.03 As a result of the discussions of the mission, Mr. Sujoto of BAPPENAS set up a task force of representatives of concerned ministries. The task force first met on June 26 under his chairmanship to formulate a national policy on nutrition for Pelita II (the second five-year plan). It will determine the areas of coordination between Government Departments. The multi-disciplinary character of nutrition activities requires cooperation at all levels from senior officials to "field" workers.

4.04 It is significant that BAPPENAS has taken this action as it is a definite expression of interest and can well lead to a higher priority for nutrition in Pelita II. The same expression of an accentuation of interest was conveyed to the mission in meetings with Dr. Selo Soemardjan, Adviser to the Vice President of Indonesia and with Dr. Soemarlin, Minister of Administrative Reforms. A subcommittee of the task force comprising representatives from the Ministries of Health and Agriculture was appointed to work out a nutrition project for discussion by the task force.

Training and Manpower

5.01 The highest level of training in nutrition in Indonesia is the post graduate course offered by the South East Asia Ministers of Education Organization (SEAMEO) since 1969. The course runs for 10 months and has a capacity of 30 students, presently training 12-15 students per year. In 1973, four Indonesian doctors are in training for the staff of medical schools.

5.02 The Academy of Nutrition, Ministry of Health, offers a Diploma of Nutrition. Prerequisites for the course are 12 years schooling and the applicants outnumber places ten times. Forty students enter in the first year and 12-15 graduate after the third year when they are bound to serve Government for three years. There are 200 nutritionists employed by Government mostly in the Medical Department where they are employed in hospital food services. Relatively few graduates have posts as public health nutritionists although a number are concerned in training of ancillary staff. The diploma is not recognized in America as equivalent to a degree course.

5.03 The Ministry of Health also provides a two-year course for assistant nutritionists who enter this training after nine years schooling. They are employed in hospitals.
5.04 Departments of Nutrition exist in Medical Schools, usually within the schools of Public Health. They are concerned with undergraduate teaching in the medical faculty and do not offer specialist training.

5.05 The salary for nutritionists is Rp. 4,000 per month and for assistant nutritionists, Rp. 2,500 per month. As a result of the low salary rating, many nutritionists seek additional money by lecturing in a number of courses. Consequently, there is little time for research and perhaps not enough attention paid to the responsibilities of the official appointment.

International Assistance

6.01 The international agencies have a fragmented approach to nutrition and have a number of programs with different objectives in operation in various provinces. The site of the operation seems to be at the whim of the authorities in the area. Coordination of these inputs within the framework of a nutrition policy should increase their effectiveness in improving human welfare, and would be welcomed by international staff.

6.02 Mention is made of some of the programs.

(i) WFP supplies a supplement of milk powder through about 2,400 MCH centers. Attendance at the centers varies in different areas but does not involve more than 20% of the eligible population. It has been stated that milk powder is an unpopular food but attendances at the centers fall when the supplement is not available. Supplies have been inadequate and distribution from the centers has been limited to selected cases. WFP donates food for work to farmers and laborers in projects in East Sumatra and Central Java. The reports have been favorable in terms of acceptability of the food (WSB) and increased productivity.

(ii) FAO is assisting in Applied Nutrition Programs in East, West and Central Java, North and South Sumatra, Jogjakarta and Bali. These programs were started before the collection of baseline data and an evaluation is in progress on a matched pair basis. UNICEF is financing the evaluation by the Department of Rural Sociology, Agricultural University, Bogor.

(iii) UNICEF is committed to supply Vitamin A ampoules to be used in the control of Vitamin A deficiency in children aged 1-4 years. The project, operating through the health centers, will reach 200,000 children in Java in 1973. The planned expansion in 1974-78 will cover 3.75 million children (40% total children) in Java and Bali. Evaluation is with assistance from American Foundation for the Overseas Blind.
(iv) WHO plans to bring a team of nutrition advisers to Indonesia for a four week mission in January 1974 to assist the Ministry of Health in nutrition planning and applied nutrition.

(v) CARE has a school feeding program for 300,000 children in grades 1 to 4 in West Java. The meal consists of Wheat-soy blend (WSB) and sugar, supplying 230 calories and 15.5g protein. About 40% eligible children attend school. CARE has a pilot project in West Java to give a meal to preschool children attending day care centers in plantations.

(vi) Other school feeding programs are supported by Catholic Relief Services and Church World Services.

Priority for Action

7.01 Government medical staff at central and provincial level expressed the need for improvement of the nutritional status particularly of the vulnerable groups. The competing demands on national resources of the more visible remunerative sectors such as industry, transport and communications have resulted in a low priority assigned to nutrition in terms of finance and resources. Nutrition intervention to decrease mortality appeared counterproductive to the national emphasis of higher per capita income to be achieved in part by reduction in population growth. Policy makers need to be convinced that the programs to improve nutrition can have a high benefit cost ratio. The low priority of nutrition has led to little planning in a multi-sectoral manner and a piece meal approach has been made in the past.

Outlines of a Nutrition Project

8.01 The development of project components will be derived from a review of the nutrition situations, an analysis of needs, and a consideration of alternative ways of meeting those needs. The following activities would almost certainly be included as elements of a population project and were submitted to the Task Force for discussion:

(a) Nutrition education with a view to utilizing existing food resources in a more optimal manner;

(b) Supplementation programs to increase the availability of nutrition supplements to the sections of population at risk and with the greatest need for nutritional improvement viz. pregnant mothers in the last trimester of pregnancy, lactating mothers and children in the age group of 0-6;

(c) Production programs to improve the availability of nutritional deficient components - including fortification of food with Vitamin A, iron, and possibly amino acids; industrial production of special low cost food supplements such as incaperina, bal-ahar, corn-soy milk (CSM), WSB; increase of agricultural production of protein rich foods;

(d) Research and Development Studies including surveys of nutritional implications of economic policies in agriculture.
and industry with a view to identifying possibilities of nutrition intervention in those sectors;

(e) Evaluation; and

(f) Training programs to develop the manpower required for a national attack on nutrition.

Possible Lines of Action

9.01 Until the task force has completed its work, however, there can be no clear outline of either a policy or a program for nutrition.

The mission considered two approaches for nutritional improvement in Indonesia:

(a) a nutrition component linked with a second Population Credit; and

(b) a national nutrition program involving a multi-disciplinary approach.

They are not mutually exclusive as (a) could be part of the wider concept (b). Nutrition and population are separate activities in Indonesia and, even if considered as elements of one IDA assisted project, should be considered as distinct operations in respect to their implementation.

9.02 In view of the mutually supportive character of better nutrition and family planning, the Chairman of the BKKN expressed interest in a nutrition education cum food supplementation demonstration program, to be operated through MCH centers. It was suggested that the program should begin in one regency (about one million people) in the province of Central Java. Some guidelines for such a program follow but are not intended to be exhaustive:

1. At central level, a nutrition unit for the program's implementation should be set up. The target group should be pregnant and lactating women and pre-school aged children (0-6 years).

2. In addition to the necessary administrative staff, there should be trained nutritionists in the selected regency whose duties would include:

(a) Training in nutrition of all medical, paramedical and field staff in the target area.

(b) Adaption of the principles of nutrition in terms of the available foodstuffs.

(c) Instruction on food selection to improve the local dietary pattern with particular emphasis on the diets of pregnant women, infants and children.

(d) Practical demonstrations of food preparation.

(e) Preparation of materials for nutrition education and better hygiene.
3. There should be close liaison with information and education officers in the program area. These officers would strengthen the educational impact of the program by contact with people outside the scope of the health department.

4. Community leaders and organizations at the subdistrict and village levels should be closely involved at all stages of program development and implementation. The educational program must reach the household to be effective in improving family welfare and local leadership can do much to sustain interest.

5. Data collection is necessary for the evaluation of the program. The existing staff of the Ministry of Health, doctors, nurses, assistant nurses, midwives, assistant midwives and their assistants would be vitally concerned. They have received instruction in nutrition during their training but seminars, workshops or short courses would be required to give nutrition activities a sharper focus and provide a unified approach to the public.

6. A food such as Wheat Soya Blend (W.S.B.) has been used successfully by WFP and CARE in programs for adult and school children. The cost of food supplements would also cover distribution from the source of supply to the household and include transport, handling charges, and storage, as well as packaging into suitable sizes for distribution. Initially, it is expected the food would have to be imported. But such a program should start only if plans were simultaneously made for the development of an appropriate low-cost, nutritious food in Indonesia from Indonesia food sources. The development of a foodstuff from indigenous sources would require laboratory scale research followed by acceptability trials, then pilot scale experimentation before commercial production. Agricultural policy might need modification to ensure supplies of raw materials. The project would require support in food technology and equipment. A consultant food technologist would be needed together with opportunities for training of Indonesians abroad.

7. Financing for the food supplementation/nutrition education program would be required for:

(a) Salaries of administrative staff and nutritionists;
(b) Seminars, workshops and training courses;
(c) Educational materials, training manuals, pamphlets, posters, slides, films, stationary;
(d) Transport;
(e) Practical cookery demonstrations;
(f) Food supplements; and
(g) Evaluation.

December 6, 1973
Dr. K. Kanagaratnam, PMPD
G. Zaidan, PMPD

INDONESIA: Visit of July 22 to 27, 1973 - Summary of Findings

1. In accordance with terms of reference dated July 11, 1973, I visited Jakarta from July 22 to 27, to review the progress of the current project in general terms and to discuss the nature and timing of possible Bank population and nutrition activities in Indonesia over the next few years. I met in particular with Dr. Soetarno (both officially and privately) and others at the NTPB including the foreign advisors (Dr. L. Saunders, C. Salkeld and J. White), Dr. Jaffa and others in the Ministry of Health, and with Dr. Sujoto in RAPPENAS. Before my departure a concluding session was held with Professor Widjojo, Chairman of RAPPENAS, at which Mr. Sujoto and Dr. Ranganathan were present. The following are the salient points of this visit.

I. Progress of Current Population Project

General Impressions

2. I looked into the current credit in a broad and long-term perspective, paying as much attention to feelings and "atmosphere" as to objective and detailed progress on specific project components. I came away with several impressions.

3. First, that as far as key Indonesians are concerned (in RAPPENAS and NTPB) they are reasonably satisfied with the pace of progress of the project. There were, of course, the inevitable complaints of delays that could be avoided. One reason for this, that was often cited, was the unfamiliarity of Indonesians working on the project with procedures - Bank procedures, procedures in the UN system (in particular, what level - local, regional, or central - of each specialized agency was responsible for what) and procedures in Indonesia itself (mainly the financial procedures for disbursement of funds of development projects, of which population is one). Another feeling was that the hardware side of the project was "too complicated and too slow"; when I pointed out that the project was largely on schedule the initial reaction was surprise followed by a comment to the effect that the schedule itself was too slow. But, notwithstanding these comments, which one encounters usually in the "tooling up stage" of our projects, the general reaction on the Indonesian side was one of general satisfaction with the way things were progressing.

4. Second, that in the international community, particularly USAID, the atmosphere was far more critical. What concerned us most was the tendency to blame it all on the Bank and its procedures. This came home to me prior to my arrival in Indonesia, since my stay in Manila coincided with a USAID conference of USAID regional representatives in South East Asia attended by high level representatives from headquarters (in particular Dr. J. Bowdler, Assistant Administrator, Population Assistance; Mr. B. Gassett, Director, Office of Population; and Mr. L. Rampone, Chief, East Asia Population Division, were in Manila). I did not participate in the
sessions of this meeting but attended enough social functions to get a
flavor of the discussion: during one lunch I was called upon by
Dr. Ravenholt to explain (actually to defend) the progress of the project.
I was at pains to explain that the fact that the project was a credit
rather than a grant and that funds were reimbursed rather than given as
advances was in no way related to the (true) observation that there were
serious delays in salaries reaching the field level. This was true well
before a bank project was developed in Indonesia --- it was one of the
main observations of the UN-Bank-WBG mission that visited Indonesia in
late 1969 --- and as I subsequently found out in Jakarta is also true of
salary expenditures under development projects other than population.
BAPPENAS and the BKKBN are aware that such delays are the result of in-
ternal financial procedures not directly related to the Bank project, but
this is not always appreciated at the provincial and field levels. Third,
I was encouraged --- after an absence of two years from Indonesia --- by the
way key Indonesians in the family planning program are "growing in their
jobs." Unlike a few years ago, they now know their minds, and are less
subject to pressures from various quarters. As an example, they now wish
to develop the second population project themselves rather than rely on
the Bank for this.

Major Points of Discussion:

5. During my discussions in Jakarta, and in particular during my final
meeting with Dr. Widjojo, I raised the following two main points:

a. Simplifying financial procedures. In view of the delays
   at the field level, I asked Dr. Widjojo whether financial
   procedures could not be simplified. The problem was that, in
   addition to the regular Government DIP issued by the Treasury,
   the Bank of Indonesia issues a supplementary DIP equal to the
   UNFA-Bank contribution --- e.g. 80% of the salary in the case
   of field workers in the first year of the project. There is
   a general delay (independent of the Bank project) before the
   money reaches the field, but also the supplementary DIP leads
   to additional complications in the case of the Bank project
   (such supplementary DIPs are a feature of all projects funded
   by foreign agencies). The two DIPs may reach the field at
different points in time so that the field worker will get
20% of his salary of January say in April and maybe 50% in the
summer. There is obviously a need to rationalize this system
and to make it work more rapidly. I suggested to Professor
Widjojo that perhaps a coordinating group could be formed just
to look into this question. The group would include representa-
tives of BAPPENAS (Sujoto) the Bank of Indonesia and the BKKBN
and meet perhaps every other week. This was a proposition that
Widjojo welcomed; he made a suggestion in passing that perhaps
the salaries should be, as far as procedures are concerned,
transferred from the development budget to the current budget
where there was little or no delay in paying salaries, or possibly
another solution might be to have just one DIP, although I get
the impression that this might be difficult, since the supple-
mentary DIP is a feature of all other foreign assisted projects.
b. The need for more staff to support Dr. Hafid. Dr. Hafid has been asking for more staff, but has had difficulties in having his requests met. In fact, I gather that Dr. Soewardjono is thinking of replacing Dr. Judiono with Supari, thus depriving Hafid of a useful member of his staff. I brought this matter to Professor Widjojo's attention and let it go at that. This is a question that we should perhaps emphasize again in our communication this time to both the BKKBN and BAPPENAS.

II. Future Population and Nutrition Activities

Population

6. As far as the second population credit is concerned, I elicited the response of the Government as regards timing and content, being careful to underline that the Bank was happy not only to have the Indonesians prepare this project, but that we also wanted to follow the pace which the Government felt would best respond to the Indonesian situation at this juncture. The response I got was as follows. The Department of Health (General Jaksa) as well as BAPPENAS (both Professor Widjojo and Mr. Sujoto) would like the Bank to proceed rapidly. Professor Widjojo's comment on the proposed time-table (see below) was to question whether things could not be speeded up. As far as Dr. Soewardjono is concerned, his reaction was ambiguous, praising for speed at one time, and cautioning against starting a second project before the present one was well on its way ("before the buildings are visible") another time. (Hafid, unfortunately, was not in Jakarta during my visit.) In the light of these reactions, I worked out the following time-table with the concerned Indonesians: It is precise over the next year, but it leaves some flexibility as regards the timing of appraisal and board presentation. This can be determined in the light of the Governments wishes a year from now. Presently, a task force under the chairmanship of Hafid (including Saunders and others) is in the process of drafting the Second Five-Year Population Plan; it is not expected to finish its work before November, 1973. Consequently, since Hafid already is overworked and since it is desirable that he play a central role in developing the second project, I felt that work on the second project should not start before January, 1974. A task force formed for this purpose should have both BAPPENAS and Ministry of Health representation in addition to the BKKBN. Subcommittees for the provinces should be formed to assist with the details of project development at the field level. In November, 1973, prior to the formation of the task force, the Government should agree on a broad framework for the second population credit which would then be developed by the task force. There is a general consensus that this could be a Bank project (without UNFPA participation) covering Java — in particular Central, West Java and Jogjakarta for health and training facilities. The latter facilities should be defined on a preliminary basis for the task force, as should other possible project components such as population education, beefing up the field worker program, financing the commercial distribution of contraceptives, etc. I suggested that a small team from the Bank go out to Indonesia in January, 1974, to brief the task force on the data required by the Bank to avoid detailed work to be done by this task force until a clear understanding of our requirements is obtained. Under this schedule, the task force would
have a report ready after three or four months, and would send it to us in Washington. The appraisal mission could then be timed to visit Indonesia as soon thereafter as is desirable; we have some flexibility in leaving the project in FY75 or slipping it into FY76, depending on the desire of the Indonesians. I indicated to the Indonesians that we would confirm in writing in September this understanding regarding the time-table as well as the approach we propose to pursue with respect to nutrition (see below).

Nutrition

7. On the substantive side, the elements which can be financed and developed more or less quickly, are the following. First a supplementary feeding program, on the India model. The elements of such a project which would cover, e.g., a regency, would be nutrition education of the target groups (pregnant mothers and young infants) through the field workers in that regency (incidentally, I think it would be a mistake and an unnecessary diversion of effort to train field workers in nutrition education as suggested by Dr. Anderson) and the distribution of a high protein processed food which would be imported (such as CSN), since I understand that as yet there is no local production of a high protein food. A second activity that can be quickly financed (and is not very costly to the Government) is fortification, in particular of salt with iodine. A third possibility is the development of food technology in one or two institutes necessary to produce a high-protein-rich food. Last, but not least, is the provision of a study in the technical assistance component, to develop a broad nutrition program for the whole country over a substantial period of time from which a broader and more comprehensive nutrition project for Bank financing may develop. In this, the Government will have to clearly spell out its priority for the nutrition sector so that a nutrition plan can adequately reflect these. For example, supplementary feeding programs if provided free could strain the resources of the country to an unreasonable degree (though the tradition of self-help of Indonesians is encouraging since if they are made to pay for this food, then this would be a self-financing project).

Fortification, of course, is a low-cost proposition that can be introduced immediately, but perhaps the most important long-term aspect is the development of nutrition education to make people aware that they have to eat a balanced diet and to exploit to the maximum the limited food resources of the country. Professor Widjojo mentioned that the President the previous Tuesday had asked several of his Ministers to come up with proposals to deal with the nutrition problem of Indonesia. The Government is acutely conscious of this at present as a result of the rice shortage. He asked the Ministers of Agriculture, Education, Health, Industry and People's Welfare to look into this matter. Given this high level interest all the proposals I made were welcomed by Professor Widjojo.

8. As regards next steps, the basic question is how to develop this project — as part of the population project or as an independent nutrition project. Professor Widjojo made the point that nutrition is a separate program and that the EKBN is presently too overloaded so that a separate implementation machinery is necessary for nutrition. However, he had no strong views as to whether two projects should be developed by the Bank or just one "population and nutrition project." Such a project would include...
elements of nutrition that are related to population, i.e. the supplementary feeding programs, as well as other elements "pure nutrition" elements (e.g. fortification, nutritional studies, etc...). This latter approach would have the advantage that internal procedures would be simplified (one appraisal report, one set of negotiations, etc.) but for practical purposes the project would really be two sub-projects. Alternatively, we could have a nutrition project which would be modest, incorporating nutrition studies, fortification and the development of food technology (supplementary feeding could fit in with either the nutrition or the population project). These studies would then lay the basis for a second more comprehensive nutrition project. Whatever the decision on this - i.e. whether to have a combined nutrition and population project or a separate nutrition project - it would be unwise to press for a very large and comprehensive nutrition project at this stage as we did in the case of population since both knowledge of the sector and the priorities of the Government appear to be different now than they were when the first population credit was being developed. In these circumstances, we should proceed modestly at first, expanding our activities as we gain knowledge in this area and as the Government priorities become more clearly defined.

cc: Mr. Goodman, Director, CP I Asia
    Mr. Weiner, Director, Projects, Asia
    Mr. Baldwin, Deputy Director, PNPD
    Mr. Berg, Deputy Director, Nutrition, PNPD
    Mr. Kang, PNPD
    Mr. Jones, PNPD
    Mr. Burfield, PNPD
    Dr. Ranganathan, Jakarta Office
    Mr. van der Tak, Director, CPS
    Mr. Lee, CPS
    Mr. Burney, CPS
    Mr. Armstrong, CPS
    Mr. Raizen, CPS
    Mr. Engelmann, CPS
    Mr. Squire, CPS
    Mr. Lithgow, CPS
    Mr. Sandberg, CP I, Asia
    Mr. Gould, CP I, Asia
    Mr. Grosvenor, Controller's
    Mr. Elstein, Inf. and Public Affairs Dept.
    Div. Files

GZaidan/rb

360-IND
July 12, 1973

Dear Alan,

I came back on July 1, 1973 and have been busy since. I hope you had a good trip to Brazil and Chile. You must have seen, by now, my discussion paper and note to Ranganathan. The action taken by Suojoto is very promising. My write-up on the detailed discussions is being typed and I will send it next week.

While Dradjat is still a key figure in the nutrition scene, he is too busy to concentrate on the multi-dimensional plan. The new personality emerging is Suojoto. He is well intentioned and occupies a key position. He has, of course, to take instructions from the Minister of Administrative Reforms and Planning, Dr. Soemaslin with whom I had a good meeting two or three days before I left. Soemaslin is a PhD from Berkeley and was extremely receptive to our ideas — although in a cautious way. The relative weakness of Suojoto in the political hierarchy is, in my view, compensated by his position as Deputy Chairman in charge of social services and his systematic and coordinated action. The first meeting of the task force under his chairmanship showed a strong well-ordered personality in control of the whole group.

Darwin Karjadi is a very interesting person. He has the problems of a Chinese Indonesian. He has, however, a good team working with him. He has to be exposed to some more of the multisectoral aspects.

I found Birowo good but unavailable. He is the kingpin of the Indonesian Agr. Planning system. It is good to get him involved. But, it would be unrealistic to expect him to produce a draft of a project in time. If he does, he may be forced to produce something of a halfbaked nature. He told me he would be meeting you in August—September 1973. In the second level, I found Djumadías Abunain, the Assistant Director of Nutrition the best informed and a person willing to do hard work. He is the person whom I have suggested to Suojoto for being the keyman of the task force.

So much for the present. I hope we can keep in touch. Best regards to you and Mrs. Berg and love to the kids.

Yours sincerely,

Sgd/Venkit
(S. Venkitarmanan)

KK wrote to me asking me for the copy of the biodata. I sent it yesterday.
Population Credit 300-IID

1. Construction of buildings. As long way back as 1969 when the first ISRN/UN/110 mission visited Indonesia, buildings for MCH/FP centers were discussed with the various institutions. Subsequent to this, the pre-appraisal and appraisal missions which visited East Java discussed the possibility for buildings of about 200 MCH/FP centers in East Java which have now formed part of the component to be financed under Credit 300-IID. Till date not even designs for these simple MCH/FP centers are ready even though the Governor of East Java with assistance from the provincial BKKBN, the Inspector of Health and the Provincial Works Department has selected all the required sites and in many cases acquired them also. Subsequent to the visit of the supervision mission in 1975, the FIU is still working on site approval but the design for the MCH buildings are not yet ready. It is my opinion that the architectural briefing required for the design of buildings from the point of view of the appointed architect is too elaborate and almost impossible to get under Indonesian condition. For example, the architect required information on such minor details as the position of women for insertion of IUD, the detailed breakdown of anticipated number of patients using the center with breakdown on age and sex. Even though ideally such requirements are reasonable, it is a point for decision whether such elaborate architectural briefing could be expected for the design of small buildings like the MCH centers. In addition the architects also required detailed data on environment and soil condition which may be relevant in the case very big buildings but I am not sure about their importance for the design of the small MCH/FP clinics. At this point of time the architects according to their schedule will require at least two more months for the design of these buildings and the construction is expected to be completed by the year 1978. In other words from the time of the visit of the first mission, it is expected to take nine years for the construction of about 200 MCH/FP clinics in East Java. Could we not speed up this process so that the MCH/FP centers will be constructed earlier than the year 1978? This is particularly relevant since we know that the BKKBN has been able to design and complete the construction of the FIU building (which is much more elaborate) within a period of three months. Incidentally I should also mention that the design of building has not even started till date.
In view of the elaborate and complicated architectural exercises that are required, everybody in Indonesia is becoming wary of requesting the Bank for the construction of buildings for the family planning program.

2. It is being often repeated that the BKKBN and the PIU have not shown the competence for managing the implementation of the project under Credit 302-IND. Even though there is some justification for this feeling, it is my opinion that the PIU and the BKKBN are not to be solely blamed for this unsatisfactory. The Bank was aware of the limitation of the management capacity of the PIU and the BKKBN and this was the main consideration for the Credit 302-IND providing for the recruitment of the management advisory firm for helping the PIU and the BKKBN in project management. Here again I have to point out that the management advisory firm on its part have not adequately understood their responsibility. At the same time I agree that the PIU and the BKKBN on their part have not been able to efficiently use the services of the management advisory firm. This is perhaps due in part to the composition of the consultant team which is heavily weighted in favor of architectural design and construction management (3 out of the 4 consultants are architects) and very limited in its capacity to help the BKKBN in improving its management role. At the same time there is need for the PIU and the BKKBN to recruit quality staff in which the BKKBN is facing problems because of the shortage of quality personnel available. Prof. Raisid has informally requested that he may be provided with an expatriate staff member as his executive secretary so that such a person could work with him and a counterpart to be appointed by the BKKBN. When the expatriate staff member leaves, his Indonesian counterpart could take over as executive secretary. Could this be accomplished by changing the composition of the management advisory team so that one of the team members could function as the expatriate executive secretary for the next two or three years? If the above suggestion is agreeable, we may have to discuss it further with the BKKBN and the management advisory firm.

3. As far as the detailed supervision of the implementation of the project under Credit 302-IND, there is need to discuss and decide the specific role of the Resident Mission in Jakarta. I have discussed this with Mr. Burfield, Mr. Kacemish and Mr. Jones during their visit to Indonesia. If the main focus is supervision and guidance for building construction program, there is need to explore the possibility of providing the needed architectural expertise in the Resident Mission for technical guidance. On the other hand if the focus is supervision of the overall project of which building construction is a component requiring no technical day-to-day guidance, then the population specialist in the Resident Mission should be able to discharge the functions required in the supervision of the project.

Phase II Population Credit

Identification Mission comprising of myself, Dr. Anderson and Mrs. Jackson is working on this and we hope to send our report through Dr. Anderson when he returns to Washington by the middle of July 1973. I am attaching my note on this which gives a brief account of the possibilities at this stage.
Nutrition Project - Indonesia

I am attaching with this note a copy of the note from Dr. Venkitaraman which gives a broad idea on the possibilities of a nutrition project for Indonesia.

cc: Dr. Kanagaratnam
Conclusions and recommendations of the Identification mission

The following conclusions and recommendations are based on the reports submitted by Mr. Venkitaramana, Dr. Anderson and Mrs. Jackson as well as my own impressions of discussions with the GOI and other international and national agencies concerned.

Nutrition Project - Indonesia

There is a good interest at all levels in Indonesia in developing a broad based national nutrition program during the second Five-Year Plan period. This interest is becoming keener during the last few weeks because of the concern in demand for rice exceeding possible supply. The President of the Nation, the Vice-President as well as Prof. Widjaja are willing and keen to give very high priority for Nutrition and treat it on an emergency basis. At present, the efforts in the nutrition field are fragmented and not sustained. The BAPPENAS has set up a task force to recommend a nutrition policy and a nutrition plan for the second Five-Year Plan period. These are good intentions but the GOI will need intensive and sustained technical assistance in order to achieve the above goal. Also, the possibility of a Bank-financed nutrition project will be fully dependent on this technical assistance. The following recommendations are made to help GOI to reach the stated objective of arriving at a national policy for nutrition as well as developing a broad based nutrition plan for the second plan period.

1. Work closely with the WHO nutrition team that is expected to be in Indonesia in order to help the BAPPENAS in preparing the economic justification of a nutrition program during the second Five-Year Plan period. The same mission along with IBRD could also help the GOI in exploring the possibility of coordinating the various nutrition projects currently under way like the ANP, CARE project, etc. so that they will supplement the national nutrition program of Indonesia during the second Plan period.

2. Provide technical assistance to GOI through BAPPENAS for the following areas:

   a) Short-term nutrition planner for about 3 to 6 months to work with the task force in developing the nutritional plan during the second Plan period.

   b) Technical assistance for drawing up plans for financing the development of food technology in Indonesia.

   c) Assistance for required surveys and studies to determine and decide on the nutrition plan for the second Five-Year Plan period.

3. Recruit and second to the Resident Staff a member (who could also be responsible for Population Projects) on the same basis as was done for the development of Population Credit I (IND-300).
Phase II of Population Project - Indonesia

The BKKBN, BAPPENAS as well as the Ministry of Health are very keen to have the Second Credit made for the Population Project in Indonesia. All concerned in Indonesia are agreed on the following constraints which must be taken into account in the development of the Second Credit:

1. The quality and quantity of staffing of the P.I.N. and the BKKBN are not adequate even for the management and implementation of the first credit since the present staff have not yet understood the magnitude of effort that is needed in planning and implementing a program covering many millions of dollars on a national basis. They are still operating as they were when family planning was a small effort and not a national program.

2. The Bank procedures for project development are very elaborate and consumes unusually large proportion of time by the staff which interferes with their normal functions in the implementation of the National Family Planning Program.

3. The project as ultimately negotiated is based on what the Bank wants to do rather than what the National Program needs.

4. With regard to construction of buildings under the Bank project, the cost of buildings (even for simple MCH/FP clinics) are enormously high because of the requirement of recruiting consulting architectural firms and foreign management consultants. Also the architectural and the other architectural requirements are unrealistic for the construction of simple and small buildings resulting in great delays in the design and construction of buildings.

5. The pre-financing for the credit for expenditures which are to be reimbursed by the Bank require more efficient and speedier action at all levels of the Government.

Taking the above constraints into consideration and recognizing the need that the second phase of the credit must be planned by the Indonesians for Bank appraisal, the following recommendations for project preparation for the second phase are made:

a) As the first step the IDA is requested to make available under the technical assistance grant or by arrangement with other international agencies funds for recruiting Indonesian consultants on a full-time basis for assisting the BKKBN in the preparation of the project for financing under Phase II Credit. These consultants must be available as early as possible but not later than August 1973, so that the planning process could start without delay. In addition to these consultants who should be available for at least one year, the services of a foreign consultant on planning is requested for about 6 months.

b) Concurrently the BKKBN agrees that the present task force which is working on the second Five-Year Plan for family planning under the chairmanship of Dr. Hajid, will be responsible for the detailed preparation of the project for financing under the Phase II Credit.
c) It is anticipated that the project under Phase II will be ready for appraisal by the first quarter of 1974 provided BKKBN is financed and the Indonesian consultants are in a position by August 1974. Immediately the project is ready, the GOI will request the IDA send a final "Population Mission" (appraisal mission) for final project appraisal. It is our expectation that such a mission may be scheduled by the end of the first quarter of 1974.

d) In the meanwhile, as the project is being developed the Bank may have to send short missions of one or two experts (consultants or staff) to help the process of project development by giving guidance.

e) The concerned international agencies for giving technical assistance and guidance will be consulted by the BKKBN task force as and when necessary, but they will not be members of the task force.

f) The BKKBN will consult and keep informed the Bank Resident Mission in Jakarta periodically on the progress of the development of the project.

For item (a) the following is the rough estimate of the finances required under technical assistance.

i) Salary for 4 Indonesian consultants for one year at the rate of Rp. 200,000 p.m.  
   \[ \text{Rp. 9,600,000} \]

ii) Travel and per diems for local travel  
   \[ \text{Rp. 4,000,000} \]

Total of (i) and (ii)  
\[ \text{Rp. 13,600,000} \]
\[ \text{or US$ 32,850} \]

iii) For 6 months of foreign advisor at a unit cost of US$50,000 per annum  
   \[ \text{US$ 30,000} \]

Gen discussions with all concerned in Indonesia suggest the following broad areas as possibilities for Bank financing under Phase II:

1. Extension of construction of MCH/FP clinics in the provinces of Central Java, West Java and Jogjakarta estimated cost of about US$5 million for about 350 units.

2. Development of the national training center of IPPA to make it function adequately as a national training resource by providing incremental staff, stipends, equipment, transport, library and on the existing building: estimated cost of about US$3 million.

3. Management study of the present BKKBN, developing an adequate management system for the national family planning program as well as providing management training in country as well as foreign for staff. Included are consultancy and advisory assistance: estimated cost of about US$1 mission including foreign currency expenditure.
4. Funding of additional field workers for the national program at the rate of one field worker for every 7500 population for a five-year period starting 1975. (Additional field workers required will be about 4000 over the existing anticipated number of 8000 by 1975). Estimated cost of about Rp. 1,500,000,000 or US$3.8 million for 5 years.

5. Funding for about 30 mobile teams for the 6 provinces for providing family planning services, estimated cost of about US$210,000 at the rate of US$7000 per mobile unit.

6. Additional inputs for communication component for additional staffing, production of materials etc. for a five-year period, estimated cost of about US$1 million equivalent in local currency.

7. Additional inputs for extending population education activities in the schools in Java and Bali, estimated cost of about US$2 million equivalent in local currency.

8. Foreign technical assistance including fellowships, technical assistance, etc. on a miscellaneous estimate – US$1 million.

9. Nutrition component of the family planning program. Envisaged inputs include training in nutrition education for all field workers as well as a nutrition education cum supplementary feeding as a demonstration project in one regency in Central Java with a population of about one million. Estimated cost of about US$3 million in local as well as foreign currency (depending on import of food in early stages in supplementary feeding).

10. Funding for development for food technology is mentioned under the broader nutrition project, but must be considered as an essential adjunct to the supplemental feeding program if one is undertaken. Estimated cost of about US$1 million equivalent in local as well as foreign currency for equipment, salaries, fellowships, technical assistance, operation expenditures, etc.
1. In accordance with the office memorandum dated May 25, 1973 from D.K. Kanagaratnam, I visited Indonesia from June 4th to June 30th. Mrs. Jackson arrived on June 6th and Dr. Anderson on June 15th. This report is based on my work in connection with the identification of a nutrition project in Indonesia. I have had the benefit of discussions with Dr. Mrs. Jackson and Dr. Anderson who participated in most of the meetings. I have also discussed the contents of this note generally with Dr. Ranganathan. As I am due to leave Indonesia on June 30th, I am submitting this note separately. I hope that it may be of some use in the preparation of the final report by the Mission on Population/Project II - Identification.

2. Programs currently under way in the field of nutrition in Indonesia include:

(i) the applied nutrition program in eight provinces—This is now being evaluated.

(ii) the World Food Program for supplying dried, skim and whole milk powder through 2400 m.o.n. centers.

(iii) Vitamin A mass prophylaxis program with the assistance of UNICEF (This is to be evaluated with the help of American Foundation for the welfare of the blind).

(iv) School lunch programs in West Java organized by CARE covering nearly 300,000 children.

(v) School lunch programs organized by Catholic relief services and Church World Services - These cover less than 50,000 children.

3. General Observations and Summary of Conclusions

(i) Nutrition has not so far been assigned a high enough priority among national goals in terms of allocation of resources although policy pronouncements at the highest level have emphasized its importance.
(ii) Existing nutrition programs are fragmented and lack the coordinating influence of a clearly articulated national nutrition policy which is perceived as a guideline by the provincial and lower administration.

(iii) The national planning body (Bappenas) has now set up a taskforce involving the various concerned ministries so as to formulate clearly the outlines of such a policy and evolve a suitable nutrition program for the second five year plan.

(iv) The Bank may consider sending an economist for a short term to study and advise Bappenas on the economics of nutrition and the cost benefit aspects of nutrition intervention.

(v) This taskforce deserves to be supported by IBRD with technical assistance in the shape of financing Indonesian as well as foreign consultants and staff.

(vi) While there can be a nutrition component in the population project Phase II, there is a bright prospect, with assistance from the Bank and other international agencies, of outlines of an independent nutrition project emerging by December 1973.

(vii) The broader based nutrition project for Indonesia may include

(a) nutrition education
(b) supplementation including fortification
(c) surveys and studies
(d) improvement of research and training institutions.

(viii) The nutrition component of the population project Phase (II) may initiate studies, and include pilot projects for development of an indigenous protein rich food supplement. It may also include programs in respect of (a), (b) and (d) in (vii) above.

4. The nutrition situation in Indonesia

While a number of spot studies have been made by groups of research workers and consultants of international organisations, no nation wide nutritional status survey has so far been undertaken.
Besides, whatever information exists is mostly confined to Java. Regarding foodhabits, however, an excellent sociocultural report has recently been published by the National Institute of Economic and Social Research (Leknas) and the Ministry of Health. This gives an interesting and instructive picture of the foodhabits in different regions of the country. Its limitation is that it is essentially qualitative. Inspite of this limitation, it is, perhaps, the most up-to-date and authoritative baseline study available. It shows how inspite of relatively easy availability of many protein - and vitaminrich foods, tabus lead to low nutritional status of pregnant and lactating mothers and children in the vulnerable agegroups. These are pointers to the need and scope for nutritional education.

On the basis of available information, a broad nutritional profile can be inferred. The country has widely different patterns of food production and distribution in different regions and these observations should be taken as a very rough approximation to what is obviously a more complex regionally differentiated picture.

Vitamin A deficiencies are pronounced.

Goitre is endemic in some areas.

Other nutrition deficiencies emerging from the studies are those of calcium vitamin C, iron etc. Incidence of anaemia has been widely reported among a high percentage of women and men. In one recent study of 571 male workers, 41% had anaemia, iron deficiency being the cause in 90% of the cases.

Protein availability per capita which has remained stable between 1961 and 1970 around 43 grams is low. Animal protein has also been low around 5.6 to 5.9 gms per capita. Estimates of Calories per capita have ranged from 1985 in 1961 to 1926 in 1970. (P.A.O. indicative Plan) A study of recent production and availability data does not show much increase. Even lower figures have been indicated by Dr Van Veen. These figures have to be compared with the recommended daily allowances of 2100 calories per day and 55 to 60 gms of proteins per day. When we take into consideration the skewed distribution of incomes, we would see that a substantial part of the Indonesian population would be well below the recommended daily allowances. There are also wide variances between one region and another. These have been brought out clearly in studies by Mr Van Veen and others.
Suffice it to say that these are pronounced nutritional deficiencies. While the precise nature and magnitude of these are still to be carefully analysed, they are sufficient to indicate the urgent need for corrective action.

5. Priority for action on the nutrition front

It was clear early during our discussions that sufficiently high priority had not been assigned to action in the field of nutrition. This had been because of competing demands on national resources for more visibly remunerative and hardcore sectors such as industry, transport and communications. Besides, in the context of the national emphasis on reduction of growth of population so as to achieve a higher rate of growth of per capita incomes, nutritional improvements with their consequential reduction in mortality appeared counterproductive. Family planning and nutrition programs appeared to aim in contrary directions. All this had led to a situation in which while at the highest level nutrition was recognised to be important, it took low place in terms of allocation of both financial and other resources. This, in turn, led to reluctance on the part of certain sections of Government even to plan boldly for nutritional improvement. One view which was often expressed during discussions was that economic improvement might automatically lead to better nutrition. It was abundantly clear that a continuing task of the highest urgency will be to convince the topmost policymakers that returns to investment in nutrition could be quite high and that on the basis of allegedly adverse cost benefit ratios, nutrition should not be given a low priority. A number of nutritional intervention programs have quite a high benefit cost ratio, especially when we consider programs such as vitamin A prophylaxis to prevent blindness, iodisation of salt etc. If the highest level of policymakers are to be convinced of the need for action on these lines, it was suggested, a study of the economics of nutrition in Indonesia should be undertaken. Such a study can be facilitated by technical assistance from the Bank or UNDP. Experts in the field such as Dr Marcol’Selowsky can be requested to undertake the study.

The low priority of nutrition had also led to very little concrete planning work being undertaken in a multi-sectoral manner, involving different sectors of Government and business. In short, while there was general enthusiasm, there was no emerging project or clearly defined effort towards outlines of a national policy.
6. Taskforce on nutrition

We concentrated our efforts in the first two weeks of our stay on focussing the attention of Bappenas, the national planning body on the low priority of nutrition as perceived by various sections of Government. The Bank cannot obviously identify any project unless the Indonesians themselves are clear about their policy objectives or program goals in this field. If the Bank is to express its interest, on a continuing basis, it can be only on the basis of a clearer outline of policy emerging from the Indonesian Government. Dr Suojoto also recognised that the perception of low priority to nutrition acted as a constraint on the nutrition planning process itself. Based on our discussions, Dr. Suojoto set up a task force consisting of representatives of concerned ministries to draw up a national nutrition policy for Pelita II (The second five year plan) as well as work out a nutrition project. The task force met on June 26th under Dr. Suojoto's chairmanship and the different representatives contributed a number of useful ideas. At Dr. Suojoto's request, I had drawn up a paper (copy enclosed) for discussion. This formed the basis for the initial deliberations of the task force.

It is significant that Bappenas has now taken the lead in setting up this group. It represents a definite expression of interest on the part of Bappenas and can well lead to higher priority being assigned to nutrition in Pelita II. The same impression of an accentuation of interest in nutrition was conveyed to us when we met Dr. Selo Soemardjan, Adviser to the Vice President of Indonesia as also Dr. Soemarmin Minister of Administration Reforms. It appears that with some assistance, the task force should be able to produce a reasonably satisfactory outline of a project by the end of 1973.


The task force will need a fulltime nutrition planner to work on the plan and the project. It is our suggestion that a suitable Indonesian be hired for the purpose and his salary be supported in part or in full by IBRD. It may also be worthwhile to enable him to visit, for a brief while, an institution where nutrition planning is taught such as MIT and spend a week or two at the Population and Nutrition Projects Department of IBRD. We also understand that a team of WHO consultants including a nutrition planner is to arrive shortly. This will also be of help, provided by the time the team arrive, Bappenas is ready with its own ideas.
8. **Outlines of a Nutrition Project**

The following extract from the paper for discussion outlines the possible components of a nutrition project. One could conceive of a nutrition project as consisting of the following components,

a. **Nutrition Education** with a view to utilizing existing food resources in a more optimal manner.

b. **Supplementation programs** to increase the availability of nutrition supplements to the sections of population at risk and with the greatest need for nutritional improvement viz. pregnant mothers in the last trimester of pregnancy, lactating mothers and children in the age group of 0 - 5.

c. **Production programs** to improve the availability of nutritionally deficient components - including fortification of foods with vitamin A, lycine, iron; production of special low cost food supplements such as incaperina bal-ahar, c.s.m., w.s.b., increase of production of protein rich foods.

d. **Research and Development Studies** including surveys of nutritional implications of economic policies in agriculture and industry with a view to identifying possibilities of nutrition intervention in those sectors.

e. **Evaluation.**

The suggestions made below are not intended to be exhaustive. There may be other ideas which can be incorporated.

9. **Nutrition Education**

This component could involve,

a. Reinforcement of successful A.N.P. areas with necessary additional inputs; the need for which has been identified as a result of the ongoing evaluation of A.N.P. It can not be denied that applied nutrition programs in some parts of the country have had good success in conveying ideas of nutrition education and increasing production of poultry and fish. In such areas, potential exists for improved nutrition educational activities provided adequate inputs are supplied in the form of seeds, fingerlings, fertilizers and nutritional educational materials, besides personnel.
b. Preparation of suitable nutritional, educational material for distribution to such centers, and schools. This has to be prepared in a manner that will suit the agroeconomic and social milieu of different regions. It has to focus on the removal of specific tabus in regard to nutrition and has to be prepared by nutrition experts. It has to be pretested before mass production is undertaken. It may be advisable to take up as a first phase, two or three specific Kabupatens each in two provinces for an intensive effort in this direction. Family planning fieldworkers, yaws workers and malaria workers can be trained for this. Personnel and consultancy requirements as well as cost of preparation of materials should be spelt out. Training facilities may already exist in the A.N.P. areas. They should be utilized for training more teachers and field workers. In selected centers, nutrition education through schools may also involve school lunches and nutrition demonstration.

c. Preparation of nutritional educational material for mass media such as radio, newspapers and cinemas. This would require a different approach from (b) above. The costs of this program should be spelt out. It may be useful to involve specialised consultants for this purpose; the content of the messages being determined by nutrition experts and the manner of delivery by mass communication experts. Care has to be taken to ensure that nutrition education material centers are locally available foodstuffs.

d. Nutrition education through recuperation centers.

One device adopted in some countries utilises nutrition rehabilitation or recuperation centers to which children in first and second degree malnutrition are admitted. These children can be rehabilitated simply by proper nutrition. They are brought in early in the morning and fed during the day. The mothers take turns in helping to cook and take care of the children. An auxiliary paramedical worker trained in nutrition and child care for a short period, is in charge of the center which is usually under the supervisory care of a pediatrician who may visit it once or twice a week, while the cost of care per child in such centers may be high compared to the cost of general supplements to a healthy child, these centers have very good demonstration effect and convey the message of nutrition education.
effectively. Especially is this true if the foods used in the centers are based on cheap and locally available materials such as green leafy vegetables, fruits, eggs/fish, etc. There is scope for trying these centers on a pilot basis. Based on their costs and results, expansion in the second phase can be decided on.

Evaluation should be built into all the programs outlined above. It can be relatively simple. But benchmark surveys before the program starts are vital. The operating personnel should be given a short training in evaluation procedure.

10. **Supplementation Programs**

These should concentrate on the vulnerable sections of the population in the selected project areas. Benchmark surveys of height/weight and some other simple nutritionally significant and easily procurable data should precede the introduction of the programs. A primary objective of the programs would be to evaluate, the effectiveness of the programs from the angle of cost as well as administrative feasibility.

Different delivery systems can be tried out in the first phase. We would suggest for consideration the following, apart from the mass vitamin A prophylaxis program which should be part of the program.

a. **Supplementation through M.C.H. centers.** Mothers can be persuaded to come to the centers once a week to receive food supplements. This would essentially be a takehome food procedure. Visits by fieldworkers to the houses will be utilized to check on utilisation for the children at risk and mothers. Simple height/weight measurements will have the psychological effect of ensuring that in most cases, food does get to the vulnerable groups. These visits can also be utilized for f.p. and nutrition education efforts. These can be evaluated with reference to a control population in a nearby center where such food supplement is not given.

b. **Supplementation through schools**

In schools where care-sponsored lunch programs are in operation, an experiment of bringing mothers to the schools once a week can be tried. Food supplements can be given to them on a takehome basis. This can be done after school hours if need be. Teachers in the school, trained in nutrition can impart some nutrition education to the mothers. There is no special overhead cost.
c. **Supplementation through mobile vans**

This can be tried in one or two slums where problems of malnutrition are particularly acute. There are, of course, some objections voiced from the point of view that our goal is to reduce the spread of slums. But slums are facts of life and where malnutrition is acute, it may be worthwhile to give food supplement directed at vulnerable sections of the community. If need be, they can be confined to sections of the slum population below specified income levels.

**Nature and costs of food supplement**

The nature of food supplement to be provided raises important issues of policy. These cover the question of avoiding need for continuous imports. This problem is touched on in the next section on production of low-cost food supplement. Suffice it to say that for the purpose of this program, the major cost will be that of the food supplement whether imported or locally produced.

While local enthusiasm can no doubt be counted on to help in contributing part of these supplements, by and large, the cost has to be borne by the Government. The best way to limit the costs would be to screen the target population from the point of view of income criteria.

### 11. Production Programs

**a. Fortification**

**Vitamins.** The prevalence of vitamin A deficiency would indicate the need to start a project for vitamin A fortification of commonly used foods such as sugar.

Vitamin A fortification of sugar is being tried by Dr. Arrovaye in Guatemala. The possibility of vitamin A fortification of sugar in a few selected factories should be explored. The sugar so fortified can be supplied to selected target groups and results evaluated.

Fortification of wheat flour part of which is used by low income groups as noodles/or dumplings can be tried.

Fortification of rice supplied through Bulog can be tried on experimental basis.

**Iodine - fortification of salt**

There are distinct areas where goitre is prevalent. Iodization of salt in selected salt factories which can deliver their salt to a Government distribution agency for supply in endemic areas should be a project component.
b. Production of low cost food supplements
A pilot project to produce a lowest food supplement utilising locally available food material should be started. This can be experimental and can try combinations such as have been successfully used in countries like India. A food-technology consultant with experience in developing countries similar to Indonesia should be called in if necessary as early as possible, to advise on this. If the pilot project proves successful, its expansion can be part of the second phase of the project.

c. Improvement of food technology from the nutritional point of view
Certain sectors of the food processing industry may lend themselves to nutritionally significant improvement. Here again, a food technology expert should be called in. He should have experience in developing enriched rice in countries with a relatively low level of technological sophistication.

d. Increased production of legumes including soyabean
The possibilities of including a sufficiently large program for increased production of legumes in the agricultural sector of the plan should be explored. The nutrition project can specifically include a pilot program for credit and inputs for this, particularly in respect of soyabean.

Programs for increasing outputs in dairying and fishery are to be covered in the respective sectors.

12. Research and Development Studies

Under this head, the project may include the following,


b. Surveys of nutritional status based on a large enough representative sample. These may utilise material collected through already completed studies provided they are on the basis of properly designed surveys. However, most experts in the field believe that for planning purposes, a fairly comprehensive fresh nutritional status survey has to be taken up.
c. Economic studies of nutritional implication of agricultural industrial and trade policies. Very often, in developing countries, price policies act in a manner which is injurious to nutritional objectives. On the other hand, small shifts in price policy may enable increase of production of commodities which are essential from the nutritional point of view. Similarly, trade policies may lead to important food items being exported whereas by a proper shift, the nutritional status can be improved. These can be studied.

d. Research in agriculture with nutritional objectives – For instance, the genetic improvement of rice varieties, cassava etc. can be comprehended under this head.

13. Evaluation

Evaluation has to be an important component of nutrition projects. A proper evaluation system should be set up. Costs of the set up should be part of the project.

14. Discussions in the taskforce meeting on June 26

A number of the suggestions made in the paper for discussion were welcomed. Some were considered not feasible. Some of the comments are discussed below

(i) nutrition rehabilitation centers

It was felt that nutrition rehabilitation centers of the conventional type may not be successful in Indonesia except when they are attached to a medical clinic. A variant of this located in the village with locally available foods and local leaders is being tried by Dr Darwin Karjadi at Bogor. The nutrition project may try a few of this modified type.

(ii) Fortification

Fortification of sugar was considered by some of the members of the taskforce as not worthwhile since sugar is mainly consumed by the upper income groups. Data about the distribution of consumption of sugar is not readily available. However, it appears to me that at least the lower middleclasses do consume some refined sugar. A pilot project appears worth trying at least in order to test the validity of the hypothesis that this is not a good route for nutrition improvement.
Iodisation of salt has some problems since there is no longer a state monopoly in salt and small producers dominate the industry. The only Government factory is stated to have been closed because of uneconomic operation. However, the Ministry of Health is trying some technique based on the one tried successfully in Thailand for small producers. If the experiments are successful, this may form a useful component.

Regarding wheat, the opinion expressed was that flour is used mainly in urban areas and that too in small quantities. However, the cost of fortification is relatively small.

The Bulog representative promised to reexamine the possibilities in regard to rice. However, there were technical problems due to the relatively unorganised nature of the industry. Costs and acceptability of enrichment have also to be explored. The Bulog representative promised to go into this.

(iii) Indigenous supplementary food

The nutrition institute at Bogor is already experimenting with a supplement consisting of tempe (fermented soya), rice and fish. A larger scale production can be tried once the initial trials are over.

Development of a food technology research center

It would appear to be useful to incorporate in any nutrition project for Indonesia a program component related to the development of a food technology research center either attached to the Bogor Institute or independently.

15. Training and Manpower

Dr (Mrs) Jackson is going into this question. It is clear that training facilities need to be strengthened. Facilities for a training program in nutrition planning would also be necessary.

16. Coordination

Time and again, the problem of coordination came up. The organisational structure needed for coordination of a multi-
sectoral program like nutrition can not be easily defined. The taskforce is engaged in working out the modalities of this. Experience in other countries would seem to indicate that there are both strengths and weaknesses in the establishment of bodies with a separate identity. The need for a separate body would, in turn, depend on the magnitude of the program proposed to be taken up.

17. Possible lines of action by IBRD

At the present moment, there is no clear outline of policy or program but, this is emerging. The Bank can assist the Bappenas in the formulation of policy and programs. Obviously, some of the international agencies already involved in nutrition programs will have to be brought into the picture in regard to assistance for project preparation.

Within the confines of the nutrition policy now being evolved, a nutrition project has to be drawn up. A question for consideration is whether a part of it should be an add-on component to the Population Project - Phase II. In view of the mutually supportive character of better nutrition and family planning, the chairman of BKKBK had expressed an interest in a nutrition education cum supplementation program in a province say Central Java, to be operated through m.c.h. centers. To this can be added a few other smaller components such as surveys and studies.

The crucial question for decision may be whether the population project Phase II will commence in the near future. If not, there is a strong case for an independent nutrition Project being developed without having a component linked to the Phase II. Part of the independent Project can be implemented in areas where BKKBK desires it.

18. General considerations

Nutritional improvement without accompanying improvements in sanitation and public health may not give the desired results. Water supply is equally important. Simultaneously with effecting nutritional intervention, public health education should also be speeded up. Similarly, supportive programs for rural water-supply should be organised. Otherwise, the expected benefits of improved nutrition may not be fully realised.
19. Conclusion

I must, in conclusion, thank Dr Suojoto the Deputy Chairman of Bappenas, Dr Dradjat Prawardhana Director General of Health and their associates in the Government of Indonesia for their unfailing courtesy and assistance during my stay in Indonesia.
TO: INTRAFRAD
DJAKARTA

COUNTRY: INDONESIA

TEXT:
Cable No.: 294

FOR RANGANATHAN

AS YOU KNOW WE PLAN TO INCLUDE NUTRITION INTO SECOND POPULATION PROJECT.

PLEASE UPDATE YOURSELF ON THIS MATTER INCLUDING REPETTO'S DISCUSSIONS ON THE SUBJECT. IN PARTICULAR I WANT JAKKA AND DRADJAT'S VIEWS ON THE NUTRITION STUDY DONE BY KARYADI AT THE BOGOR NUTRITION INSTITUTE AND THE TREND OF THAT STUDY. ALSO BRING RELEVANT DOCUMENTATION FOR DISCUSSION.

REGARDS

KANAGARATNAM

NOT TO BE TRANSMITTED

AUTHORIZED BY:

NAME K. Kanagaratnam

DEPT. Population & Nutrition Projects

SIGNATURE (SIGNATURE OF INDIVIDUAL AUTHORIZED TO APPROVE)

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