



1. EXECUTIVE SUMMARY

Only half the children in Indonesia meet the World Health Organisation (WHO) recommendation of exclusive breastfeeding to six months and continued breastfeeding until the age of 2 years and beyond. In addition, stunting remains a significant public health problem. In 2014 under-5 stunting in Indonesia (30%) was the second highest in South East Asia¹. This means that many infants and young children in Indonesia are not being fed optimally and in accordance with global guidance at a critical time in life.

Data from Euromonitor International shows a 40% volume growth of the milk formula category (comprised of infant formula, follow-up formula, growing-up milk and special milk formula) between 2011 and 2016, with the greatest increase in the growing-up milk category (products intended for children 1–3 years of age). Recently published research by Hadihardjono et al.² reported that over three quarters of growing-up milks in Bandung City were being promoted at points-of-sale.

In 2016, the World Health Assembly (WHA), the highest health policy setting body in the world, endorsed Resolution 69.9 that urged all Member States “(1) to take all necessary measures in the interest of public health to end the inappropriate promotion of foods for infants and young children, including, in particular, implementation of the WHO guidance recommendations while taking into account existing legislation and policies, as well as international obligations; (2) to establish a system for monitoring and evaluation of the implementation of the guidance recommendations.” Recommendation 2 of the WHO Guidance referred to here, confirms that products that function as breast-milk substitutes, including follow-up formula and growing-up milks, should not be promoted as they are covered by the International Code of Marketing of Breast-milk Substitutes (the Code) and subsequent relevant WHA resolutions.

Evidence regarding the appropriateness of the composition of growing-up milks for their target age group is useful to determine the place of these products in commercial marketing of foods to children, and to assist the Indonesian government in potentially updating their national regulations/standards and programme recommendations.

This study determined the level and appropriateness of the declared sugar content and nutritional quality, based on nutrient profiling³, of growing-up milks launched in different cities across Indonesia between January 2017 and May 2019. The study also produced a snapshot of the costs of growing-up milks as compared to whole cow’s milk, which is recommended for children of this age if they are not breastfed.

The findings are cause for concern.

1. Based on the findings that assessed the mono- and disaccharide, excluding lactose, composition and content of the growing-up milks against the draft 2018 CODEX STAN (CXS 156-1987), few of the products meet the requirements both for the level of mono- and disaccharide, excluding lactose, and the non-addition of fructose and sucrose. Almost eighty percent of GUMs contained added sucrose and/or fructose, which is non-compliant with the recommendation that GUMs should contain neither. The current mono- and disaccharide, excluding lactose, composition and content make growing-up milks inappropriate for inclusion in the diets of young children.
2. Currently, almost three quarters of growing-up milks do not provide sufficient information to be assessed against the UK Food Standards Agency Nutrient Profiling Model and, of those that could be profiled, over one third were not considered to be healthy, based on their energy density, saturated fat, total sugar, and sodium content. In addition, almost three quarters of growing-up milks that provided sugar information had high sugar levels that warrant a red warning label based on the UK Food Standards Agency front-of-pack sugar classification. These assessments result in growing-up milks being considered unsuitable for feeding young children.
3. Indonesian regulations permit products for children aged 1–3 years to make nutrient content claims, provided they meet specific criteria. Almost all the growing-up milks made nutrient content claims. Yet this study found that a third of the products (that provided sufficient information to review) are in fact not considered to be healthy when they undergo nutrient profiling. In addition, almost three quarters of products that provided the product's sugar content are classified as having a high sugar content (red category) when assessed using the UK Food Standards Agency front-of-pack algorithm⁴. It is clear that without a mandatory nutrient profiling model in Indonesia, many growing-up-milks are sold as being suitable for children aged 12–36 months, and make nutrient content claims highlighting a health benefit when their overall nutrient composition is not considered to be healthy. This is misleading to consumers.
4. The average cost per 100ml of the growing-up milks was approximately 9 times that of the cost of whole cow's milk, which is globally recommended for children older than 1 year who are no longer breastfed. Recognising the limitations of the price data used for the calculations, growing-up milks are very expensive compared to whole cow's milk. Considering that the other aspects of this research showed most growing-up milks to be nutritionally inappropriate for this age group and they are globally not recommended, their high cost further adds to concerns on their use and relevance for feeding young children.

In Indonesia, despite some improvement in nutrition outcomes over the course of the last 10 years, much remains to be done. Indonesia has also not yet implemented WHA 69.9. This study showed that the composition of the growing-up milks launched in Indonesia over a 28 month period neither comply with the draft 2018 Codex Revised Standard on Follow-up Formula nor meet many of the criteria of the United Kingdom Food Standards Authority nutrient profiling model.

Strong political commitment needs to be demonstrated to ensure optimal infant and young child feeding in Indonesia and reverse the current high levels of stunting. Any revision of the existing outdated Indonesian infant and young child nutrition regulations to align with new global guidance will need to withstand opposition from segments of the private sector that continue to promote growing-up milks and threaten the protection, promotion and support of breastfeeding and violate the International Code of Marketing of Breast-milk Substitutes and subsequent relevant WHA resolutions.

¹ Development Initiatives, 2017. Global Nutrition Report 2017: Nourishing the SDGs. Bristol, UK: Development Initiatives.

² Hadihardjono DN, Green M, Stormer A, Agustino, Izwardy D, Champeny M (2019). Promotions of breast-milk substitutes, commercial complementary food and commercial snack products commonly fed to young children are frequently found in point-of-sale in Bandung City, Indonesia. *Matern Child Nutr.* 2019; 15(S4).

³ Nutrient Profiling Technical Guidance; Food Standards Agency (FSA): London, United Kingdom, 2009.

⁴ Department of Health, the Food Standards Agency, administrations in Scotland, Northern Ireland and Wales in collaboration with the British Retail Consortium (2016). Guide to creating a front of pack (FoP) nutrition label for pre-packed products sold through retail outlets.