

# National Nutrition Policy

Government Consensus Meeting

January 11, 2008

# NNP and development sectors

- **Main sectors:**
  - Health
  - Agriculture
  - Education
  - Social and economic development
  - Environment
- **Other sectors and their partners:**
  - Massorganizations (LWU, LYU, NLFC, LFTU), Ministry of Information and Culture, Ministry of Industry and Commerce, and others

# Chapter I.

## 1. Background

The NNP should encourage the Lao government to assure that socio-economic development will be translated into the parallel reduction of malnutrition and poverty of all ethnic groups in the Lao PDR.

# Chapter I:

## 2.1. The nutrition and poverty link

- Despite socio-economic development and poverty reduction there are still significant differences in poverty and malnutrition between:
  - uplands and lowlands
  - rural remote and urban areas
  - ethnic groups
  - women and men.
- Making malnutrition reduction a new cornerstone in poverty reduction requires long term priority investment by the government in alliance with the international organization and the private sector.

# Chapter I:

## 2.2. Current nutritional status

- Children's nutritional status is a good reflection of a country's health status
- The important problem is chronic malnutrition
- Stunting is very high and remained largely unchanged over the last 10 years
- Especially vulnerable are children in remote upland areas and non-Tai ethnic groups.

# Chapter I:

## 2.2. Current nutritional status (continued)

- Chronic malnutrition (stunting): 41% (children under 5)
- Underweight: 38% (children under 5 )
- Wasting: 7% (children under 5)
  
- Anemia: 37% (women reproductive age)  
41% (children under 5)
- Vit A deficiency: 45% (children under 5)
- IDD: 27% (school-aged children)  
13% (women of reproductive age)
  
- Vitamin B1 deficiency (Beri Beri): vulnerability and attested incidences in case studies.

# Chapter I:

## 2.2. Nutritional status

### Consequences of malnutrition:

- Diminished learning ability
- Reduce work capacity
- Hamper continuous economic growth
- Increased risk for infection
- Greater risk to death.

# Chapter I:

## 2.3. Constraints and challenges

- Priority investments in economic growth, limited in nutrition programming and surveillance
- Lack of institutionalization of nutrition within the GoL (lack of a Nutritional Institute, Nutrition Center) and low capacity (number of staff, untrained)
- Lack of active nutrition networking between development sectors : agriculture, education, environment/forestry, trade, industry - apart from health

# Chapter I:

## 2.3. Constraints and challenges (continued)

- Narrow concept of food security with too strong focus on caloric intake, neglecting other nutritional guidelines
- Lack of programming in nutrition and in dietetics (e.g. hospitals) together with inadequate monitoring and evaluation (M+E)
- Low understanding of the diverse food cultures (knowledge, belief, and practices) of the various ethnic groups

# Chapter I:

## 2.3. Constraints and challenges (continued)

- Ethnic and linguistic diversity creates communication challenges for information and education campaigns
- No compensation for the destruction and loss of wild food resources in local diets and its negative impact on nutrition by national and international investors in the field of agro-business, hydropower, mining, etc.

# Chapter I:

## 2.3. Constraints and challenges (continued)

- Limited access to and availability of arable land and contamination with UXO
- Lack of understanding of the long-term impacts of other development policies (stabilization of shifting cultivation, land use planning and allocation, relocation and village consolidation, energy production) on food and nutrition security.

# Chapter I:

## 3. Rationale and need for a NNP

Three causal levels:

1. Individual level : Immediate causes
2. Community level: underlying causes
3. National level: Basic causes.

# Chapter I:

## 3. Rationale

- Root causes of malnutrition : poverty, inequity, lack of nutrition knowledge
- Need to tackle the problem at all three causal levels and of all sectors through efficient cooperation and coordination.

# Chapter I:

## 3. Need

- It is imperative that every level within the GoL, within the civil society and within their organizations actively taking up their respective roles and responsibilities
- Urgent action at household, community, and national levels is paramount
- Involving different Ministries, ministerial equivalent organization, various stakeholders of key sectors, and other social institutions are very crucial.

# Chapter I:

## 4. Legislation related to the National Nutrition Policy

- The NNP makes special reference to Article 8 in the Constitution
- The NNP will also follow the directions identified during the 8th Party Congress
- Lao governmental laws, policies, strategies, and regulations are detailed in the Appendix (4);
- International conventions (MDG 1, “The right to food”, etc.) are listed in Appendix (5) and will be detailed in the NNS.

# Chapter II:

## 1. Goal

The overall goal of the National Nutrition Policy is to substantially reduce levels of malnutrition, especially of vulnerable groups, and to mainstream nutrition in national socio-economic growth and poverty reduction policies and strategies.

# Chapter II:

## 2. Objectives

The National Nutrition Policy formulates ten objectives. Appendix (3) gives an overview.

1. Sufficient, balanced and varied food intake;
2. Reduction of food and vector borne diseases;
3. Sufficient, stable and equal food access and food availability;
4. Improved mother and child care and education in nutrition and health;
5. Improved environmental health;
6. Improved and participatory nutrition programming and M+E;
7. Establishing intersectoral poverty-nutrition co-operation mechanism;
8. Priority investment in nutrition;
9. Institutionalizing nutrition in the GOL;
10. Facilitate nutrition related research and information systems.

# Chapter II:

## 3. Programs

The ten objectives will be tackled in **five** programs:

1. Food and nutrition (including objectives 1 and 3)
2. Care and education (including objective 4)
3. Environmental health (including objectives 2 and 5)
4. Nutrition surveillance (including objectives 6)
5. Nutrition advocacy (including objectives 7,8,9, and 10).

# Chapter II:

## 4. Definition of terms

### Definition of Nutrition:

Nutrition is defined as the science related to food and the relationship between food and nutritional well being determined by the way our bodies take in and use food through body metabolism and nutrient absorption. The definition also includes food composition, dietary guidelines (for different age groups, special physiological needs, and different physical activities), and the roles that various nutrients have in maintaining health.

# Chapter II:

## 4. Definition of terms (continued)

- **Food** is defined as any substance that people eat and drink to maintain life, growth, and identity. As a result, safe water is an essential part of food commodities, except medicine.
- **Food security** is achieved, when adequate food (quantity, quality, safety, socio-cultural acceptability) is available and accessible and satisfactorily used and utilized by all individuals at all times to live a healthy and active life.

# Chapter II: 5. Target by 2020

	Data		Target by 2020
Chronic Malnutrition (stunting)	41%	(2006)	28%
Wasting	7%	(2006)	2%
Underweight	38%	(2006)	15%
Anemia in WRA	37%	(2006)	15%
Anemia in CU5	41%	(2006)	20%
Vitamin A deficiency	45%	(2000)	20%
IDD in school children	27%	(2000)	10%
IDD in WRA	13%	(2006)	5%
Infant mortality	70/1000	(2005)	20/1000
Under 5 mortality	98/1000	(2005)	35/1000

# Chapter II:

## 6. Scope

This National Nutrition Policy is targeting all people of the Lao PDR, with special focus on the following vulnerable groups:

1. Ethnic groups living in rural and/or remote upland areas with high levels of stunting
2. Women of reproductive age (focus on pregnancy, puerperium, and lactation) and children (focus early childhood before 2 years, children under five years, school age children).

# Chapter II:

## 6. Scope (continued)

3. People who have recently been resettled, who have moved from the uplands to the lowlands, and/or whose wild food resources have been destroyed
4. People with changing and unstable livelihoods, limited access to land and food, low support facilities, and who are at high risk to natural shocks
5. Urban poor and youth with low educational status.

# Chapter III: 1. Strategic principles

**The policy will apply the following strategic principles:**

1. Prioritized targeting
2. Decentralization
3. Integration and effective cooperation
4. Institutionalizing nutrition within GoL
5. Capacity building
6. Awareness and cultural sensitiveness
7. Empowerment of gender
8. Sustainability and resilience
9. Prevention and treatment
10. Accountability
11. Surveillance
12. Cultural identity

# Chapter III:

## 2. Rights and responsibilities

The Ministry of Public Health will be assigned as the lead agency for overall coordination and effective implementation of the National Nutrition Policy.

# Chapter III: 3. Institutional partnerships within the GoL and the private sector (continued)

## Key partnerships include:

- Health
- Agriculture
- Education
- Planning and investment
- Mass organization (women, youth and trade)
- Lao Front for National Construction
- National Commission of Mother and Child
- Justice
- Industry and Trade
- Information and Culture
- Water resource and environment
- Land Management Authority
- Energy and Mining and others...

# Chapter III:

## 3. Institutional partnerships within the GoL and the private sector (continued)

- With the approval of the National Nutrition Policy a National Nutrition Committee (NNC) will be established under the leadership of the National Commission on Mother and Child (NCMC). The National Nutrition Committee will comprise of various GoL key partners.
- A nutritional network at central, provincial and district level will also be established.

# Chapter III:

## 3. Institutional partnerships within the GoL and the private sector (continued)

- The NNC will provide independent and technical strategic advice to the MoH and other line ministries and monitor the linkages between the National Nutrition Policy and other GoL policies and to effectively mitigate adverse impacts which would obstruct the equal improvement of nutritional well-being.
- The NCMC in turn will supervise the nutritional achievements,
- while the NNC will facilitate the management and the international coordination.

# Chapter IV: Implementation

After the endorsement of the National Nutritional Policy immediate action should be taken:

1. The Ministry of Public Health in coordination with relevant key sectors shall disseminate the NNP and shall cooperate with relevant key sectors to continue to draft the National Nutrition Strategy and Action Plan (specific details for each relevant sector).
2. Various ministries, ministry equivalent organizations, Provinces, vulnerable regions, Capitals, shall successfully implement the National Policy through effective coordination.

**Thank you for your kind attention**