REPORT OF

THE REGIONAL EXPERT CONSULTATION OF

THE ASIA–PACIFIC NETWORK FOR FOOD AND NUTRITION

ON REVIEWING IMPLEMENTATION OF NATIONAL FOOD-BASED DIETARY GUIDELINES (FBDGs)

Bangkok, Thailand, 20 - 23 November 2001

REGIONAL OFFICE FOR ASIA AND THE PACIFIC (RAP)
FOOD AND AGRICULTURE ORGANIZATION OF THE UNITED NATIONS
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1. INTRODUCTION

1. The Asia-Pacific Network for Food and Nutrition (ANFN) held its Regional Expert Consultation on Reviewing Implementation of the National Food Based Dietary Guidelines (FBDGs) in Bangkok, Thailand from 20 to 23 November 2001. R.B. Singh, Assistant Director-General and FAO Regional Representative for Asia and the Pacific opened the expert consultation. The consultation was attended by 11 participants from 10 Member countries, namely: Bangladesh, Fiji, India, Indonesia, Malaysia, Nepal, the Philippines, Thailand, Vanuatu and Viet Nam. Resource persons from the University of California Davis, USA and the Secretariat of the Pacific Community (SPC), New Caledonia were among other key participants. A complete list of participants is given in Appendix 1 to this report.

2. Biplab K. Nandi, Senior Food and Nutrition Officer, FAO Regional Office for Asia and the Pacific, Bangkok, Thailand and Secretary ANFN likewise extended his warm welcome to all the participants and guests who had been active in the network. He introduced the objectives of the consultation and informed those present of the mandate and composition of the Asia-Pacific Network on Food and Nutrition and the specific objectives of the consultation.

3. The consultation elected Kamala Krishnaswamy from India and Mohammad Ismail Noor from Malaysia, as Chair and Co-Chair respectively; while Elsa M. Bayani from the Philippines, and Emily Kalsakau from Vanuatu were elected as the rapporteurs.

Opening of the consultation

4. The Assistant Director-General and FAO Regional Representative (ADG/RR) for Asia and the Pacific formally opened the consultation and welcomed the participants on behalf of the Director-General of FAO and on his own behalf. He congratulated the elected chairs and expressed deep appreciation to the ANFN Secretariat for a well-thought agenda for the consultation. He underscored the importance of the consultation which was being held in the context of the overall mandate of FAO to promote production, distribution and marketing of safe,
wholesome and nutritious foods in order to raise the levels of nutrition and standards of living for people. In this regard, the International Conference on Nutrition (ICN), convened by FAO/WHO in 1992, and World Food Summit (WFS) in 1996 had catalysed the process of identification and adoption of strategies and actions to improve nutritional well being and food consumption throughout the world.

5. Recognizing the problem of food security in a broad-based manner, FAO addresses key issues which closely affect food security of households and populations in general. In doing so, FAO is concerned with production, physical access, nutritional adequacy and even metabolic adequacy. The ADG/RR informed the consultation of the many developments that were taking place particularly of the evolving concept of food security. He emphasized that besides macronutrients, the microelements of the diet such as vitamins and minerals also need to be secured. These are interrelated components all of which impinge on food security and nutritional adequacy for populations.

6. ADG/RR pointed out that the number of hungry had in fact risen over the last 10 years. To meet the pledge made at the WFS, the ranks of the region’s hungry must be reduced by at least 15 million people per year instead of the 13 million set at the time of the WFS in 1996.

7. He explained that the FAO document State of food insecurity (SOFI) 2001 highlights who, where and why is food insecure. He mentioned that of the world’s 815 million malnourished people, 777 millions are found in developing countries and 497 million or 65 per cent are located in the Asia-Pacific region. He urged the participants to give serious consideration to this fact so as to understand and appreciate the consequences of hunger.

8. He pointed to the relevance of FBDGs as one of the important tools to combat malnutrition. In particular, he stressed the need to converge efforts on information, education and communication (IEC) strategies. He reiterated that the components of FBDGs could enjoy close interlinkages with information and communication technologies (ICT).
9. Growth in food production in Asian countries over the past two decades has been remarkable and its implications for direct human consumption are expected to have improved in much of Asia and appears to have adequate dietary energy supply (DES). But Asian diets lack food (dietary) diversity, which gives rise to micronutrient malnutrition besides protein energy malnutrition (PEM), which is widespread in Asia and particularly among the vulnerable groups of pregnant women and young children.

10. FBDGs play an important role in recommending appropriate intake of food and also in providing information to the public about the right type and amount of food to eat in order to meet nutrient requirements and about safe ways of food preparation. FBDGs can rightly serve as a strong component of strategies and can become a vital tool in food and nutrition policy development and nutrition education. However, merely having a set of dietary guidelines will not guarantee an effective nutrition policy or that the population will follow the same automatically. Attention would need to be given to communicating FBDGs effectively to the public as well as to the policy makers and health/nutrition practitioners.

11. ADG/RR emphasized the need to adopt a comprehensive strategic approach of augmenting food production, dietary improvement, and promoting community based approaches all of which can match up with the efforts to achieve the goal of reducing the millions of the hungry and malnourished. The challenges in the Asia-Pacific region are high, particularly on how to diversify the food basket.

12. He urged the country representatives and participants to provide guidance to FAO and make recommendations on how to touch the lives of the poor and hungry, promote the pro-active involvement of various actors such as non-governmental organizations (NGOs) and the private sector to bring in their experiences, and share empirical evidence and results of investments in undertaking food based approaches to solve problems of malnutrition. He mentioned that effective management of new crops - such as opaque maize or golden rice - considering their costs, efficiency and acceptability to consumers, were some of the issues to be carefully considered.

13. The full text of the speech is given in Appendix II.
II. CONCLUSIONS AND RECOMMENDATIONS FROM THE PAPERS DISCUSSED

Agenda item 1: Overview on implementation of food based dietary guidelines (FBDGs) — FAO perspective and initiative

14. The consultation adopted the provisional agenda and the timetable (Appendices III and IV) as proposed by Biplab K. Nandi.

15. Biplab K. Nandi presented an overview on the implementation of FBDGs from the FAO perspective, emphasizing the main agenda items as (i) examining country initiatives on the status of implementation of FBDGs at various levels (ii) issues for consideration as regards promoting implementation of FBDGs and identification of future actions and (iii) linking implementation of FBDGs to NPANs as part of ICN and WFS follow up activities.

16. He recalled some of the key components of FBDGs in terms of the context for addressing FBDGS, consideration of general and specific issues to promote healthy eating, challenges to implementation and ways of intensifying the involvement of multi-sectors.

17. He also put forth the consideration for developing the quantitative components of FBDGs and identifying projections that will make it possible to consolidate these efforts for efficient and effective implementation.

18. Testing the feasibility of FBDGs through phased field testings would need to be carried out, as appropriate. Systematic approaches would need to be adopted using change agents at various levels through appropriate multi sectoral collaboration.

19. FBDGs need to be integrated into food and agricultural policies with the objective of providing adequate safe and nutritious foods for all. Food, agricultural, health, educational and rural development policies along with the National Nutrition Policy would need to be harmonized to support the implementation of FBDGs. A
core department/ministry would need to be designated and be responsible for coordinating the FBDG implementation. As far as possible, related departments/agencies would have to support the strategies and be closely involved in monitoring and evaluation of the programmes. In essence, FBDGs should serve as a valuable tool in translating National Plans of Action on Nutrition (NPANs) and as a strategy for their effective implementation.

20. The Consultation was informed that the deliberation was to focus on reviewing implementation of national food based dietary guidelines, update on implementation of ICN/WFS/NPAN follow-up activities and explore possibilities for implementing FAO’s nutrition education modules on *Feeding minds, Fighting Hunger*” in countries of the region.

**Agenda item II: Forging agricultural links with and nutrition links in the implementation of FBDGs**

**Presented by Barbara Schneeman**

21. Barbara Schneeman, informed the consultation that food-based dietary guidelines (FBDG) are an integral component of nutrition policy and provide a mechanism to link policies related to food, nutrition and health promotion. As an educational tool for the public, FBDGs express nutrition principles in terms of food and dietary patterns that are central to public health strategies. As a policy tool, they provide a means to coordinate nutrition-related programmes as well as evaluate the adequacy of the food supply in meeting the nutritional needs of the population.

22. In linking agricultural production to human nutrition, she pointed out that development of agriculture in relation to nutrition has occurred in three phases namely: improving yield to provide adequate energy from food, improving efficiency of production to diversify the sources of nutrients in the food supply, and targeting efforts to improve nutritional profile of foods that will help lower the risk of diseases and promote health.
23. FBDGs would need to be country specific taking into consideration the public health issues, dietary problems and socio-economic conditions. She recognized that national overviews are dynamic and therefore, issue of both agriculture and nutrition must evolve together. In identifying the association between diet and health, one has to identify foods and the components of foods that are bioactive, build up analytical methods, determine the essential components and monitor intake. This knowledge can be used to improve food supply as well as to developing supplementation and fortification strategies. The nutrition knowledge is also incorporated into relevant policies, programmes, health management, recommended dietary allowances, and monitoring and evaluation issues.

24. Drawing upon an FAO consultation in 2000\(^1\) on experiences from Thailand and the Philippines, Ms Schneeman, emphasised the lessons learnt, which included: the importance of a research and science based process, involvement of multidisciplinary expertise in the process of development of FBDGs, the value of having FBDGs relevant to the public health needs of their population, and the motivation to extend its use to multi-sectors. The process is valuable for building consensus among various sectors for appropriate food based strategies.

25. Inclusion of self-evaluation/frequently asked questions (FAQs) was also an important feature promoting implementation. For example, the Thai guidelines included a self-evaluation which guides an individual through the key messages and enables one to assess what changes are needed to follow the guidelines. In the Nutritional Guidelines for Filipinos (NGF), it had sections with FAQs and an action plan. Both approaches are particularly useful in making the guidelines more practical and to stimulate action.

26. Ms Schneeman observed that the food-based approach raises the importance of agricultural policies that address the food needs of the population. In most countries, several government agencies have responsibility for nutrition. While it is a challenge to coordinate among multiple agencies with such responsibility, the FBDGs

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process itself creates a format for coordination and consensus building around the most important public health issues related to nutrition.

27. The consultation in 2000 reported that both Thailand and the Philippines developed nutrition expertise during the past 20 years. This capacity-building is most evident at the Institute of Nutrition of Mahidol University (INMU) Salaya in Thailand and at the University of the Philippines, Los Baños, although in both countries capacity building extends beyond these two institutions. This capacity building has strengthened the ability of these countries to develop science-based approaches for the development and implementation of FBDGs.

28. The FBDGs would also need to respond to the needs of the low income groups, where it is likely to be perceived as being useful for the well-to-do and that the recommendations at times could be too expensive for many at-risk, low-income individuals to follow. This was expressed in both Thailand and the Philippines. This calls for concrete efforts to ensure that all groups are able to use the guidelines effectively to improve nutritional status.

29. Ms Schneeman concluded that the ability of countries to share their experience in implementing a process is one of the best ways to expand and improve upon the recommendations from the Cyprus Expert Meeting².

30. The consultation raised important issues and concerns which included the debate over the medical/health professionals on the promotion of diet supplements as a quick fix to solve problems of malnutrition versus the use of food based dietary guidelines; use of foods/food groups and dietary patterns that are misleading to some consumers and thus hampering sustainability of nutrition education campaigns.

31. The example of the Five-a-day Campaign for increased consumption of fruits and vegetables in the US was cited which served to promote dietary improvement among the population groups and also to support the food production initiatives among farmers.

32. The consultation agreed that these issues and concerns emerged as challenges to improving research, communications and strategies for both health and nutrition professionals to make a difference in the win-win situation for the government and private sector in its collaborative efforts in contributing to consumers’ health and nutrition improvement.

**Agenda item III: Country status with regard to implementation of FBDGs and identification of future actions**

**Bangladesh:** presented by Mirza Altaf Hossain and Mohammad Mannan

33. The consultation noted that the FBDGs for Bangladesh developed by Bangladesh National Nutrition Council (BNNC) in 1997 are being implemented through different sectors in general, and health and agriculture sectors in particular. Specifically, the health and agriculture sectors have integrated the FBDGs in different training programmes. The guidelines are disseminated at various levels during the observance of National Nutrition Week. The FBDGs are also being implemented at the community level in 59 Upazillas/sub-districts by the Bangladesh Integrated Nutrition Project (BINP) and 13 Upazillas/sub-districts by the Bangladesh Institute of Research and Training on Applied Nutrition (BIRTAN).

34. The tri–media (radio, television, prints) is employed in popularizing the messages of the FBDGs. Non-governmental organizations (NGOs), boy scouts and girls guides are also involved in its dissemination.

35. The National Steering Committee at the Ministry of Health and Family Welfare represented by the Focal Points for Nutrition from different concerned ministries, departments and bureaus are responsible for monitoring the implementation of FBDGs. These stake holders have ownership and responsibility for formulation and implementation of the dietary guidelines which strengthen implementation of FBDGs.
36. It was suggested that initiatives for monitoring and evaluation of FBDGs taken up by the countries of the region would need to be facilitated by FAO. FAO (RAP) could facilitate in formulating some common indicators for use in the region.

**China: prepared by Yang Xiaoguang**

37. As the representative from China could not attend the consultation, the summary was read out by the chairperson. The Dietary Guidelines for Chinese Residents are founded on principles of nutritional science and the present nutrition situation of China. They provide guidance to the Chinese people for consuming balanced diets so as to achieve and maintain good nutrition and health. The Guidelines have been prepared by a Commission of experts from the Chinese Nutrition Society and the Institute of Nutrition and Food Hygiene affiliated with the Chinese Academy of Preventive Medicine. This Academy has proposed having a policy for the development of soybean and its by-products, and rational utilization of soybean resources. A “Milk Action Plan” has been developed along with the development of milk products and milk processing. There is also a regulation in the consumption of meat.

38. In keeping with the ICN, the Chinese Plan of Action (PAN) is making efforts towards ensuring food supply and implementation of appropriate interventions to alleviate hunger and food shortage, reduce the incidence of PEM and prevent, control and eliminate micronutrient deficiencies. Through proper guidance for food consumption behavior, it is promoting improvement of dietary patterns and promotion of healthy lifestyles, general nutritional status and the prevention of nutrition-related chronic diseases.

39. Results of a survey on nutrition knowledge, attitude and behaviour of 5145 persons from five cities in four provinces (Shandong, Guangdong, Sichuan and Heilongjiang) between 1998 and 2000 showed that the Nutrition Education Project namely, “Dietary Guidelines” had been effectively conducted. Obvious propaganda effects had been achieved among its residents, middle and primary school students and older persons.
40. The nutrition knowledge scores showed that people developed a good attitude towards learning nutrition concepts and that some dietary behaviours and lifestyles of people have been modified.

**India:** presented by Kamala Krishnaswamy

41. Kamala Krishnaswamy briefly indicated the multi sectoral expertise used in the development and formulation of FBDGs in India, and highlighted the nation-wide efforts to ensure that FBDGs messages reach the core community. NGOs and mass media are seen to be playing predominant roles. The various steps undertaken for popularization of the guidelines and promotion of their acceptance, include wide publicity through mass media and interpersonal communication approaches through professional societies among others.

42. In view of the diversity of food habits, cultures and socio-economic situations in India, FBDGs need to be modified and adapted to local conditions. The Indian Guidelines emphasize the liberal consumption of fruits and vegetables, adequate consumption of cereals and pulses and moderate consumption of oil, meat and sugar especially for those who might overeat. FBDGs cover all aspects related to undernutrition and overnutrition and food safety. Household measures have been included to make the quantitative FBDGs explicit.

43. Implementation includes sensitization of the policy makers and local opinion leaders to issues related to FBDGs and identification of a central nodal agency for implementing the national nutrition policy and promoting FBDGs. She opined that FBDGs must become an education tool to be built within related agencies in their development plans. She emphasised that with the adoption of the national nutrition policy by the Government of India, the FBDGs approach would need to be dovetailed to the general nutrition policy utilizing appropriate communication strategies for promoting positive behavioural changes. Centre-state co-ordination in the existing federal governmental set-up and participation of local food industry are important in this regard.
44. Implementation, monitoring and periodic evaluation are critical components to the success of food based dietary guidelines for which the process of evaluation should be dynamic and provide necessary feed back for a continuous updating of FBDGs. Media inputs, frequency of messages being displayed, frequency of purchase, national food production data, national availability of data, food consumption data which is easy to collect are important components herein. Mapping of nutrition problems is being done through ICDS at national levels, and in this regard FBDGs can serve to provide dietary and nutrition related information. Further, nutrition surveillance systems which is being developed in all stages based on the Triple A approach must build in FBDGs

45. In promoting the practical use of FBDGs, Dr Krishnaswamy informed the Consultation that translation into various regional languages has been done. Implementation now calls for a nation–wide launch of FBDGs. Women are the primary target groups and publicity programmes serve as important means to promote implementation. Secondary audiences such as teachers, youth, students in schools, and elderly also need to be mobilized if FBDGs have to reach out more effectively.

46. Production of food grains and other commodities in India shows that grain banks are overflowing but pulses and millets have decreased, which have implications for PEM. Egg and milk production and consumption have gone up, while production of fruits and vegetables has not gone up, which is important in view of the problems of micronutrient malnutrition. India is second in vegetable and fruit production in the world but almost a third is lost due to post harvest losses. She expressed the need to address this issue and encourage more rural preservation, packaging and value addition in FBDGs and build in an economic angle to promote incentives to the farmers and food producers.

47. Recent retrograde steps undertaken with regard to salt iodization largely due to political factors at the central level were not encouraging. However, certain states have not withdrawn the sale of iodized salt, which is gratifying and she felt that the mass media and NGOs need to be aware of such issues to raise community awareness.
48. Priorities for research have been planned, which include strategies to promote and link up agriculture and rural centered technologies, food fortification and production of complementary foods. Simple evaluations need to be built into the programme to get necessary feedback in updating FBDGs.

**Indonesia**: presented by Arum Atmawikarta

49. Arum Atmawikarta elaborated on the review of FBDGs in Indonesia. Primary efforts were undertaken to raise awareness among policy makers through dissemination of information on the Indonesian Nutrition Guidelines (ING). Advocacy has been undertaken for decision makers in related sectors at formal levels of administration and in non-formal institutions such as the community and groups such as religious leaders.

50. Specific approaches are also carried out through control on food and beverage advertisements against the non-conformity with existing ethical codes and rules; inclusion of ING into school curriculum; promoting local food that meets nutrition requirements through an “I Love Indonesian Food”, and Keluarga Sadar Gizi or Nutrition – Awareness Family Movement; mainstreaming ING in a coordination forum at various levels, and through publication of a book of 13 Basic Messages.

51. This book is designed to be used by decision makers at various levels and consists of a brief description about the basic messages in the form of an easy language guide. However, there are some messages which are not very clear and this needs to be addressed.

52. Indonesia also employs the empowerment approach where several activities to build capacities of institutions through training for related health personnel and NGOs are undertaken.

53. As part of strengthening, involvement of national and local government, NGOs and related partners, concerted support from related institutions and the community are being elicited. Efforts undertaken include an agreement among all
prospective groups in disseminating the messages of ING to utilize and activate all prospective personnel in an innovative and effective manner to gain support in disseminating the FBDGs.

54. Among the processes that are found effective in the dissemination of FBDGs are inter-programme and inter-sectoral workshops, symposia, TOT (Training of Trainers), campaigns through public and commercial radios and TV channels. Due to some difficulty in understanding the ING, its review and modification have been undertaken. An additional guidebook that provides simple information will be also be developed.

**Malaysia:** presented by Ismail Noor

55. Ismail Noor updated the consultation about the Malaysian FBDGs which consist of healthy eating messages developed by a Technical Working Group (TWG) established in 1997 under the auspices of National Core Council for Food and Nutrition (NCCFN) chaired by the Ministry of Health. The Malaysian Food Pyramid presents the kinds of foods to be taken everyday along with the number of servings. Examples of typical foods and food preparations are suggested along with an indication of the nutrient source of the suggested food. The FBDGs were first published in December 1999 and was launched by the Minister of Health in July 2000.

56. As an educational tool, the guidelines have been incorporated into training modules for health care professionals and the food pyramid has been adopted by several professional societies in their website and are printed as posters and pamphlets for wider distribution. More recently, the messages and food pyramid were adopted for use in a “Bright Start Nutrition” project for children 2-6 years old. On-going activities include drafting dietary guidelines for infants with plans to monitor and evaluate the usefulness of the dietary guidelines in the near future.

57. The challenge ahead is to encourage the larger sections of the population to use FBDGs. This requires continuous support and commitment of both the Government and the Private sectors that are involved in food, nutrition and health
programmes to educate and motivate to public in recognizing the vital role nutrition plays in promoting health and well being. Central to this would be the need to make individuals and communities to play their parts and make the necessary changes to achieve the desired goal.

**Nepal:** presented by Yogesh Vaidya

58 The consultation was informed by Mr Vaidya that Nepal had yet to develop FBDGs for the general public. He remarked that the task of developing national FBDGs can be initiated and guided by the National Nutrition Coordination Committee (NNCC) of the National Planning Commission (NPC) and that a national working group to formulate FBDGs. The scientific basis for this should consider a systematic approach obtaining and using baseline information and eliciting the involvement of multi sectors. FBDGs would also need to take into account the ethnic differences, difficult geographical terrain and related factors.

59. As NPAN was adopted in the current Ninth Plan and has been implemented by His Majesty’s Government, Mr Vidya solicited FAO’s assistance in working out details for implementation of the ICN themes on “Promotion of Appropriate Diet and Healthy Lifestyles” which has been incorporated along with other themes for the Nepal NPAN. This could serve to build in the FBDGs.

60. An advocacy for policy makers, planners and programme executors will help raise concern for initiating actions on formulation, development and implementation of FBDGs considering multisectoral and multidisciplinary involvement.

**Philippines:** presented by Elsa M. Bayani

61 The consultation noted that FBDGs are not new to the Philippines, the country having developed dietary guidelines in the 1980s. However, the recently adopted Nutritional Guidelines for Filipinos (NGF) marked a new beginning for the intensification of nutrition education. In its efforts to evoke public attention, the 2000 and 2001 celebrations of the Nutrition Month (NM) in July focused on the NGF,
first with a call to know and practice good nutrition, and then with a call to also spread and promote the NGF messages.

62. A mix of communication channels is used through tri media and interpersonal communications. These include production and airing of nutrition plugs, publication of supplements, production and distribution of various collateral materials, and organising seminars and special events. Other nutrition education and related activities which focus on one or more of the NGF messages have included the Child Growth Project (CGP), Garantisadong Pambata (NM) or Preschoolers Health Programme, and the Integrated Multimedia Campaign on Fruits and Vegetables (INMCFV).

63. Mobilization of influencers (food manufacturers, media, and various organizational associations) to participate actively in promoting the NGF needs to be undertaken. It is envisaged that participation can range from being role models to investing in the various components of the National Institution Education Programme (NNEP), which is being formulated.

64. Ms Bayani positively noted that for the past few years, there has been a growing involvement of the private sector, particularly food manufacturers in bringing nutrition messages to the attention of each Filipino. At the local level, FBDGs are being promoted through the Nutrition Month (NM) Celebrations which include promotion of nutrition messages during the Monday Flag raising ceremonies in July. Nutrition parades, cooking contests and distribution of posters and streamers are activities implemented.

65. Presently NNEP is being integrated, rationalized and harmonized with the other on-going programmes of the Government and the NGF remains the basis for promoting nutrition behaviour at all levels. Sustained promotion of the Philippine FBDGs will be carried out through the NNEP, 2002-2004.

66. Recognizing that interpersonal communication will be used as a major strategy to promote the NGF, it is critical to train professionals and community level workers
particularly in terms of skills to translate nutrition knowledge into action that is practical and more attuned to the needs and circumstances of the target audience.

67. The NNEP shall include components such as capacity building on effective nutrition education, mobilization of influencers to help promote NGF, carrying out research to evaluate the effectiveness of the programme and complementing them with other impact programmes.

**Sri Lanka**: prepared by Gamage Dhanawardana

68. Since the participant from Sri Lanka was unable to attend the consultation, the summary of the paper was read out by the chairperson. The various activities that are linked with promotion of food based dietary improvements in Sri Lanka as part of the implementation process of FBDGs were pointed out.

69. Almost all programmes dealing with nutritional problems in Sri Lanka tend to start with advocacy programmes aimed at creating awareness among the policy makers. Advocacy programmes deal with prevalence of the specific nutrition problems, concepts and the approach used in intervention programmes to overcome them. Illustrative examples include the Participatory Nutrition Improvement Project (PNIP), Micronutrient deficiency control project (MDCP) and Nutrition Education Project (NEP). Annually Ministry of Health launches a national nutrition week to educate the public on themes related to nutrition.

70. The Nutrition Division, Department of Health Services of the Ministry of Health in 2000 compiled a "Nutrition Guide". It provides nutrition education not only in terms of FBDGs, but also in quantitative principles, minerals and vitamins for each food group.

**Thailand**: presented by Songsak Srianujata

71. Songsak Srianujata highlighted a food and nutrition cycle concept that was used in Thailand. This concept, influenced by several food, agriculture and health
variables, guides national food and nutrition policy decisions and actions and signifies a holistic approach towards food security and nutritional adequacy. The Thai FBDGs have been developed and implemented in the NPAN within the 8th National Economic Social Development Plan (NESD) during the year 1996-2001.

72. A number of challenges face the implementation of Thai FBDGs, particularly with regard to communication. While the revision of up-to-date scientific evidence provided the basis for establishing healthy eating through the current Thai FBDGs, these guidelines need to be more easily understood by the public if they are to be translated into practice. Key factors ranging from consumer awareness to inequities in health and nutrition, to literacy levels within target populations, and to the quality of the food supply have been recognized as challenges in meeting the goals of FBDGs.

73. Comprehensive and coordinated efforts such as development of National Food and Nutrition Policies and Plan, closer collaboration and coordination among government, industry and non-governmental partners, and academia, appropriate legislative and policy change, nutrition research, surveillance and monitoring systems to detect behavioral changes and health consequences were therefore to be undertaken.

74. He pointed out that the communication and implementation of the Thai FBDGs depends on commitment and partnerships at many levels. Responsibility for and commitment to the FBDGs as well as their communication and implementation, rests with all of the stakeholders.

75. The official release of the FBDGs booklet by the Prime Minister has provided sound advocacy support and evoked a high sense of importance to the FBDG initiative. Other activities that have reinforced widespread dissemination of information on the Thai FBDGs include round table discussion, nationwide radio broadcast, weekly television programme on FBDGs, luncheon talks with senior persons of the mass media and participation from the food industry and non-food public organizations.
76. Educational tools and kits produced by Ministry of Public Health depicting the food guides, as well as national campaigns on “clean food, good taste,” for food producers, “health promoting schools”, “health promoting hospitals and healthy workplace” have been developed and undertaken through several formal and informal channels. Formal and informal training programmes on healthy eating have also been carried out through peer education, religious leaders and other target groups.

77. For future actions, Thailand will review its FBDGs and the communication/implementation strategies in collaboration with the Advisory Committee. Monitoring and evaluation of changes in eating patterns of specific groups through the collaborative efforts of relevant organizations and actively disseminating research results and implications as they relate to the implementation of the Thai FBDGs will continue to be undertaken. Research efforts will include learning more about the target audience, their environment and what motivates their decisions on changing their food habits. The nation wide evaluation of Food Consumption Survey is planned for 2002-2003.

Viet Nam: presented by Ha Huy Khoi

78. The consultation was informed that there was commendable progress in the current status of FBDGs in relation to its applications on the nutrition policy in Viet Nam. In particular, the FBDGs have been used as official document of NPAN.

79. With the approval of the National Plan of Action for Nutrition for the period 1995–2000 from the Prime Minister, ten nutrition recommendations have been elaborated and used as a tool for educating the public. FBDGs have been introduced in all training courses, and nutrition education messages appear regularly in newspapers and mass media programmes. Recommendations include how to reduce PEM which is prevalent in Vietnam and the promotion of healthy lifestyles and appropriate food choices.
80. On 22 February 2001, the Government ratified the National Nutrition Strategy for the period 2001-2010. Reviewing and preparing new FBDGs relevant to the actual nutrition situation is timely and necessary.

81. As nutrition education is the main strategy of NNS during the period 2001–2010, FBDGs are seen to play a very important role in NNS implementation. In this regard, FBDG would need to be relevant to the actual diet pattern and disease pattern in order to reach the NNS goals and objectives. FBDGs should provide for expanding the quantitative components, be applicable and in conformity with traditional food habits. Viet Nam is also in a period of nutrition transition with the double burden of under and overnutrition. FBDGs need to contribute towards addressing these problems.

82. Due to Viet Nam’s nutrition education efforts, the awareness of the policy makers and people on nutrition issues has improved remarkably. In keeping with its NPAN goals, reduction of child malnutrition is noted at the national level, provinces, districts and communes.

Progress and review of FBDGs from the Secretariat of the Pacific Community (SPC):
Presented by Wendy Snowdon

83. Snowdon emphasized that changes in traditional lifestyle and diet in the Pacific Islands have led to increases in rates of non-communicable diseases (NCDs), and noted that in many countries Vitamin A deficiency and anaemia are still high. Concern about unhealthy diets has led to a need for developing a food guide for the Pacific, which could depict a food based system of ensuring a healthy balanced diet for the general population.

84. Recognising the lack of capacity amongst many of its member countries to develop their own specific food guide and in response to demand from its member countries, SPC agreed to work on developing a Pacific Food Based Guide for its member countries. The initial development phase has now been completed, and the
next stage is to disseminate this across the region and to colleagues and to support them in its appropriate use locally.

85. In taking responsibility for this initiative, SPC’s Lifestyle Health Section has reviewed the food grouping system and also developed a food based guide for the region. The food group system has been widely disseminated regionally and incorporated into local teaching and resources. While there is general awareness concerning the three food groups across the region, the overall understanding of the way to construct a healthy balanced diet is limited.

86. There is a region-wide tendency to consume excess body-building foods and have small amounts of the protective foods or none at all. The high intakes of fat and sugar based foods are also of concern, particularly in light of the increasing rates of NCDs in the region. Ms. Snowdon pointed out that there is a need to move on from the concept of ‘eating from the three food groups’, to ‘eating the correct relative amounts of the three food groups’. During the development process it was suggested that information on other lifestyle issues such as exercise, smoking and drinking be included, as a healthy diet should not be separated from other key lifestyle risk factors.

87. It is hoped that these posters and their concepts will form the basis of training and education around healthy lifestyles in the region. The development process included consultation with member countries and partner agencies, along with piloting in selected sites.

88. As part of regional dissemination, following the final printing of these posters at the end of 2001, training is planned across the region. As the food guide is a new development for the region, it is essential that this be incorporated into all training programmes regionally. It is hoped that member countries will seek support for the translation of these resources into local languages along with any other minor modifications required.
Fiji: presented by Nirmala Nand

89. Ms Nand informed the consultation that Fiji has produced its dietary guidelines over ten years ago in collaboration with the Ministry of Health. The guidelines aim to help the population to follow a set of nutrition and health principles in order to achieve and maintain good health and nutritional status, with a focus on addressing the prevention and control of the prevalent health and nutrition problems that the country faces such as anemia, diabetes, hypertension, coronary heart disease, obesity, cancer and gout. These conditions, she pointed out, are known to be prevented and controlled by eating the right kind of foods in the right amounts. The National Food and Nutrition Centre (NFNC) is vigorously pursuing the revision of FBDGs and will commence its dissemination and distribution to all levels through multimedia channels and a number of IEC materials such as posters, pamphlets, calendars, brochures, etc.

90. Implementation of guidelines in Fiji is undertaken by the Ministry of Health, Agriculture, Education, Women and Culture, National Food and Nutrition Centre, National Centre for Health Promotion and various non-governmental organizations. More concerted effort for converging various multi sectoral actions in the effective implementation of FBDGs is needed. A national campaign on FBDG is also being planned for 2002 to sensitize the population. Specifically, for nutrition to become a visible part of national campaigns, there is urgent need for advocacy at the higher levels and for entrenching nutrition into the national policy. The NFNC plans to take a lead role in revising and revitalizing and relaunching the new FBDGs.

91. Among the constraints identified that hinder implementation of the FBDGs, inadequate budgetary allocations, lack of qualified and skilled professionals, poor clarity of objectives and guidelines for programmes emerge as important.

Vanuatu: presented by Emily Kulsukau

92. Ms Kalsakau shared with the consultation that due to the dietary habits in Vanuatu, problems of non–communicable diseases (NCDs) are of great concern. Micronutrient deficiency is another problem that has been addressed and is slowly
being improved. In spite of the country’s abundant production and supply of wild fruits, vegetables and root crops, the locals especially in the urban areas, choose to consume imports such as rice, canned meat/fish and bread.

93. Implementation of programmes to address nutrition and diet related issues poses problems, and constraints include lack of networking between necessary organizations, inadequate staffing capacity to carry out the necessary tasks and budget constraints.

94. The National Food and Nutrition Committee has contributed to the development of the Vanuatu Plan of Action for Food and Nutrition (VPAFN) in the late 1990s. However, due to lack of co-operation and co-ordination amongst necessary government sectors, nutrition improvements have not been realized. The health department, however, has played a major role in providing awareness to the public at large, which has led to several nutritional improvements.

95. Vanuatu’s implementation plans include recommendations to revise the existing dietary guidelines with a clear focus to support nutrition education initiatives of the National Food and Nutrition Committee.

96. Posters have been used in a variety of effective ways to encourage people to change for a better lifestyle, wherein Ms. Kalsakau, highlighted a popular poster used to educate locals is the "Three Food Group" which paints a picture to make sure that people eat balanced meals everyday. A noteworthy point of the posters is that it depicts the actual food products that are available and mostly eaten in Vanuatu.

97. The National Food and Nutrition Policy has responsibilities designated to various government sectors and groups. For instance, the department of Agriculture would look into issues related to food security, while the Environmental Health and Food Centre would deal with issues related to food safety, with the notion of viewing it in an integrated perspective.

98. Monitoring and evaluation initiatives have included nutrition surveys and evaluating the survey outcomes to check whether any nutrition improvements have
been made. Apart from local adaptation of the posters, the use of popular theatre groups to act out real life situations has served as an effective way of disseminating information.

99. In improving the implementation of action plans, there is a need to strengthen ties between the necessary government sectors to implement the tasks outlined in the action plans. Commitment and motivation are urgently needed to carry out the tasks of the action plan. Vanuatu is awaiting the regional FBDGs being formulated by SPC to use as a guide to prepare a national one.

**Working group sessions**

100. The countries were divided into two working groups. Group I consisted of participants from Bangladesh, Fiji, Indonesia, India, Malaysia and Nepal, Thailand and Group II included participants from Bangladesh, the Philippines, Thailand, Vanuatu and Viet Nam.

101. The terms of reference (TOR) for Working Group I were to: (a) identify the process and enabling factors in strengthening implementation of the FBDGs process; (b) highlight key components to be considered while expressing foods and food groups in household amounts, identifying methodological issues (c) point out action-oriented participatory and community based to be included in the FBDG implementation process (d) provide follow up suggestions and actions to initiate/strengthen implementation of FBDGs. The TORs for Working Group II included: (a) drawing up the process for monitoring and evaluating implementation of FBDGs (b) providing suggestions for self evaluation of FBDGs (c) developing a protocol for assessing practical use of FBDGs and (d) developing improved working mechanisms for enabling monitoring and evaluation of FBDGs.

102. Both groups outlined action plans for implementation of FBDGs based on the progress made by the respective countries and identified possibilities for FAO technical support with regard to strengthening implementation of the FBDGs. The summaries of the Working Group outputs are listed in Appendices V, VI and VII.
Based on the working group outputs, the consultation provided the following recommendations for strengthening implementation of FBDGs.

**For country action:**

1. Incorporation of FBDG considerations into relevant national policies such as agriculture, food, health, nutrition education, social welfare and into national plans for development. Identification of the focal points and co-focal points in each country for FBDG implementation and work towards building strong collaborating mechanisms for strengthening the process for implementation of FBDGs within the context of NPAN and WFS activities. The plans for food and nutritional security should include and embrace the objectives of FBDGs.

2. Developing working mechanisms for eliciting multi-sectoral involvement for effective implementation of FBDGs and ensuring co-ordination by identifying roles for key stakeholders from related ministries, universities, research institutes, professional organizations, NGOs, and the private sector whose partnership can be evoked for promoting the implementation of FBDGs.

3. Undertaking advocacy/sensitization activities involving decision makers/key stakeholders for generating political support for promoting use of FBDGs.

4. Undertaking efforts towards institutionalizing the FBDG objectives so that efforts are sustainable, once donor funding is no longer available. This would require creating a functional structural system for implementation. In many cases, this might be a coordinating committee that engages the stakeholders in regular meetings with an agenda to review proposed actions and develop specific plans for FBDG implementation.

5. Expanding nutrition capacity across agencies through cross-training of personnel, hiring and promoting of nutrition experts. Countries were urged to promote employment opportunities for nutritionists in multi-sectoral fields and enhance their visible roles in developmental programme. This expanded capacity becomes
increasingly important as countries must be prepared to address the problems associated with diet related chronic diseases and overnutrition.

6. Developing and promoting small scale and medium scale food based activities/projects which strengthen traditional food processing and preparation techniques as well as cooking practices along with income generation, as appropriate for community groups.

7. Recognizing the importance of monitoring and evaluation in the FBGDs process and investments required for research and research capability building.

For FAO action:

1. Provide leadership for advocacy and promotion for achieving food and nutritional security through:
   - Building country capacity
   - Sensitizing key leaders at country level
   - Exploring/strengthening possibilities for partnership with bilateral agencies, NGOs and the private sector

2. Extend technical assistance in
   - Formulation and implementation of FBGDs (for countries which have not developed FBGDs)
   - Monitoring and evaluation of FBGDs (for countries who have developed and implemented FBGDs) in terms of developing specific monitoring and evaluation tools, establishing nutrient databases and content analysis of FBGDs in addressing behaviour change
   - Enhancing country capacity building through appropriate education and training programmes and workshops and regional networking.
Agenda item V : Implementation of ICN/WFS follow up and NPAN related activities

Bangladesh: presented by Mirza Altaf Hossain

104. Mr. Hossain emphasized that the goal of the NPAN is to improve the nutritional status of the people of Bangladesh to the extent that malnutrition would no longer be a public health problem by the year 2010.

105. In this undertaking the NPAN actions, Bangladesh National Nutrition Council (BNNC) has been reorganized, inter-sectoral Steering Committee and Working Groups are formed, and Focal Points for nutrition in all concerned sectors have been nominated. Orientation of the Focal Points on the contents of NPAN and their responsibilities has also been assigned.

106. Human resource development, advocacy meetings by the agriculture sector, horticulture and nutrition projects are some of the major initiatives undertaken to address poverty alleviation, food insecurity and malnutrition. Legislation for universal salt iodization has been passed. Recently, the Bangladesh Applied Nutrition and Human Resource Development Board has been established to undertake and coordinate different food and nutrition programmes in the country.

107. The National Nutrition Project (NNP), financed by World Bank and other development partners, has given due consideration to NPAN related activities. The government and the development partners, particularly FAO and WHO’s assistance are important, since they have been key partners in facilitating countries in the development of NPANs.

108. Future programmes include, organising mid level courses on Food and Nutrition Programme Planning and Management, integration of nutrition into the curriculum of agricultural education and establishing nutrition data banks through nutrition mapping integrated in the FIVIMS process.
Fiji Plan of Action on Nutrition (FPAN): presented by Nirmala Nand

109. Following the ICN, Fiji produced a draft FPAN which was endorsed by the Cabinet in 1998 for implementation by line ministries and non-governmental organizations. The implementing agencies include the Ministries of Health, Agriculture, Education, Women and Culture, Social Welfare, Regional Development, Labor, Consumer Council and Red Cross.

110. Under the nine priority themes, several projects are undertaken each focusing on overall improvement of nutrition and health. Implementing strategies by various organizations include use of innovative information education and communications techniques including that of multimedia.

111. There is need to create a demand in the community and involve them in the process of developing nutrition relevant projects with officials playing a facilitating role. As the FPAN is being revised, it is envisaged that upon its completion, it would be launched with media publicity and evoking the partnership of relevant stakeholders in its implementation.

112. Incorporating some monitoring and evaluation procedures to establish a system of continuous feedback from the implementers to the coordinators for data banking and report keeping would be integral to the efforts undertaken.

India: presented by Kamala Krishnaswamy

113. India adopted its National nutrition policy in 1993 and set up its NPANs which are multi-sectoral. The Department of Women and Child Development (DWCD) under the Human Resource Ministry serves as the nodal agency. The National Integrated Child Development Services (ICDS) serves as the core infrastructure which provides a package of services for improving nutrition of children and pregnant women.

114. Several achievements have been accomplished as a result of the NPANs. These include establishing of district level diet and nutrition data, control and
prevention of micronutrient deficiency, establishment of the nutrition surveillance system, on going initiatives related to food safety, women’s health and food fortification. Most impressively, horticultural initiatives have been strengthened. Other developments include FBDG development and updating of the RDA. Decline in the prevalence of several nutrition disorders have been observed.

115. Future Plans include nutrition mission approach, targeting 0-2 year old children in programmes, strengthening complementary feeding, promoting adolescent nutrition expansion of nutrition and diet survey to all states, institutionalization of nutrition surveillance system based on triple A approach, and giving more attention to diet related disorders and expanding tribal nutrition survey initiatives.

Indonesia: presented by Arum Atmawikarta

116. Since 2001, Indonesia has adopted a decentralized governmental system, in which a more visible role is seen for the local government in setting its own development strategies for the community. The National Plan of Action for Food and Nutrition (NPAFN) provides guidance to all levels of the government to integrate food and nutrition into its developmental programmes.

117. To the NPAFN, institutional development and strengthening are planned which span a five year ten point programme action plan. These include, development of institutions, man power development, strengthening food security, strengthening food and nutrition surveillance system, handling and prevention of malnutrition and overnutrition, handling and prevention of micro-nutrient deficiency, strengthening family nutrition awareness, institutional nutrition services, development of food quality and safety, and research and development.

Malaysia: presented by Mohd Ismail Noor

118. Activities of the NPAN are carried out by three technical working groups (TWG) namely; Research, Training and Nutritional Guidelines. A national survey of KAP on nutrition involving 5 groups, namely primary school children, adolescents, adult, elderly and the food vendors. The results are being collated by the Institute for
Medical Research. The first National Nutrition Survey is currently being planned and coordinated by Ministry of Health (MOH). The TWG on Training has published several training modules and organized several workshops to educate health care providers on nutrition. These activities are coordinated by Universiti Putra Malaysia. A Fourth TWG was established recently and has prepared a draft for the first National Nutrition Policy which is being studied by the MOH.

119. As part of the future plans and efforts, a National Nutrition Council to be chaired by the Minister of Health will be established with its membership comprising high-ranking officials of relevant ministries. The establishment of a National Food Safety Council, under the MOH is also in process.

**Nepal:** presented by Yogesh Vaidya

120. The Nepal National Plan of Action for Nutrition has been adopted by the government in 1998 and incorporated in the present Ninth Plan. In the present Ninth Plan (1998-2002), nutrition has been considered as a priority concern for human resource development.

121. Mr Vaidya pointed out that Nepal has significantly controlled IDD and VAD, but the control of anemia continues to remain a major challenge. The rigorous promotion of iodised salt among consumers, and the distribution of vitamin A capsules through mass campaigns, are measures pursued by His Majesty’s Government. As for PEM, in 25 years there been no significant positive change in the prevalence of stunting which is 50.1% as indicated by the Family Health Survey of 2001.

122. It is gratifying that the agriculture sector has accorded due priority to legumes and pulses which are the main sources of protein in the Nepalese diet. Emphasis has also been given to the production of fresh vegetables and fruits through the promotion of kitchen gardens, home/community orchards, off-season and vegetable farming.

123. To raise nutrition awareness, nutritious food distribution programmes and school feeding are regularly conducted at the district level. Nutrition education
features regularly in radio and television programmes of the agriculture and health sectors.

124. The National Nutrition Coordination Committee makes regular progress monitoring through annual review meetings. Food laws and regulations have been enforced in all the 75 districts and food safety and quality control measures are being taken.

**The Philippines:** presented by Elsa Bayani

125. Elsa M. Bayani informed the Consultation that after ICN, the Philippines Plan of Action for Nutrition (PPAN) has made significant strides along the nine ICN strategies, which include integrating nutrition concerns in the Agricultural and Fisheries Modernization Plan, Health Reform Agenda, and Early Childhood Care and Development Programme. Others include, the establishment of home/school and community gardens, breakfast and milk feeding in school and emergency feeding in disaster stricken areas. Multimedia campaign on consumer rights and responsibilities towards improving food quality and safety have been promoted.

126. Provision of subsidized rice and selected items through government rolling stores in depressed communities and implementation of comprehensive integrated social services to vulnerable groups are being done. Particular progress has been made in the prevention and control of micronutrient malnutrition, through the enacted Food Fortification Act and Salt Iodization Law along with supportive strategies of vitamin A and iron supplementation to infants and pregnant women;

127. Future actions include, continued intensification of advocacy efforts specifically increasing investments for nutrition programme through legislation and partnership with private sector and NGOs; carrying out research to identify cost-effective and cost-effective interventions; strengthening data support systems to assess investments for nutrition, and enhancing capabilities of local governments and national agencies on nutrition programme planning and management.
**Thailand:** presented by Songsak Srianujata

128. Since the start of the Seventh National Economic and Social Development Plan (NESDP), several programmes and projects in Thailand have been in line with the ICN recommendations. Activities include controlling and eliminating the problem of malnutrition in vulnerable groups; improving household food security; promoting food production, processing, distribution and consumption of nutritious foods for nutritional well being and protecting the rights of the consumers. Effective communication and education campaigns aim at producing behavioral change, protection and support of breast feeding and complementary feeding.

129. Developing more sensitive indicators for nutrition surveillance and monitoring systems along with human resource development and interdisciplinary research in food and nutrition are other strategies being intensified. The current Plan, is the nutritional enrichment of the food supply. This has been used in the community to address micronutrient deficiencies such as vitamin A and iron by promoting appropriate food selection and combinations to enhance the bioavailability of nutrients.

130. Consumer protection, food safety and nutrition education are other crucial components of the Plan. Development of Thai Food-Based Dietary Guidelines, Thai Food Guides as well as recommendations for Nutrition Labeling in all food products have been established. Information on Dietary Guidelines and Nutrition Labeling has also been disseminated to the public through several channels.

**Viet Nam:** presented by Ha Huy Khoi

131. As an outcome of Viet Nam’s VAC (Vuon - gardening; Ao–fish pond; Chuong–animal husbandry) strategy, its achievements in nutrition improvement, include virtually eradication of the clinical signs of VAD. Fortification initiatives for fortification of local foods are also in progress. Every family has developed a typical nutrition square which provides for household food security.
132. Early introduction of complementary foods is another problem in Viet Nam which is being addressed as part of its FBDG initiatives. Now Viet Nam emphasizes the healthy lifestyle concept and is working towards such actions.

**NPAN’S in Pacific Island Countries and Territories (PICTs):** presented by Wendy Snowdon

133. All the PICT’s recognise importance of NPANs and most countries have an NPAN, though many are still in draft stages, or out-of-date. Implementation is found to vary, and difficulties are faced in getting ownership and ongoing commitment from all necessary partners and agencies.

134. There has been pressure by some donors/agencies to develop action plans addressing specific issues such as NCDs/obesity/diabetes without due consideration of existing NPANs. Consequently, the NPAN can be forgotten.

**Vanuatu:** presented by Emily Kalsakao

135. Vanuatu attended the WFS but no formal report was formulated. However, a follow-up meeting for the Pacific region on Food Security was held in Apia, Western Samoa (6-9 April 1999).

**Agenda item VI: Discussion on Implementation of FAO Nutrition Education Modules in Feeding Minds, Fighting Hunger (FMFH)**

136. The ANFN Secretary briefly informed the Consultation about this recent initiative of FAO in its global efforts towards addressing the problem of hunger and malnutrition. The Chairperson invited the participants to express their views on the agenda.

137. Discussion issues included (a) exploring possibilities for the use of FMFH Module (b) identifying potential institutions and target users, (c) adapting the modules
according to country contexts, and (d) sharing of ideas with appropriate details with a view to promoting the modules for use in the country.

138. The Consultation commended FAO for developing this novel education module and appreciated this initiative. It expressed the view that the document would be very useful to carry forward the philosophy of addressing the important global issue of hunger and malnutrition and, in particular, to reach out to the unreached and the most vulnerable.

139. On potential institutions and target users, the Consultation suggested exploring avenues for implementation through the Ministry/Department of Education which has a network involving schools, training institutes and other educational institutions to use FMFH as part of educational materials.

140. Other departments (agriculture, health and local governments) which have respective networks of training institutions and organizations can also be tapped to promote and utilize the FMFH modules. Moreover, related institutions/organizations involving women, farmers, youth and local groups may also be involved in this project. Partnership with the private sector as sponsors for such a project may be explored, but this effort should not compromise with the mandate and goals of the concerned country as well as FAO.

141. In adapting the modules, the Consultation recognized (a) the need for strong advocacy to concerned national agencies, NGO, bilateral partners and other stakeholders; and (b) creation of a Task Force/Working Group to brainstorm/review the application of the module in existing programmes or linking up with National Nutrition Education Programme, and similar other initiatives at country level.

**Recommendations**

1. Viewing FMFH in a comprehensive manner to link it up with issues within the larger developmental context which impacts on hunger and malnutrition.
2. Allowing for wider understanding by various sectors involved in such related initiatives by articulating its connections with NPAN, WFS and related actions at the country level and ensuring that sectors recognize the activity as a long term programme.

3. Solicit involvement of other UN bodies and bilateral partners like ASEAN, South East Asian Research Council for Agriculture (SEARCA) in the FMFH initiative.

4. Participants to undertake brainstorming sessions as appropriate to explore its use. In doing this, adaptation of the modules in local context would need to be considered.

5. Consider use of the FMFH module for capacity building for grass root level functionaries and explore its use in community based programmes.

6. Participants to submit an action project for future country level action providing details as required for possible adoption and adaptation. Specifically, a proposal briefly pointing to the modality of use of this module along with potential partners were to be identified and details of the process and expected outcomes could be submitted to FAO for possible technical assistance.
Appendix I

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Appendix II

Opening address

by
R.B. Singh
Assistant Director-General and FAO Regional Representative
for Asia and the Pacific

Madam Chairperson,
Distinguished Participants, FAO colleagues,
Ladies and Gentlemen,

I am pleased to welcome you on behalf of the Director-General of the Food and Agriculture Organization of the United Nations, Dr Jacques Diouf, and on my own behalf to the Regional Expert Consultation of the Asia Pacific Network for Food and Nutrition on “Reviewing Implementation of the National Food based Dietary Guidelines (FBDGs)”.

I am delighted to welcome the national participants from Asia and the Pacific. From Asia we have distinguished participants from Bangladesh, India, Indonesia, Malaysia, Nepal, the Philippines, Thailand and Viet Nam. Unfortunately China and Sri Lanka withdrew at the last minute, although their papers are with us. We are particularly happy to note that we have representatives from the Pacific island, namely Fiji and Vanuatu and also from the South Pacific Commission.

I extend a warm welcome to our resource persons Dr. Barbara Schneeman, Professor of Nutrition, University of California, Davis and Ms. Wendy Snowdon, Nutrition Education and Training Officer, Lifestyle Health Section, South Pacific Commission, New Caledonia. They have been close technical partners in the FBDG process with FAO, and I am confident that they will make enriching contributions in the Consultations.
This Consultation is being held in the context of the overall mandate of FAO to promote production, distribution and marketing of safe, wholesome and nutritious food in order to raise the levels of nutrition and standards of living for people. FAO’s concept on food security has been evolving. It is not only food production in sufficient quantity, economic and physical access to food, but also nutritional adequacy and security, including hygiene, safe and balanced food. After having achieved adequate dietary energy intake at national levels, increasing attention must be paid to the sources of energy, the carbohydrate: protein and fat balance, micronutrients and vitamin (especially vitamin A) contents and balances.

As you are aware, the World Food Summit (WFS) held in 1996 attended by 186 governments resolved to reduce the number of undernourished people in the world by at least 50 percent by the year 2015 with the longer-term goal of eventually eradicating hunger and achieving food security and nutritional well being for all. It is estimated that about 815 million people are undernourished of which 777 million are in the developing world and remaining 38 million are in the developed world. It is important to note that Asia and the Pacific region with 497 million undernourished people is home to 65 per cent of the world’s chronically hungry people. Over the past decade, the total number of chronically malnourished in the developing world has fallen annually only 6 million, against the targeted reduction of 20 million people per year. In order to achieve the WFS target, the annual reduction required in the number of hungry people is 2.2 million. With business as usual, it would take more than 60 years to reach the target.

Among the sub-regions, the problem is most serious in South Asia, which houses over a third of the world’s undernourished and two-fifths of the world’s poor. South Asia is also home to nearly half of the world’s malnourished children. Overall, in the Asia-Pacific Region, it is not only that the number is high, but most disturbingly it remains stubbornly high and in fact has increased by a few millions in the recent years. To meet our pledge of the WFS, the ranks of the region’s hungry must be reduced by at least 15 million people per year instead of the 13 million set at the time of the Summit in 1996. Agendas at national and international levels
therefore must give highest priority to ensuring food to the hungry and elimination of the fear of starvation.

As we understand the food production–consumption chain, we realise how it can drive food consumption decisions and in formulation of agricultural policies which promote food and nutrition security. Indeed, growth in food production in Asian countries over the past two decades has been remarkable, and its implications for direct human consumption are expected to be positive, in much of Asia. However, dietary energy supply (DES) which is a widely used indicator of aggregate food and nutrition situations and expresses the availability of food in kilocalories (kcal) per capita per day, shows that in spite of adequacy of DES in many of the Asian countries, it is important that dietary energy comes from a diverse variety of foods sources. Asian diets remain deficient in sources of protein as compared to carbohydrates whereby almost (70%) of total energy comes from carbohydrates and only 10% from protein. This lack of food (dietary) diversification gives rise to protein energy malnutrition (PEM) which is widespread in Asia and particularly among the vulnerable groups of pregnant women and young children. Of an estimated 192 million children affected by PEM worldwide, over ¾ (79%) are from Asia. What is urgently needed is availability and accessibility to food diversification and dietary variety. In our multiple efforts to address the situation of food insecurity, we need to augment strategies that can bring about a situation by which all people (larger sections) at all times secure access to sufficient amounts of safe and nutritious food for normal growth and development and active healthy life.

The State of Food Insecurity in the World Report (SOFI) 2000 by FAO, pointed out that the daily diets of the 826 million chronically hungry people lack an average of 100 to 400 kilocalories. The greater the lack of energy, the greater is the susceptibility to nutrition related health risks and thereby limiting their ability to lead an active life. In the Asian region, the depth of hunger is particularly serious in Bangladesh, DPR Korea and Mongolia. Specifically, moderately high hunger (the diets falling short by 250 to 300 kcal/person/day) is prevalent in several Asian countries, namely, Cambodia, China. India, Lao PDR, Nepal, Pakistan, Papua New Guinea, Philippines, Sri Lanka, Thailand and Viet Nam.
While lack of dietary energy and lack of food diversification gives rise to PEM, it also gives rise to micronutrient deficiencies, which are of immense public health significance in Asia. These largely include iron deficiency anemia (IDA); iodine deficiency disorders (IDD) and vitamin A deficiency (VAD). In South and Southeast Asia 76% of pregnant women and 63% of preschool children are anemic and in particular, South Asia accounts for 50% of the world’s anemic women.

Asia-Pacific is an economically diverse region, with its agricultural production and food security situation having important impacts on nutritional security. For example, analysis of the changes in the commodity composition of food by country groups brings out the relative emphasis to be given between crops and animal production systems in the sub-regions. Typically, the share of pulses in South Asia – a major source of protein in the diet and an important group of crops in crop rotation is expected to decrease, which has negative implications for nutrition and soil fertility.

During the past 35 years, food production in the Region had more than doubled. Despite the addition of 1.3 billion people to the Region, the per capita consumption in the Region had increased from 2000 kcal/person/day to over 2600 kcal/person/day, an increase of 30 percent. The incidences of poverty and hunger had also halved. These trends give no optimism for future growths. But the paths of the growth will need to be changed for ensuring balanced and equitable growth. It would be useful to understand the impact of Green Revolution on distortion of the dietary energy balance.

Designer crops with desired combinations of nutritional quality combinations (carbohydrates, protein, fat, amino acid and fatty acid profiles, micronutrient and vitamin contents) can be produced by both conventional and nonconventional (biotechnology) approaches, such as opaque and floury (high protein) maize, canola of desired fatty acid composition and much talked about Golden Rice. As we know, rice has been genetically engineered to contain pro-vitamin A (beta–carotene) and iron, which could help to meet the requirements of these nutrients in the diets of many developing country populations where the prevalence of vitamin A deficiency (VAD) and iron deficiency anemia (IDA) is high. Appropriate use of biotechnology could be increasingly considered to address the challenges of unmet food and nutrient needs of
the hungry. FBDGs could consider the potential possibilities for examining the biosafety, food safety, consumer acceptance, value and promotion avenues in the near future, depending on the progress made. Indeed, the benefits of biotechnology would need to be optimized through balanced means using science based evidence of positive and negative points and for using it as a novel support to address problems of food security. The pricing and marketing aspects of genetically engineered food sources will also need to be analysed.

Rightly, this year’s SOFI Report (2001) reiterates the way ahead for commitment followed by resources and action to address the symptoms and the more fundamental causes of undernourishment and poverty. It asks what we have to show and put forward to countries as strategies in order to address these preventable problems of malnutrition. To highlight briefly, it asks if food aid is available; are there any safety net programmes; are long term research and development efforts underway to increase and sustain the productivity of the natural resource base; are educational programmes in place to improve health and hygiene practices etc.? And how can these be mobilized and are countries taking action to mobilize them? It is the last two questions that are highly relevant in the context of the theme of this Expert Consultation.

The International Conference on Nutrition (ICN), convened by FAO/WHO in 1992 aimed basically at identifying and adoption of strategies and actions to improve nutritional well being and food consumption throughout the world. It adopted the World Declaration and Plan of Action for Nutrition which includes among its goals the elimination or substantial reduction of famine and famine related deaths, chronic malnutrition, micronutrient malnutrition, and diet related communicable and non-communicable disease. Where this last category is concerned, promoting appropriate diets and healthy lifestyles was highlighted as an appropriate strategy. This strategy calls upon governments “on the basis of energy and nutrient recommendations, to provide advice to the public by disseminating, through use of mass media and other appropriate means, qualitative dietary guidelines relevant for different age groups and lifestyles and appropriate for the country’s population”.
It may not be out of place to refer to the recent deaths in Assam arising from reportedly from an overdose of (allegedly overaged) vitamin A to infants and young children. Apart from going into the details and depth of the issue, after controversial, one point that clearly emerges is the need for promoting the food based approach rather than the short sighted use of the supplement approach (which focuses on just a vitamin rather than various micronutrients and which can be obtained from a diversified diet). It has also been reported about the effects being exacerbated in a situation of malnutrition, which is what the infants were in. There is an urgent need for urgently and rigorously advocating the need for preformed vitamin A foods (milk) and provitamin A foods (green leafy vegetables and yellow orange vegetables &fruits) (approximately ½ litre milk /d/child and a serving of DGLV can provide the child’s vitamin A requirements) which can be obtained through dietary improvement, in which case there would be little need for resorting to supplements!

Successful experiences from Thailand, Viet Nam, Indonesia (prior to the crisis), certain parts of Bangladesh and States in India (Andhra Pradesh, TN) have pointed to the decline in the incidence of vitamin A deficiency as a result of sustained dietary improvement. It is appropriate that FBDGs are vigorously promoted, food behaviour and change in nutritional status assessed, making a clear case and providing evidence for nutrition and health improvement by judicious food habits, eating and better nutrition.

Madam Chairperson:

As you are aware, the Declaration and Plan of Action for Nutrition also calls for the dissemination of nutrition information through “sustainable food based approaches that encourage dietary diversification through the production and consumption of micronutrient rich foods including appropriate traditional foods”. In pursuance of these goals, FAO along with WHO jointly convened an Expert Consultation in March 1995 in Cyprus, which set the rationale and made useful recommendations for the development and implementation of food based dietary guidelines at the national level.
A people’s diet is very much a part of their culture. The idea that health and illnesses are related to the types of food we eat has been firmly established as part of our cultural beliefs. This belief applies not just to the consumption of expensive and exotic foods but to the consumption of everyday fare. The term food based dietary guidelines is used to express the principles of nutrition education mostly as foods. They are intended for use by individual members of the general public. FBDGs play an important role in recommending appropriate intake of food and also in providing the public information about the right types and amounts of food to eat to meet our nutrient requirements and about healthier ways of food preparation.

Food based dietary guidelines thus are an educational instrument that converts scientific knowledge of nutrient requirements and food composition into practical messages that facilitate healthy food selection and consumption for different people. Indeed, the concept of disseminating information through FBDGs is then inherently sensible since it enables consumers to think in terms of foods rather than nutrients. Equally, the concept of FBDG can take account of considerable epidemiological data linking specific food consumption patterns with low incidence of certain diseases, while not requiring a complete understanding of the biological mechanisms responsible for such a protective property. In the modern era, we observe a low incidence of certain diseases in specific communities with particular eating habits and while we rightfully search for an explanation of biochemical mechanisms, dietary recommendations based on these food patterns are warranted. An example is the association of high fruit and vegetable consumption with reduced risk of certain non-communicable diseases (NCDs) and the emerging awareness that several components of these foods and the diets containing them contribute to lower risk. It will be useful to undertake studies at the grassroot level to clearly demonstrate the relationship between the prevalent agricultural production systems, diversities of food products and the nutritional and health status of people.

I am told that many of the countries in the Asia Pacific region have made good progress in developing such FBDGs given the role that food consumption and dietary practices play in nutrition-related disorders, whether of deficiency or excess. While FBDGs have been developed at national levels, these need to be communicated to the larger sections of the population so as to respond to their
essential and varying food and nutrition needs. Some key previous meetings have been organized by FAO in co-ordination with International Life Sciences Institute (ILSI), in Singapore in 1996, in India 1998, and also in other regions. In fact, the new initiative of FAO entitled Feeding Minds to Fight Hunger embraces a broader educational framework to sensitise children of the needs and possibilities of nutritional adequacy and health.

While the development and popularisation of food based dietary guidelines (FBDGs) serves as one of the potent information, education and communication (IEC) tools help to improve food and nutrition behavior over the long term, and help to address problems of both chronic energy deficiency and micronutrient malnutrition, an assessment of the impact of FBDGs is to be envisaged, and a functional tool for its use is also needed. Measurable nutrition and food security indicator information would need to be developed and used by populations and communities to help assess the success of such approaches by a feedback mechanism. An effective linkage through judicious use of ICT in connecting communities, extension agents, nutritionists and policy makers is essential. Rural and grassroot institutions for implementing the policies will be needed for achieving widespread impacts of the various interventions.

Specifically, dietary diversification through a variety of practical food based approaches can help to reduce vulnerability to household food insecurity as well as disease, which are seen especially as problems in Asia. This should be implemented with a commitment to inter-disciplinary approaches so that development can be achieved with adequate food production conducive to food security and economic improvement.

Community based food production would need to necessarily become an essential component of community based programmes. For instance, local production of foods could serve as indigenous sources for preparation of complementary foods for young children, supplementary foods for pregnant women as well as adolescent girls. Rightly then IEC strategies through FBDGs would need to specifically address the dietary and nutritional needs of these vulnerable groups where problems of malnutrition are high.
In implementing FBDGs, there is a need to direct efforts towards a shared vision of communities in addressing food insecurity and nutritional inadequacy and related concerns. Individuals, households and communities must be recognized as having a primary role in efforts to alleviate food insecurity and improve nutrition. Local government and non-government personnel need to support and facilitate nutrition education and community efforts without creating dependency. Strategies would also need to integrate multi-sectoral services in consonance with local capacities and efforts. Such processes ultimately would call for major institutional challenges, because they link top-down policy decisions with bottom up planning from the community. It is possible, that this can be achieved through a people’s participatory process through community based nutrition programmes where the potential for change and impact is likely to be the greatest.

An explicit focus on women is essential to successful strategies and mechanisms. Recognition of the need to involve women in their design evolves not merely from a limited concern about equity of women with men as beneficiaries and contributors to development, rather women need to be active participants because they have experience with successful achievements in ensuring household and community food and nutrition security evolving throughout centuries in the socio-cultural contexts of Asian countries. Asian women offer cumulative, indigenous knowledge, but their potential remains untapped. The involvement of poor and rural women thus becomes most essential. Overcoming basic and functional literacy, especially among girls and women is an essential component of successful programmes. Overcoming rural, urban disparities in access and quality of education is also essential. The production and use of educational materials and curricula reflecting rural perspectives, and including emphasis on rural concerns with a focus on women for achieving nutritional security are essential elements. Studies have shown that education of women and enhancing their access to health care have the greatest bearing on nutrition, especially improvement of child nutrition.
Madam Chairperson, Ladies and Gentlemen:

Scientific organizations and government agencies which you all represent, need to ultimately reach out to and work with the community, to move food security and nutrition improvement strongly up the political agenda if we are to achieve equitable access to adequate, safe and nutritious food as the most basic of all human needs. Linkages between knowledge and practice (action) are vital, where informed knowledge needs to be best used.

I note that you have planned an interesting agenda for deliberation at the Consultation. I believe you will be examining country initiatives on the status of implementation of FBDGs at various levels, discussing processes that are appropriate for effective implementation and also to intensify the particular involvement of multi sectors in this context.

I urge you to come up with your forthright recommendations and contribute to the coalition and fruition of efforts that we are undertaking in promoting and implementing the use of appropriate diets and healthy lifestyles towards meeting our goal of food security and nutritional well being for all. I wish you a fruitful meeting and a pleasant stay in Bangkok.

Thank you.
AGENDA

1. Overview on implementation of the national food based dietary guidelines – An FAO perspective

2. Forging nutrition and agriculture links through food based dietary guidelines

3. Review of country status with regard to implementation of FBDGs and identification of future actions.

4. Working group sessions

5. Update on Implementation of ICN/NPAN/WFS Follow up activities

6. Any other matter (Discussion on Implementation of FAO’s Nutrition Education Initiative - Feeding Minds, Fighting Hunger in countries of the region).
Appendix IV

TIMETABLE

DAY 1
Tuesday, November 20, 2001

830  Registration
0900 – 0930  Opening session
          Welcome:  Biplab K. Nandi,
                    Secretary, ANFN
          Introduction of Participants, Chairperson, election of the officers of
          the Meeting

0905  Opening Address:
        R.B. Singh
        Assistant Director General and Regional
        Representative for Asia and the Pacific

0930 – 0950  Refreshment
0950 - 1100  Technical Session 1
0950  Objectives, Agenda, Organization of the Consultation
        Biplab K. Nandi

Agenda Item 1
Overview on implementation of the national food based dietary
guidelines – An FAO perspective
Biplab K. Nandi
1010  Agenda Item II  
Forging nutrition and agriculture links through food based dietary guidelines

Barbara Schneeman, Professor, Department of Nutrition  
UC Davis, California

1030  Discussion

1100  Technical Session 2

Agenda Item III  
Review and discussion of country status on implementation of FBDGs and identification of future actions in Asia

1100  Bangladesh
1120  China
1135  India

1200  Lunch (hosted by Assistant Director General)

Review and discussion of country status on implementation of FBDGs and identification of future actions in Asia (Contd.)

1330  Indonesia
1345  Malaysia
1400  Nepal
1415  Philippines
1435  Sri Lanka
1450  Thailand
1505  Viet Nam

1530 – 1600  Refreshment
1530 – 1600  Discussion
Technical Session 3

1600 Partners in promotion and practice of food based dietary guidelines – An SPC perspective:
Wendy Snowdon, Nutrition Education and Training Officer South Pacific Commission (SPC), New Caledonia

1620 Review and discussions of country status of implementation of FBDGs and identification of future actions in the Pacific

1620 Fiji
1635 Vanuatu
1635 – 1700 Discussion

DAY 2

Wednesday, November 21, 2001

Technical Session 4

Agenda Item IV
Working Group Sessions

0830 - 0845 Briefing for working groups
0845 - 1100 Working Groups:

➢ Strategic approaches in implementation of FBDGs
➢ Strengthening role of multi sectors in implementation of FBDGs

(With break for Refreshment 1000 – 1015)

1100 Presentation by Working Groups
1200 Lunch
1300 - 1700 Agenda Item IV (Contd.)
1430 Plenary: Discussion on presentation of Working Groups
1430 - 1445 Refreshment
1445 Discussion continued
1545 Meeting of the Drafting Committee

**DAY 3**

**Thursday, November 22, 2001**

0830 – 1200 Technical Session 5

Agenda Item V

0830 - 1030 Update on Implementation of ICN/NPAN/WFS activities by countries (10 minutes for each country report)
1030 Refreshment
1045 Discussion on above and regional follow-up activities, conclusions and recommendations
1200 Lunch
1300 Discussion on FAO’s Nutrition Education Initiative on Feeding Minds Fighting Hunger (FMFH)
Suggestions by the country participants for undertaking FMFH activities at the national level.
1500 Refreshment
1530 Meeting of the Drafting Committee
DAY 4

Friday, November 23, 2001

Session 6

Agenda Item VI

0830 – 1100 Drafting of the report
1100 – 1115 Refreshment
1115 Presentation and Adoption of the Report
1200 Closing
Appendix V

Working Group I                       Outputs

Facilitator: Barbara Schneeman

Topic I: To identify enabling factors and the types of specific strategies that strengthen implementation of FBDGs.

These include:

i. Advocacy to support the process among policy makers and implementers.

ii. Social Mobilization among local groups. Specific efforts can be targeted toward the food service sector such as food vendors, caterers, and food markets.

iii. Dissemination of information through use of ITC (Information for Technology Change), IBC (Information for Behavioral Change) and IEC (Information for Educational Change) to convert the information in FBDGs into behavior-oriented messages that can be assimilated by the relevant communities. In this process it is important that messages are evaluated for consistency with the FBDGs.

iv. Development of specific process and impact indicators (Group II addressed this topic).

v. Throughout the process it is important to obtain feedback from the stakeholders as a part of the monitoring and evaluation system.

vi. Special efforts will be needed that are specific to the different sectors (government, industry, agriculture) involved with implementation of FBDGs. For example, governments would need to consider food laws, import/export policies, support for food labeling; industry should evaluate food processing
methodology and product development; agriculture would need to consider diversification of crops, breeding and selecting for nutrient rich foods, and biotechnology.

vii. Efforts need to be coordinated both horizontally and vertically

viii. Use of monitoring and evaluation. (see Group II)

ix. Developing funding and relevant resources.

i. Government funding is necessary, but the group assumed it will be limited.

ii. The funding priorities of research and scientific organizations and institutes should include nutrition priorities.

iii. Funding from international organizations should be used to leverage more limited government funds.

iv. Private funding or NGO funds can be used for specific projects; however, important criteria include the integrity of the messages and review for consistency with FBDGs.

v. Capacity building at all levels is an essential component for success in the implementation of FBDG.

**Topic II: Process of expressing the principles of FBDG in quantitative terms through a food guide.**

The following recommendations were made:

a. Quantitative measures should be made in household measures that are relevant to the country, i.e. include cups, spoons, weights, bunches, numbers, servings, etc.
b. The recommendations should be linked to energy levels as well as include adjustments for age and sex. For certain vulnerable groups, information on the frequency of consumption of certain food groups to insure nutrient adequacy should be included.

c. Applied studies may be needed to normalize or standardize the household measures and recipes. Pictures or graphics of typical servings can be used in educational programmes.

d. The focus should be on FOODS not on the food components (e.g. % energy).

e. Information on recipes, cooking methods and food handling for improved nutrition can be included.

f. Methodology issues that were identified include:

i. Standardizing relevant household measures and recipes or mixed dishes.

ii. Reliable estimates of the foods as consumed in a manner that accounts for cooking and preparation

iii. Insuring that it is possible to meet nutrient needs from the recommended food guide.

g. Food guides from different countries have some common themes; however, it is important that the guide is developed in a country specific manner to be most effective for the population.

Topic III: Promoting strategic implementation of the FBDGs.

The key factors identified include:

a. Political commitment or will

b. Strong initiative and involvement from professionals.
c. Strong commitment from the international and national communities.

d. Frequent sharing of experience and learning from each other is an important mechanism to help build inter-sectoral cooperation and multi-sector linkages.

e. To be strategic in the implementation, the FBDGs should target vulnerable groups by integrating the FBDGs into related national programmes for children and pregnant women.

f. FBDGs could be strongly considered for incorporation into the course curricula at all levels.

g. The FBDGs would need to be integrated into the planning and implementation of the plans for National Food Security, which incorporates adequacy, quality, safety, accessibility, availability, affordability and distribution, which can be stated as:

- Food that is available would need to be accessible and acceptable in ways that are affordable and in the form that meets nutritional needs.
- The agricultural sector needs to understand the nutrition issues from a food perspective.

h. During implementation health/disease factors that affect nutrient availability must be addressed.

i. Small and home scale food production and technologies that encourage gardening, development of livestock, seeding community fish ponds and preservation of food would need to be encouraged.
Appendix VI

Working Group II Outputs

Facilitator: Wendy Snowdon

To strengthen implementation of FBDGs with a specific consideration for monitoring and evaluation.

The following includes summaries of issues that were deliberated.

FBDG’s have a role as a tool to improve people’s knowledge and it is recognised that a change in knowledge is an acceptable indicator to evaluate for effectiveness of FBDGs. But as knowledge change does not necessarily lead to behaviour change, the impact of other factors apart from knowledge on behaviour should be recognised by all. Changing knowledge is a valid end-point to be used for monitoring as realistically as possible; FBDGs cannot be expected to affect or even change practice in the short term.

Monitoring and evaluation would need to be included during the planning of FBDGs. Monitoring and evaluation should include process, outcome and impact evaluation. Process evaluation looks at the actual FBDGs and their implementation such as format, wording etc. Outcome evaluation looks at short-term effects such as knowledge changes. Impact evaluation looks at the long-term aims of FBDGs to improve diets and health. Survey, questionnaires, focus discussions are some of the ways that FBDGs can be evaluated.

FBDGs also have a role to play in influencing agriculture, education and trade and commerce activities. Evaluation should look at the use of FBDGs by relevant sectors, agencies and planning.

There is a need for developing guidelines on evaluation of FBDGs which should indicate methods, indicators and areas for evaluation. There is also need for
developing evaluation tools. For instance the Philippines has used an opinion survey to determine whether there is increased awareness of salt iodization. Similarly, it would be useful to identify the choice of foods by consumers which are often guided by cost factors rather than nutrition principles. Other process indicators such as the media usage of FBDGs, number of IEC materials distributed, etc. can be used. The annually compiled selected indicators publication from FAO which indicate food availability and supply at national levels could also be considered for use as broad indicators to reflect national level monitoring and evaluation which could have application for FBDG implications in agriculture.

As a number of partners are involved actively in evaluation activities, it is important to converge efforts in the process so that the multi-sectoral inputs that go into the implementation of the FBDG process are optimized.

Based on the discussion from the two working groups, a set of core principles for implementation of FBDGs was identified. These principles are:

a. National Development Plans should include nutrition objectives to achieve national development goals.

b. FBDGs are a policy tool for coordinating food, health, and education initiatives.

c. Multi-sector approaches are essential for improving nutrition and successful implementation of FBDG.

d. Nutritional status is a socio-economic issue and not simply a health issue.

e. Food based strategies for health promotion and disease prevention should be sustainable.

f. Both top-down and bottom-up efforts are needed for implementation of FBDGs.

g. A focal (nodal) agency or ministry, such as Agriculture, Health, Education, Women and child Development, should have leadership for nutrition.
h. FBDGs are a key component of national food security.

From these principles the Consultation identified potential actions that can be undertaken at various levels. These actions include:

a. Extract lessons on food, nutrition and agriculture from key reports of international agencies and meetings/workshops addressing issues on agriculture and nutrition.

b. Advocacy efforts for nutrition and FBDGs at appropriate level should be sustainable.

c. Quality of foods for export must be equivalent to the quality for local consumption.

d. Build capacity for monitoring and evaluation of FBDGs. This can be accomplished through training workshops, sharing experience and tools developed etc.

e. Country reports for WFS 5 years later would need to appropriately include a statement about FBDGs and their relationship to agriculture in contributing to the quality of life in the country.

f. Progress from ICN follow up report at WFS 5 years later.

**Constraints and issues:**

The resolution of these constraints may vary by country and is related to the principles and actions identified above. However, FAO can facilitate the understanding and ability to address these issues at the country level.

A constraint in implementing multi-sector programmes for FBDGs is the lack of qualified personnel with nutrition expertise in the relevant agencies, and the fact that
nutrition may not be recognized as a key area of expertise to be promoted within these agencies.

In some regions, the understanding of nutrition is often limited to PEM. This limited view may result in a poor understanding of how nutrition objectives are linked to the primary objectives and goals of various agencies. A challenge for nutrition experts is to understand the specific goals and objectives of the ministerial agencies so that nutritional targets can be linked to these outcomes.

Nutrition is multi-dimensional and complex; consequently it is difficult to identify single or simple and sensitive indicators to demonstrate accomplishments. Systems to monitor and evaluate the effectiveness of FBDGs have not been well defined. Donors often focus on the final health outcome for evaluation rather than the intermediate steps that are needed for behavior change such as knowledge/awareness, attitudes and practices.

The Ministry of Agriculture should have a central role in implementing FBDGs but often their focus is on cash crops or export crop rather than food production related to meeting the food security needs. It should also serve to link up with the FBDGs and the food and nutrition priorities of the population. A consequence of this disconnect may be that high quality foods are exported and poorer quality foods remain in the country or foods that are encouraged for consumption in the FBDGs are expensive, while foods of poor nutritional quality are readily available at low cost.

There is a need for examining the extent to which the National Plan of Action for Nutrition and FBDGs have been included into National policies for development and food security.

There is a distinct need for linking up FBDGs to be through community based programmes and grass root level operations in developmental programmes where nutrition increasingly needs to become an integral component.