



FOOD AND AGRICULTURE ORGANIZATION OF THE UNITED NATIONS



WORLD HEALTH ORGANIZATION

**NUTRITION PROFILES
OF THE DEVELOPING COUNTRIES
IN THE ASIA-PACIFIC REGION**



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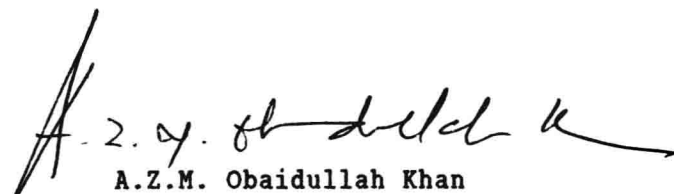
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FOREWORD

The Joint FAO/WHO International Conference on Nutrition (ICN) was held in Rome from 5 to 11 December 1992. In the process of preparing for this Conference, member countries of both the organizations were requested to prepare country papers reflecting actual situations with respect to food consumption and nutritional situations of their populations. The country reports exhaustively cover aspects which influence nutritional situations, namely household food security, food quality and safety, caring for the socio-economically deprived and nutritionally vulnerable, infectious diseases, diets and lifestyles, micronutrient deficiencies, nutrition monitoring and programmes and policies for national development. Dr. Indira Chakravarty, Director-Professor, Department of Biochemistry and Nutrition of the All India Institute of Hygiene and Public Health, Calcutta, India was requested to compile this valuable information from the developing countries of the Asia-Pacific Region into a single publication.

In this publication, the nutritional profiles of the developing countries of the Region are presented in three sub-regional groups: The first group consists of the South Asian countries; the second group consists of the South East Asian countries and China and the third group contains countries of the Pacific. The regional perspective and the sub-regional commonalities of the nutritional situation have been highlighted.

My two colleagues, WHO Regional Directors of the Western Pacific Region and the South-East Asia Region, and I believe that this publication will be useful as a reference material for policy makers, nutrition experts and professionals in various national and international organizations and the academia.


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REGIONAL PERSPECTIVE

The enormity and variance of factors affecting the nutritional status of people has given rise to some similarities but several dissimilarities and even sharp contrasts amongst the developing countries of the Asia-Pacific Region. Therefore, it is difficult to prepare a unified regional perspective. However, a few common issues can be highlighted amongst the countries of South Asia, South East Asia and the Pacific sub-regions.

The common issues are as follows:

1. In almost all the countries of the region there is a perceptable increase in population though the growth rates are being effectively controlled in some of the countries;
2. Wherever information is available, the sex ratio is favourable to males;
3. All the developing countries of the region are predominantly rural based with an increasing trend towards urbanisation;
4. Though there is an increasing trend of GNP in a number of countries, general recession in the world has led to slow economic growth rates which needs to be accelerated through socio-economic reforms;
5. There is a declining trend in IMR, CMR and MMR in all the countries;
6. Land availability and improved land use for agriculture show a satisfactory trend in all the developing countries of the regions. However, irrigation facilities, advanced technology and equipment, trained manpower and better use of fertilisers and pesticides need to be strengthened in all the countries;
7. There is no shortage of food in the developed countries due to high productivity, good purchasing power and balanced trade. In the Pacific region food availability depends to a large extent on the import of food commodities. There is a trend towards achieving self-sufficiency in food grain production in South Asian and South East Asian countries. Nepal and Bangladesh still have food deficits;
8. The diets in almost all the countries are predominantly from cereals and or roots and tubers. There is a recent trend towards increased consumption of animal products and fats and oils, especially in South East Asia and the Pacific sub-regions;

9. Rudimentary Food Quality Control Standards and Legislations exist in all the countries of the region. The strict application is still lacking in most countries. This leads to the problems of food adulteration and microbiological and chemical contamination of foods in many countries;
10. Mild to moderate forms of PEM still exist in almost all the countries of the regions. Severe PEM is almost absent;
11. Anaemia, IDD, and vitamin A deficiency are prevalent among the vulnerable groups in most of the countries;
12. In all the countries of the region there is a general trend in the increase of the diet related non-communicable diseases;
13. Water supply and sanitation coverage needs to be further strengthened in most countries of the region;
14. Morbidity shows a clear cut direct correlation with water supply and sanitation status;
15. There is an overall trend towards improvement of literacy levels, and special attention is needed for further enhancement of literacy among females;
16. Immunisation coverage in general has been improving rapidly with good achievement in some countries;
17. The PHC approach with the NGO participation is followed in all the countries of the region and there is satisfactory to good access to health infrastructure and manpower;
18. Programmes aimed at overcoming specific nutrition problems, improving overall nutritional status and other nutrition related activities are implemented by various Departments such as Health, Agriculture, Education, and Social Welfare in almost all the countries but coordination among various sectors appears weak;

Some of the important constraints identified as factors responsible for undernutrition are:

1. Household food insecurity is a major cause for undernutrition and is either chronic (perpetual shortage of food) seasonal (lean period) or transitory (crop failure, man-made or natural disasters);
2. Root cause of household food insecurity is poverty, which is due to low production, lack of resources and non-availability of proper food market;

3. Low quality and unsafe foods are having adverse effects on the health of individuals as well as on domestic and international food trade;
4. High incidence of infections and infectious diseases due to poor environmental conditions, lack of adequate safe water and waste disposal facilities are leading to poor nutritional status, especially of the vulnerable groups;
5. There is a general lack of nutrition education and that of advice on healthy life styles, infant and child rearing, and dietary management of infections;
6. The implementation of various nutrition programmes is isolated, vertical and without intersectoral coordination;
7. There is lack of trained manpower, training facilities and knowledge of advanced technologies;

Broadly, the future plans may be aimed at the following:

1. Macro economic policies should be directed towards price control, income, employment opportunities to alleviate household food insecurity;
2. Production oriented policies should focus on raising productivity with increased access to inputs, credit, agricultural services, market economy, etc;
3. Research efforts towards saline, sandy, dryland farming, fishery, forestry and reducing post harvest losses should be augmented to increase availability of food primarily for increasing food consumption at household level;
4. The public distributing systems which are instruments for alleviating chronic and seasonal household food insecurity need to be strengthened and target oriented;
5. The capacity of disaster prone countries to cope with emergencies leading to food shortages should be strengthened by developing early warning system and maintaining food security reserve;
6. The national systems to control food quality and safety should be adequately strengthened with multidisciplinary and multisectoral cooperation;
7. Development of trained technical administrators, inspectors and extension personnel and properly equipped laboratories with trained chemists, microbiologists and technicians should be urgently undertaken;

8. In order to reduce food losses strong emphasis should be laid on food processing and preservation and marketing facilities should be streamlined;
9. Special emphasis needs to be given to reduce food contamination and adulteration of street foods by generating consumer awareness on food hygiene and by improving food handling practices;
10. The valuable resources of the international agencies and non-governmental organisations should be utilized for alleviating household food insecurity and strengthening food quality and safety activities in developing countries;
11. Special attention needs to be directed towards preventing and managing infectious diseases through improvement in water supply, sanitation and overall environmental conditions;
12. Micronutrient deficiencies should be eradicated by strengthening or initiating the following activities:
 - consumption of balanced diets
 - supplementation of specific nutrients
 - fortification of foods with essential micro nutrients.
 - horticultural inputs for production and consumption of micronutrient rich foods;
13. Priority should be given to educating and empowering women to perform their roles as producers and consumers in society with equality, justice and social security;
14. The principles of nutrition should be taught as a compulsory subject in schools;
15. Further emphasis must be placed on coordination among government departments, international agencies, NGO's, academia and industries for development, planning, implementation, monitoring and evaluation of nutrition and nutrition related programmes.

South Asian Countries

Country Profiles

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