Promoting Nutrition for Women’s and Children’s Health

Rationale
Nutritional status greatly influences an individual’s growth, educational attainment, productivity, reproductive success and susceptibility to disease. The health and financial costs to low- and middle-income countries (LMICs) from malnutrition – both undernutrition and, increasingly, overnutrition – are extremely high. Global- and country-level interventions for improved nutrition have been proven to be both efficacious and cost effective, but also require complex, integrated multi-sectoral input, including that of the private sector. The potential long-term economic, social and health impact of nutrition-related health problems necessitates the immediate prioritization of women and children’s nutritional needs by communities, national governments, donors and global partnerships.

Getting started
Map the public and private institutions engaged in nutrition policy development and programs, and identify existing strategic and implementation plans. Partner with key actors to carry out an evidence-based assessment identifying the demographic distribution, prevalence and types of malnutrition (both under- and over-). Include anthropometric data and micronutrient status when possible. Identify factors that contribute to malnutrition and its subsequent health, social and economic consequences. Set targets for progress, then identify and prioritize both interventions and sources of funding. Carry out a landscape analysis to identify the barriers to and opportunities for nutrition-based and nutrition-sensitive interventions, the target communities in which interventions are to be carried out, and the relevant stakeholders at global, national and community levels. Include an examination of private sector institutions – including the agricultural, food processing, water and sanitation, and pharmaceutical industries – and an assessment of the potential for public-private partnerships.

Approaches / Steps

1. Undernutrition and micronutrient deficiency
Prevention of hunger
- Align national policies so agricultural policy links explicitly to country nutrition goals and interventions. Tie these to strategies to improve access to land and gender equality.
- Improve rural smallholder productivity via better management of soil and water resources, support for on-farm enterprise, investment in marketing infrastructure and income-generation for poor rural farmers.
- Introduce food-related social safety nets such as early warning systems, targeted cash- or food-for-work programs, and emergency response systems. Integrate nutrition education into these programs.

Promotion of behaviour change
- Promote and provide individual and community support for nutrition-enhancing newborn and infant care strategies, such as exclusive breastfeeding from delivery up to 6 months, kangaroo care, and appropriate complementary feeding for children 6-24 months.
- Support auxiliary interventions such as handwashing and hygiene messages. Promote and improve access to zinc for home-based care of diarrhoea.
- Include growth monitoring and promotion of key nutrition and health messages through clinics and community health workers. Promote the need to meet added nutritional requirements during adolescent growth spurts, especially for girls.

Provision of nutrients, fortificants and emergency feeding
- Introduce supplementation or fortification of key nutrients via periodic integrated campaigns (e.g. Child Health weeks), home fortification of complementary foods, or through partnerships with food growers/processers for fortification of staple foods (e.g. iodization of salt, Vitamin A-enhanced maize, folate- or iron-fortified flour).
- Implement nutrient supplementation for pregnant and breastfeeding women (e.g. calcium and iron folate) via such channels as ante-/post-natal clinics or post-natal community health worker visits.
- Increase access to therapeutic feeding interventions for severe acute undernutrition, if possible in a community based or outpatient setting. Improve consistent supply of therapeutic foods appropriate for household use. Screen and treat accompanying medical conditions. Collaborate with Community Management of Acute Malnutrition (CMAM).

Policy and best practice
- Adopt globally recognized growth-monitoring standards (e.g. multiple growth monitoring indicators, better record-keeping from the point of individual child health cards up to national surveillance systems, inclusion of growth monitoring in pre-service training).
- Integrate nutrition components into other reproductive, maternal, newborn and child services, such as family planning, adolescent health, pre-conception care services, HIV-AIDS programs, and bed-net distribution activities.

2. Overnutrition
Prevention
- Develop long-term environmental and urban planning to create opportunities for physical activity.
- Tax or regulate the marketing of high-calorie, low nutrient
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foods/beverages to children. Control misleading nutrition information through mandatory food labeling. Subsidize and incentivize the sale of healthy foods.

- Develop screening mechanisms to identify obesity, diabetes and hypertension in adults and children. Finance and implement post-diagnostic monitoring and support for obese individuals, including training health workers.

Promotion of healthy eating and exercise

- Implement population-wide promotion of a healthy diet and appropriate cooking methods (e.g. less frying). Target activities at vulnerable groups such as school children, antenatal support groups and women’s groups.

- Implement population-wide promotion of physical activity. Establish minimum daily movement standards. Build physical activity units into school curriculums. Build capacity for community weight-loss or exercise groups.

Policies and best practices

- Establish a national nutrition policy – including national dietary guidelines - with incentives built in for cross-sectoral collaboration between stakeholders in health, transportation, urban planning, finance and food regulation.

- Tax high-calorie, low-nutrient food to reduce overall consumption. Subsidize healthy foods and incentivize better distribution of shops carrying healthy foods.

Role of actors

The Scaling Up Nutrition (SUN) movement was launched in 2010 to campaign for improved coordination and leadership on nutrition. SUN seeks to ensure that donors, governments, industry and civil society invest in scaling up a package of nutrition specific and sensitive cost-effective, evidence-based interventions, such as the promotion of exclusive breastfeeding, access to supplements and fortification, and therapeutic feeding for severe undernutrition.

Aligned with SUN, the 1,000 Days Partnership focuses on pregnancy through the first 2 years of a child’s life. Strong evidence from Peru demonstrates that interventions and therapeutic feeding for severe undernutrition.

For more than 30 years, Thailand’s National Nutrition Programme has successfully combined macro- and micro-level strategies to achieve large-scale gains in the nutritional status of women and children. At the macrolevel, nutrition was tied to the National Poverty Alleviation Program, redefining malnutrition as a poverty issue. An enabling environment for cross-sectoral collaboration was created linking nutritional issues to economics, social welfare and food security. The government committed itself to long-term financing of nutrition and empowered national research and training institutions to work on nutritional issues. At the microlevel, integrated interventions were undertaken to build capacity at community level. Large numbers of village health volunteers were engaged and trained. Community surveillance and growth monitoring were introduced. Supplementary feeding and behavior change interventions (e.g. promotion of breastfeeding, improved food preparation) were coupled with broader agricultural initiatives targeting the rural poor.


Opportunities to engage

- Join the SUN movement for scaling up nutrition together with over 100 organizations and governments committed to working in partnership to fight hunger and undernutrition. www.scalingupnutrition.org/

- Join and submit information to WHO’s Global Database on Implementation of Nutrition Actions to share evidence on how programmes are implemented, including country adaptations and lessons learnt. www.who.int/nutrition/gina/en/index.html

Resources


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