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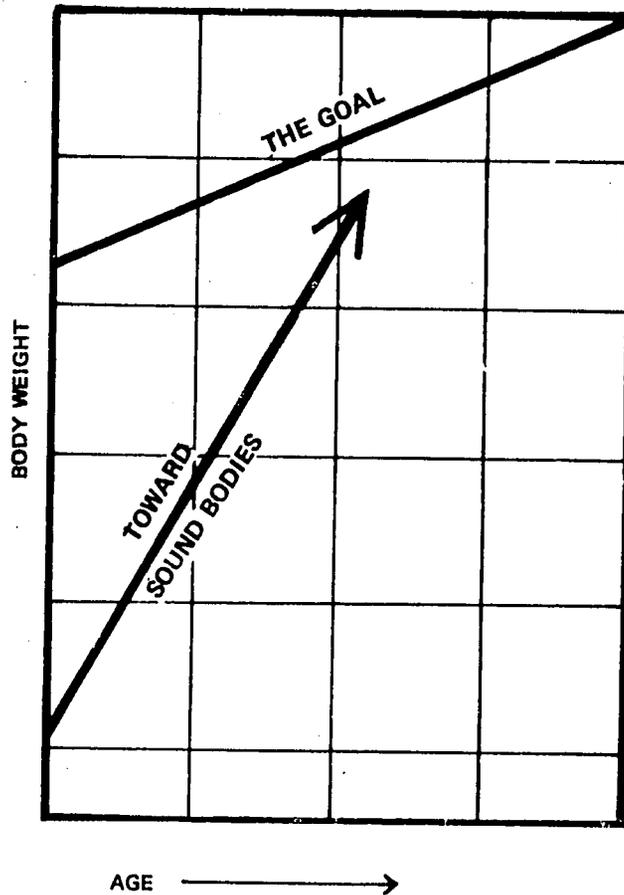
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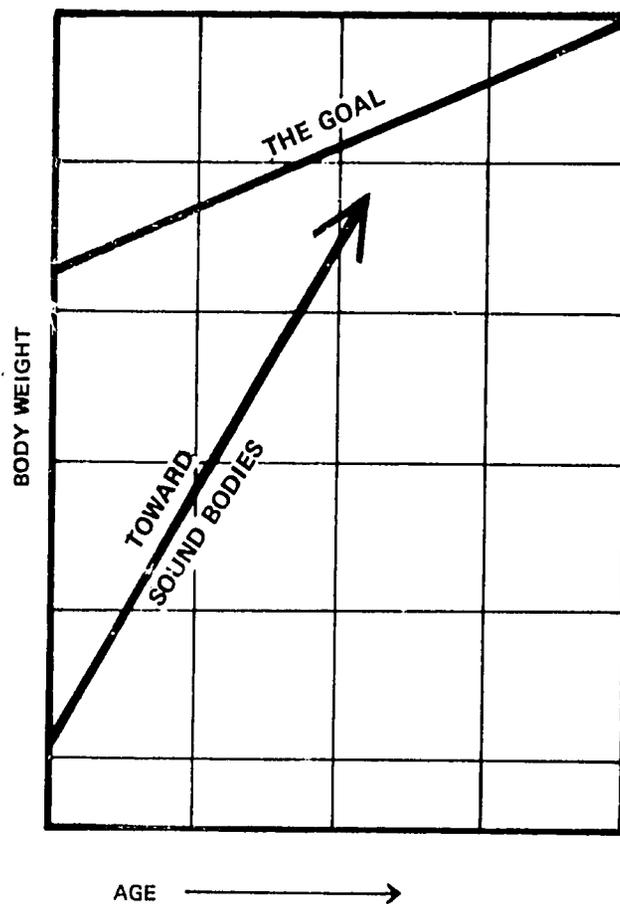
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NATIONAL NUTRITION PROGRAM



Republic of the Philippines
DEPARTMENT OF HEALTH

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**REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF HEALTH
NATIONAL NUTRITION PROGRAM**

I. Brief Description

The National Nutrition Program is an agency created under a bilateral agreement to administer a comprehensive program with multi-agency participation for the purpose of eradicating malnutrition, with particular target on older infants, children of pre-school age, pregnant and lactating mothers and using as a vehicle of approach, mothercraft participation, and instruction. Supporting components include food production and community participation and research in food technology and nutrition leading to local infant food and with additional participant technical manpower development

Simply stated, the National Nutrition Program aims to restore the health of malnourished infants and pre-school children with a complete food supplement while at the same time, instructing their mothers in the use and preparation of local foodstuffs of equal nutritional quality. Annex 1 sets forth in greater detail the objectives and associated activities.

- II.** The Program is supported by a project agreement between AID and the National Economic Council, an agency of the Government of the Philippines. Technical assistance is provided through a USAID contract with the Virginia Polytechnic Institute.

III. Organization (See Annex 2 for functional chart)

Project organization is conveniently divided into:

1. Field operations; and,
2. Headquarters activities including two experimental or demonstration feeding centers convenient to headquarters and administrative control over research and manpower development pertinent and directly applicable to program aims.

Headquarters is so organized that a coordinator, also assistant director, supported by a field operations coordinator, 2 technical assistants (one for field operations and one for research-manpower), is directly responsible to the Program Director, who in turn is responsible under the Secretary of Health, for overall administration, assisted by an inter-agency executive committee to insure coordination of the activities of all public agencies concerned.

Field Operations:

At the impact area where field activities are to be staged, a Resident Nutritionist will be employed who will become a staff member of the Rural Health Unit concerned. After training, guidance and supervision under a team of nationally-based workers, this resident nutritionist will assume charge and be responsible for continuing activities. Through meaningful cooperation and support from the community, the resident nutritionist will work toward extending the program throughout the community by assisting with the development of secondary centers. Annex 3 sets forth guidelines for selection of staging areas for the applied nutrition program in the field. Annex 4 presents the steps involved in activating and operating a center.

National Teams:

A National Team is composed of a Team Leader who is a Medical Nutritionist; one or two professional Nutritionists and an Agriculturist (by detail). This team shall perform the task of providing instruction to the Resident Nutritionist of the Rural Health Unit, and volunteer workers of the community by means of lectures, demonstrations, and workshops. This team will also collaborate in the establishment of the Center and the initiation of its activities sharing in the task of handling mothers and children with the Resident Nutritionist and community volunteers. In addition, it shall oversee that community interest and support are properly developed and encouraged to sustain the continuing activities of the Center giving special attention to the Food Production efforts in the community where the center is operating, as well as to adjacent barrios within its reach. They may initiate the preparation of secondary centers in the nearby rural health units extending such assistance technically and materially as may be available and could be made available.

Headquarters Staff:

In addition to Director, Assistant Director, Field Operations Coordinator, 2 technical assistants, and a Public Information Officer, the usual housekeeping auxiliary personnel will be employed. It is the intent, however, that headquarters staff be kept to the minimum possible numbers for effective operation so that resources available may be used to reach out into the provinces to the maximum extent possible.

Research and Manpower Activities:

The research to be supported must be adaptive and geared to solution of problems encountered in the field operations. Since program intent is that of developing an adequate complete food or food supplement from local resources for infants and young children, research related to this objective will receive major consideration. Evaluation of research proposals received will be the function of a research committee designated for that purpose under the program director.

Since there will be need for evaluating promising food mixtures under field conditions, there will be 2 experimental feeding centers maintained in the Manila area and convenient to headquarters so that sound evaluation data can be collected.

Nutrition Program Objectives

In the broadest terms, the program objective is to eradicate malnutrition from the infant and pre-school age population.

In program development, recognition was given to the accepted observation that malnutrition is a complex problem and, therefore, requires a coordinated effort on the part of a number of public agencies. The following more specifically identify the types of activities that will be carried and considered essential for advancing toward accomplishment of the program objective. These activities can be identified also as sub-objectives.

Sub-Objectives

- I. Demonstrate the value of a balanced diet for infants and pre-school children.

This is to be accomplished as a major field activity with responsibility residing in the local rural health unit and with technical assistance to be furnished from the Central Program Office. The demonstrations will be carried on with children who are in greatest need as evidenced by their body weight with respect to age. Experience has shown that as many as 20-40% of children, aged 9 months to 6 years, may be as much as 30% or more under standard body weight for their age in many communities or barrios. These are the children whose parents must be prevailed upon to participate in the feeding-demonstration program. In selecting feeding-demonstration sites, it is very important that these are within walking distance for the mothers whose children are malnourished. The response of the children, as measured by improvement in body weight gain during a 2-4 month period will serve as the basis for educational materials to be developed to penetrate the municipality and indeed the province as a whole on the health benefits that can be realized from better nutritional practices.

Complete diets for the feeding demonstrations will be accomplished initially by donating a complete food supplement available through the Nutrition Program Office in Manila. Since such a supplement will not be available indefinitely, other sub-objectives (below) will be pursued.

II. Intensification of food production through community and home gardens.

Once such home production is achieved, the food supplement will be withdrawn. In order to insure success, such home garden projects should include legumes, pods, beans, or peanuts, as well as leafy and other vegetables and fruits. In order to accomplish this sub-objective, the Central Nutrition Office will furnish an agriculturist (by detail) from APC initially. The cooperation and whole-hearted support of the local staffs of the BPI, BAI, and the DANR is, however, essential for this activity. The Nutrition Program Office will make modest contributions to assist the community or home garden projects through furnishing of funds for garden tools, seeds, fertilizers, and pesticides.

III. To support research and development that will lead to the introduction of low-cost food supplement or complete infant food manufactured from local food resources.

Such a supplement or food blend is to be used as a replacement for the donated supplement, particularly in urban areas where prospects of producing home or community gardens are not practical or feasible. Development of such a supplement involves several research or development steps as follows:

- a. Chemical analysis of potential commodities as to vitamin, mineral, protein, fat and amino acid content and as to freedom from hazardous or toxic substances.
- b. Animal tests to determine the nutritive qualities of the protein component of promising food blends.
- c. Tests on human subjects under controlled conditions to ascertain wholesomeness, acceptability, and nutrient utilization from promising food blends.

Research proposals focusing upon the above will receive primary consideration for support through the limited resources available for these purposes. Currently, primary support is extended to the FNRC, NIST, NSDB to pursue studies on a coconut, flour, mongo bean, skim milk powder blend that shows promise as a potential food blend for commercial production and use in the feeding-demonstration program.

Arrangements for supporting a research center for controlled metabolic studies are currently under study.

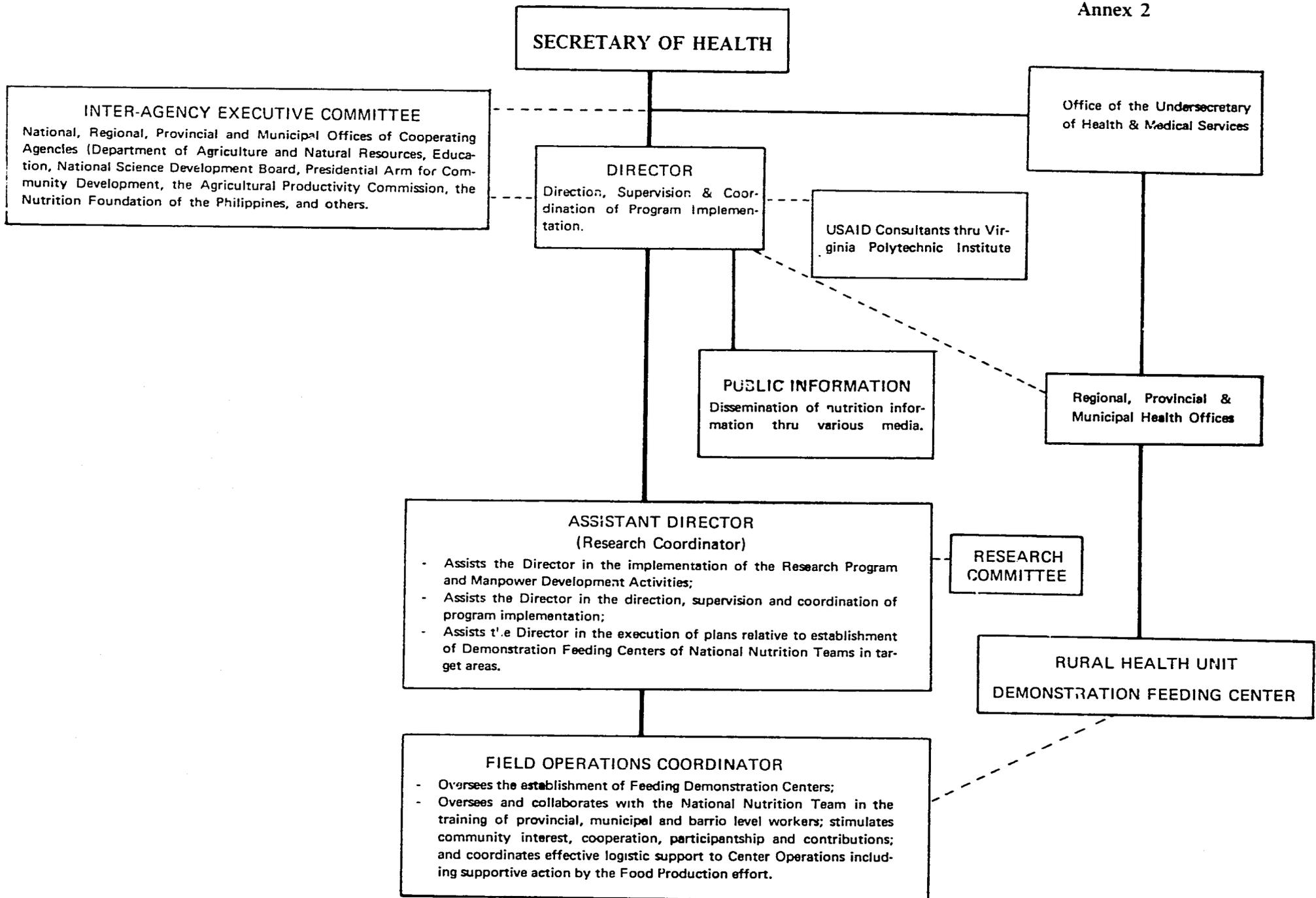
IV. Coordination

At community level the Rural Health Units have direct responsibility for feeding-demonstration activities and maintenance of records associated therewith. Since several other public agencies are engaged in related supporting activities, PACD officers will usefully provide leadership in assuring cooperation and coordination among the health, agricultural production, agricultural or home extension, and education activities of the field program, but principally to develop meaningful, sustained, and continuing support to all those community activities.

V. Utilization of demonstration-feeding data in education programs.

Valuable research data on body weight responses will be accumulated as field activities become operational. These will be accumulated in the central office and serve as resource material for developing educational materials to be used in schools and extension education programs on a national scale. A particular function of local education departments will be that of introducing such new educational information into health courses or adult conferences, short courses or workshops.

Similarly, data on production and use of supplementary foods (community and home gardens) locally accumulated can serve as resources material for introduction into courses of instruction in practical agriculture and home technology.



**Guideline for Selection of Sites for Demonstration Feeding Centers
Applied Nutrition
National Nutrition Program**

First: There must be assurance that the site is within easy walking distance of a population group that is seriously in need of nutritional improvement. As a general guide there should be 50-60 families with pre-school children whose body weight is 70% or less of standard weight. Generally these conditions are not met except in communities where there are a significant number of families of low socio-economic status.

Second: The site must have a minimum space of approximately 12 x 20 feet to serve as a dining area. This space must be furnished with a low table and benches where the children can be seated. For perhaps as many as ¼ to 1/3 of the children, there will also have to be room at the table for the mothers to sit down. Thus the dining space must be adequate to accommodate about 30 children plus 7-10 mothers.

Adjacent to the dining area, there must be a work bench and sink and a stove (wood-burning).

Also, space must be provided for storage of food commodities – a 6 ft. x 8 ft. space is generally considered minimum.

Third: There must be potable water available and also toilets in good operating condition, or well-sanitized out-door latrines if in-door toilets are not available.

Fourth: There must be space available for the development of home or community gardens, or other facilities for increasing the production of protective foods, such as fisheries, piggeries, poultry, or other livestock.

If the above criteria are not all met, they will have to be provided through local self-help effort. If this does not seem possible, and a given site meets all other conditions, serious consideration should be given to supply materials for constructing the minimum facility needed, all labor for such construction to be furnished by the community. This alternative should be considered particularly in communities where poor physical growth is common in the child population and where local resources would be seriously taxed if some outside assistance, such as building materials are not furnished.

Plan for Activating a Feeding-Demonstration Center

1. Consultation with executives concerned.
 - Clearing session with Regional Health Director.
 - Conferences with Governor, Provincial Health Officer, and all concerned agency personnel at provincial level:
 - Selection of Staging site, utilizing criteria as outlined in Annex 3.
2. Procurement of supplies.
 - Supplementary foods
Kitchen utensils and stove
 - Culinary supplies
 - Seeds, garden tools, fertilizers, pesticides
3. Orientation of mothers as to: (Annex 5 may be used for this purpose)
 - Significance of program
 - Description of planned activities
 - Basis of selection of participating mothers and children
 - Necessity of regular attendance
 - Subjects of importance to general health and well-being
4. Base-line data collection
 - Initial weighing of children as basis for selection of those most in need:
 - Brief analysis of past food habits and food intake.
 - Analysis of local market or home production availability of fruits, vegetables and legumes.
5. Initiation of feeding demonstration and maintenance of operational records including:
 - a) Daily attendance and food consumed (Form HDFN No. 4).
 - b) Bimonthly weighing of participant children and their plotting on weight charts mounted for ready reference (so mother can observe child response in growth and development – Form HDFN No. 2).
 - c) Accumulated record of bi-monthly weights (Form HDFN No. 1).

Note: Forms HDFN No. 4 and No. 1 are maintained in duplicate – one copy.

6. Developing home garden or community garden projects.

This activity should proceed simultaneously with initiation of feeding so that an orderly change from donated commodities to locally produced commodities can be accomplished. This activity will be under the leadership of the agriculturist with the cooperation of the Nutrition Team. The APC, the BPI, and the PACD personnel.

7. Periodic Evaluation

Technical personnel, from headquarters, will visit each operating center on a monthly schedule for review of progress and for introduction of modified approaches, depending upon progress and/or need for adjustments.

Estimated Schedules

Items 1 through 4 should be accomplished during the first 4 weeks. Items 5 and 6 should be initiated in the fifth week and remain under national team guidance for one month, at which time the resident nutritionist and cooperating agency local personnel should be in position to assume full responsibility for continuing operation.

Opening Day – Briefing of Mothers by the Feeding Center Supervisor

The briefing should be done in the local dialect with an admixture of English as required, although the briefing should be kept consistently on the level of the mothers and in lay terms.

The first point to make is to express appreciation to the mothers for their attendance and interest in learning practical means to guarantee the welfare of their infants and toddlers through the assistance of the Nutrition Program.

The second point to make is that without the whole-hearted concern and cooperation of the mothers the program will not be successful.

Next there should be a brief discussion of what they, as mothers, are expected to do. The following should be stressed:

1. Bring their children promptly at 9:30 a.m. and at 1:30 p.m. each day, Mondays through Saturdays.
2. Help with cooking and serving of the meal and general housekeeping of center.
3. Listen to the supervisor's explanation of what the menu is for the day and why certain menu items are there. In other words, an information discussion of what constitutes a complete diet.
4. The 2 feedings are not to replace all feedings at home. All we are doing is furnishing meals so they, the mothers, can, by seeing and doing, learn how to feed their children so they will be more robust and healthy. Stress that the children need at least 2 other meals at home – one in the morning and the other in the evening.

At this point it is a good idea to explain that if some mothers cannot attend everyday perhaps they can organize into groups – certain mothers being present every Monday, another group every Tuesday, etc. Be sure to explain, however, that when they cannot attend they must make arrangements with a neighbor or friend to bring the children. The children must attend everyday if at all possible.

Next the briefing should go into a simple explanation of why the program is important.

First, stress that as a group their children weigh only $\frac{2}{3}$ as much as normal healthy children of that age should weigh. Next emphasize that because of this poor physical condition the children are likely to have severe cases of colds, sore throats, coughs, and other infectious diseases. In other words, if their children were more robust, they would be better able to withstand sickness and recover more rapidly. Mention should also be made of the observation that children who develop slowly physically may also develop slowly mentally. What does this mean? Explain that the poor physical condition, and the poor mental condition, places the children at a disadvantage when they reach school age. They will be less likely to learn as fast and as well as their well-nourished classmates.

Next there should be a brief discussion of how progress will be measured. Explain that the children will be weighed every 2 weeks. The weights will be charted on paper so the mothers can see for themselves how their children are progressing. After 6 weeks to 2 months there should be real evidence of normal growth or even better than normal growth. Each mother will receive an explanation of whether or not her child or children are progressing satisfactorily. If progress is not satisfactory, the reasons should be sought out.

In closing the briefing the mothers should be complimented for being present. They should be complimented in particular for showing this interest in the welfare of their children. They should be complimented since they represent true motherhood in their concern for their children and with devoted effort they will be rewarded with more robust and healthier children.

Finally, it should be stressed that the success of the project is dependent on the full cooperation of the mothers, and that they should feel free to discuss their problems or perhaps give suggestions as to how the program may be improved. The objective of this program is to give maximum service to promote and protect the health of the mothers and their children.