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Report on Nutrition Workshop

"Reaching the Preschool Child"

July 2-August 6, 1970

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AID/CSD-2613 GTS

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I

INTRODUCTION

INTRODUCTION

The American School Food Service Association was the contractor for a project sponsored by Office of Nutrition , Technical Assistance Bureau of the Agency for International Development, U. S. State Department. ¹

Project purpose was to conduct a nutrition workshop which focused on reaching the preschool child.

Dr. Martin Forman , Director of the Office of Nutrition (Technical Assistance Bureau, AID) was more specific when he spoke to participants in Denver:

"We are still a very long way from making an impact in child nutrition. While we can always find examples of some areas in which we have gone forward, we are really only just keeping pace. There certainly has been no impact on 300 million children in the world who suffer seriously from malnutrition.

"Maybe child feeding is not the way for every country or for certain parts of a country. Perhaps child feeding will not always work or at least it may not be the most effective means of achieving nutrition objectives. If this be the case, we should look for other alternatives -- so that we may compare their potential benefits in terms of their cost.

1. We need to have our objective clearly in mind....
2. We need to know alternative ways of reaching these objectives.
3. We need to know the cost in money, in people and in materials....

This is the purpose of this Workshop ... namely to

1. Clearly identify the nature and magnitude of the problem.
2. To weigh the cost and benefits of alternate approaches to the problem.
3. To seek, to develop new innovative techniques where existing approaches may be inadequate."

Eighteen participants from twelve developing nations participated in the diverse but related Workshop activities.² Observations were made in preschool feeding and day-care centers in four United States cities. Five Workshop members made presentations which summarized efforts to reach preschool children in their countries. Consultants met with the participants. Experiences in preschool child nutrition efforts were described and discussed. From lengthy discussions emerged recommendations and conclusions (Parts I and II of this Report).

Four United States cities were visited: the urban and surrounding areas of Denver, Colorado; Corpus Christi, Texas; Atlanta, Georgia; and Philadelphia, Pennsylvania. A workshop curriculum was developed and revised by the ASFSA Headquarters staff and those individuals who served as local coordinators for the Corpus Christi, Atlanta

¹ See Appendix I (ASFSA)

² See Appendix II (List of Participants)

in Corpus Christi, Miss Josephine Martin in Atlanta and Mrs. Catherine Nichols in Philadelphia provided exemplary leadership and experiences for the workshop.

The purpose of the visits was to stimulate discussions that, combined with the participants' backgrounds and experiences, would identify techniques which would eliminate impediments to reaching the preschool child. One result of these efforts can be identified in Report recommendations regarding the development of health/nutrition centers.

Participant experiences were evidenced in presentations. Dr. Lourdes Sumabat showed and discussed a film describing the Mothercraft program in the Philippines. Dr. Alvaro Leon described from charts the efforts made by the Colombian Government to plan and implement preschool child health/nutrition programs. Dr. Puantong Tantiwongse explained food fortification projects being carried on in Thailand. Two participants from Brazil, Dr. Dalva Sayeg and Dr. Fernanda Calvalho gave a slide presentation and commented on day care centers in various parts of their country. Mr. Abbi showed two films which detailed tribal life in the Indian state of Madhya Pradesh.

Consultants contributed to Workshop efforts with expertise and experience gained in developing countries as well as in the United States. In Denver Dr. Arnold Shaeffer, Chief of Nutrition Programs for HEW's Health Services and Mental Health Administration, reported on the 16 state study on malnutrition in the United States.

Miss Bernadine Foley joined the Workshop for two days in Corpus Christi. She stimulated lively discussions after describing her experiences in Africa. Working in the public health area on Father Capone's staff, Miss Foley related the successful use of infant weight charts in nutrition and health education.

Dr. Kendall King spent an afternoon with the participants in Atlanta. Discussion ranged over many areas pertaining to preschool child programs, particularly the Haitian Mothercraft programs which Dr. King was instrumental in establishing. In Philadelphia Workshop members found Dr. Paul Gyorgy a most valuable resource person. Dr. Gyorgy, a noted nutritionist, described his research efforts in Thailand and Indonesia. He spoke at length about the potential for food fortification and the creation in developing countries of a Vista-type volunteer program. His contribution is evident in Report recommendations.

The Recommendations and Conclusions contained in the following sections reflect one problem area which Workshop participants chose to focus upon. These were examined by three subcommittees, each of which was chaired by elected leaders. Professor Jose Camarinha Nascimento, Dr. Lourdes Sumabat, and Dr. Tito Velilla. Two Interpreters were assigned to the Workshop by AID. Miss Ana Marie de Ceballos and Mrs. Carmen Cumming demonstrated exceptional ability in the process of study, critique, and Report formulation.

Acknowledgement is due many people who gave their time and energies to insure this Workshop's success, particularly those eighteen men and women who traveled many miles to participate. They came with a willingness to learn and a desire to share ideas and experiences. They reflected both a challenge and a hope that in ways not yet known, hungry children might benefit from their efforts.

II

RECOMMENDATIONS

"The gap between the affluent few and the hungry millions in developing countries and that between the many affluent and relatively few, but still, considerable number of poor in highly developed countries is widening and may become unbridgeable if properly directed efforts are not put into effect without delay.

"In the great majority of developing countries today, 70 percent (or more) of the children under 6 years of age are malnourished and have no opportunity of developing their full potential... Early malnutrition may have a lasting impact on the physical and mental development of infants and young children... Their physical growth and final maturation of many of their organs, to name only two - the brain and kidneys, shows the relatively greatest speed after fetal life, the first 3-5 years after birth... It is highly probable that without improved nutritional and social conditions the damage of early childhood may engulf the corresponding generation leaving its mark on the general social, economic and cultural development of the nation in developing countries as well as those disadvantaged groups in highly developed countries."

Dr. Gyorgy's statement struck a responsive chord among Workshop participants.

The urgent need to reach preschool children was evident in Workshop discussion and in the group reports which focused upon nine problem areas. There is a recurrence of several recommendations within these nine areas, e.g., integrated health/nutrition programs, national nutrition policy, assessment of nutritional status. This repetition is intentional. While any number of problem areas can be identified, one is isolated. In the participants' view there is an interrelationship among problems which must be demonstrated in national efforts to eliminate malnutrition.

Malnutrition/Assessment of Nutritional Status

Workshop participants identified calorie-protein deficiency as a prevalent concern in developing countries. While they recognized that there was general awareness of the situation, participants were quick to point out that awareness has not been matched by "the requisite degree of action... People who talked of nutrition were inclined merely to adopt it as a fashion."²

1

"Malnutrition is a Problem of Ecology" - Speech delivered by Dr. Paul Gyorgy, 1970

2

"Report of Group III", P. 1

Programs are needed which replace "awareness " with " action". This is not to say that efforts aren't being made to reach those most vulnerable to malnutrition: preschool and school-age children, pregnant women, and nursing mothers. Food assistance programs administered by both international agencies and national governments are striving to meet the nutritional needs of these groups and others. However, limited success has been realized because need has increased in geometric proportions while supply has grown arithmetically.

Nutritional needs cannot be met by bigger and better food assistance programs. Developing countries must accept responsibility for specifying these long-range needs and formulating "integrated" programs to meet them. Participants viewed "integrated" programs as those which recognized the place of health service, nutrition education and food productions, among others, as integers of these programs.

The attack upon malnutrition requires a realistic look at deficiencies which afflict developing countries. There is a lack of technicians trained in solving and/or preventing malnutrition problems. Financial and material resources are limited. Sophisticated techniques for reaching malnutrition victims are few. The greatest deficiency, however, lies in knowledge of the nutritional status existing in developing countries. An assessment of that status deserves first consideration. Accepting the limitation posed by insufficient funds and inadequate number of trained personnel, Workshop participants believed that these deficiencies were not so severe that an assessment could not be undertaken.

It would accomplish several purposes. It would graphically illustrate the need and provide the framework for "integrated", "action" programs aimed at reducing and eventually eliminating malnutrition. It would pinpoint population groups and geographic areas requiring priority attention. It would require the cooperation of existing governmental agencies and perhaps establish a pattern for future programs aimed at reaching the preschool child.

It is toward preschool children that the Workshop would focus priority attention. In order to assess malnutrition and nutritional status participants recommended that all preschool children of high nutritional risk be identified. To accomplish this, "simple, practical, rule-of-thumb techniques such as body weight for age and/or clinical examination should be used in identifying the incidence of malnutrition."³ It was pointed out that indices such as birth weights, morbidity and mortality rates of infants and preschool children may already exist in some areas. But many statistics have not been marshalled for the purpose of assessing nutritional status. Even if undertaken on a sampling basis, there is need for data pertaining to factors which underlie malnutrition. Examples include:

- existing infant feeding and weaning practices
- incidence of infectious diseases
- sanitary conditions
- dietary practices

- food sources, types , quantity , marketing, distribution, storage
- educational level
- general economic conditions

Food Production

Participants identified a strong correlation between the recommendation for assessing nutritional status and that for improving food production.

"The provision of balanced diets is basic to any nutrition development program.

The fundamental step should therefore be to augment food production."⁴

Three important elements of food production planning were identified:

- 1) With particular emphasis upon augmenting food production at the family level (e.g., home/school gardens), national planning efforts should consider an agricultural policy which systematically seeks improvement in many sectors, including agriculture, dairy and poultry production and fisheries.
- 2) Improvement of food production depends on expanded agricultural research. The quantity of available food is crucial to hungry children and adults. However, the quality of that food is equally crucial. Participants cited experiences in their own country. The protein level of peanuts must be raised while production levels are increased.
- 3) A national agricultural policy should focus upon existing and optimum cropping patterns. Is land under cultivation being used to produce nutritious foods? With the growing acceptance of fortified foods in developing countries,

⁴ "Report of Group III" P. 2

can educational efforts be turned to "encourage production of soya beans, legumes, or peanuts, etc. "?

Community Involvement

The participants visited many day-care centers and Headstart programs. They observed a number of community volunteers donating time and effort to children. These experiences had an impact on Workshop recommendations. Participants recognized that a successful attack on malnutrition required concerted effort. They saw community involvement as the first line of that attack.

"...Involvement of the people in the community is a MUST. Nobody can solve the problem without community cooperation from the grassroot level. Only the community can succeed in solving its malnutrition problem."⁵

If poverty is the basic cause of malnutrition, ignorance of proper nutrition ranks next.

This consensus of the participants led them to cite public awareness and nutrition education as problems requiring immediate attention. In order for community leaders and parents to contribute to the solution of these problems, they must first be aware of them, realize their implications, and be presented with alternatives for their solution.

Communities need information to accomplish this task. Communication media have reached varying levels of development throughout the world. Whatever that status might be, it was recommended that greater use be made of media to inform communities of what they can do to reduce malnutrition and improve nutrition status.

In the participants' view "community involvement" has specific meaning. It means first

5

"Report of Group II", P. 3.

that the leadership of existing non-profit and charitable organizations must be enlisted in planning and implementing nutrition programs. The members of service clubs or their equivalent can be a vital force in a national/local effort. More important is the involvement of mothers. Three ways are identified to achieve this where preschool child centers are established.

- 1) A modest salary could be paid mothers when they work in centers.
- 2) Community employers could release working mothers perhaps once a month to work in the centers.
- 3) Mothers could serve on a voluntary basis perhaps once a week. Not only would they assist in programs for the children, but mothers could also receive instruction on how to buy, prepare, and serve low-cost, nutritionally rich foods found in the local area.

Where preschool child centers do not exist, consideration should be given to their establishment. Local conditions could prevent mothers and children from coming to such centers, requiring services to emanate from them. However, if there is validity for a community action program, there must be a focus for this effort. It is the participants' collective opinion that community nutrition/health centers could supply that focus.

Health Services

A number of physicians were included among Workshop participants. Their experiences and training influenced final recommendations in this area. The preventive aspect of health and nutrition services was emphasized not only because of the social considerations involved but also from an economic standpoint as well. "The social cost of malnutrition... is heavy because the government has to incur large expenditures for the rehabilitation of the children handicapped by nutritional deficiency." ⁶

⁶ "Report of Group III, " P. 2

Health and nutrition programs are welfare measures whose yields cannot be easily quantified. However, studies indicate that improved feeding results not ~~only in~~ improved physical health but in increased intellectual ability as well. Quantification may not be possible, but investment in human resources has far reaching ramifications.

"The immediate and long-term costs of malnutrition in terms of loss of production and low productivity, in addition to measures for controlling diseases caused by malnutrition, suggest that investment in nutrition has a built-in multiplier effect."⁷ That investment, according to Workshop participants, could best be made in health/nutrition centers having multiple functions. First among these would be medical or para medical services. A network of centers with permanent staff is a costly and unrealistic proposition in terms of needed funds, trained personnel, and simple logistics. Not as costly and more realistic are community centers which rely upon trained volunteers, visiting field staff specialists, and a health visitor (s) or a mid-wife who will be drawn from the local community and in whom parents will have confidence. These centers could provide, in addition to health services, preschool child education, nutrition education for parents, information (in some countries) about family planning, and food.

Nutrition Education

A decision was made during Workshop discussions to draw special attention to this problem. Participants had experienced situations where the value of nutrition education was questioned and its role downgraded.

⁷ "Report of Group III" , P.2

It was their belief, however, that a mother's knowledge of low-cost, protein-rich foods available in local markets is a powerful weapon against malnutrition. Her understanding of the relationship between these foods and a child's health is equally important.

Consistent with other recommendations, participants viewed nutrition education as a distinct function not only of health/nutrition centers but also of primary and elementary schools. This would require extensive retraining of those already in the field and introduction of required nutrition courses for teachers, medical and para-medical personnel, and public/social welfare trainees.

Teachers were identified as particularly valuable resources in the nutrition education effort. Seminars, workshops, and training sessions "... should be directed toward basic nutrition, identification of nutrition problems within the area, awareness of solutions to such problems, improvement of food habits of children, and utilization of food items in the regular instructional work whenever and wherever feasible." ⁸

Political Involvement

Unique political structures exist in each developing nation. Factors relating to the society, the economy, and the culture determine those structures as well as the means used to influence changes in national policies. Among those concerned with reaching the preschool child, participants urged individuals to work toward bringing about changes through political education programs and involvement in political processes. Political involvement does not imply direct intervention in partisan matters. Rather, "involvement" should be viewed within the context of educating politicians who are not always interested in nutrition programs or aware of how malnutrition can be attacked. The Workshop members believed that it is necessary first to generate interest and to

⁸ "Report of Group II", P. 5

stimulate awareness. The most feasible way to achieve these goals is to make child nutrition programs "politically attractive and consistent with other political objectives such as economic development and education."

It is common for nations to identify economic development and education policies. The same practice is urged in the area of nutrition. Participants recommended that immediate effort be made in the separate developing nations to establish nutritional policies. The basis for these was spelled out by the Workshop:

"An entire nation as well as individual communities must be motivated. In this regard, basic legislation on feeding and nutrition is essential. We recommend that there be a legal obligation to feed preschool children."⁹

With legal obligation as the basis, these policies would be, in effect, "children's charters", providing a blueprint for:

- 1) Assessing nutritional status,
- 2) Determining means of reaching the preschool child, e.g., health/nutrition centers or existing public schools,
- 3) Establishing priorities for programs which recognize unique needs, available resources, and local conditions.

To implement this blueprint, participants further recommended that developing countries establish a new agency of ministerial rank. Granted the authority to formulate, implement and evaluate nutrition development programs, this agency's director would report directly to the nation's chief executive. In addition to coordinating food assistance programs, "either (using) a country's own resources or those received multilateral organizations",

⁹ "Report of Group I", P. 2.

this agency would be responsible for the assessment of the nation's nutritional status. In addition agency personnel would work closely with Ministries (departments) of Health, Education, and Agriculture to insure that improvement efforts in food production, health services, and nutrition education proceeded in pace.

International Cooperation

Workshop discussion focused frequently upon international food assistance programs. The recurring theme was that developing countries needed assistance and should seek it out if malnutrition is to be eliminated. However, there is a corollary, and that is:

"... to stress that this is a sensitive area of operation. Since national sentiments are involved, donor countries should adopt a friendly attitude and carefully avoid being patronizing. Friction arises either because the donor country gives the impression of scattering largesses or because the recipient country feels hemmed in by too many conditions governing the supplies.

"Supplies should be unconditional and the recipient country should have the fullest discretion to utilize them in the manner it chooses. The donor country can legitimately ask for the accounting of supplies utilized for a stated purpose. The donor country should also try to offer only those commodities which are needed. It should desist from attempting to unload its surpluses in places where they are unwanted."¹⁰

Participants agreed that international food assistance programs have alleviated hunger and strengthened socio-economic development activities. However, it is no longer 1960. Many developing countries are reaching levels of development which require new considerations.

¹⁰ "Report of Group III" P. 5-6

Assistance is still needed in the form of food and funds, but recognition is due the growing competency of national leaders in the fields of health , education, and agriculture.

"... Reprogramming of these aids may be necessary or retargeting of existing programs may prove advantageous to cope with existing socio-economic changes (in) the country being assisted." ¹¹

In too many instances food assistance agreements have been unilateral. They have been the result of actions by governments or private agencies which have failed to perceive the need for well-planned, phased programs. Participants called for acceptance of the principle of bilateral agreements reached through frank discussions and focusing upon "integrated" nutrition programs.

There is need for more than food. Many countries have conducted studies and implemented programs which could have implications for other nations but dissemination of their results has been limited. Participants strongly urged that an international effort be made to assemble, translate, simplify where necessary, and disseminate information about research results and program developments. This should be done by one organization which views pragmatic information as a prime source of aid. This agency, in addition, could provide developing countries with help in identifying financial, commodity/food, and technical assistance available from international agencies.

Personnel Training

Participants agreed that it may not be possible for many countries to afford a separate hierarchy of staff for organizing nutrition/feeding programs. People, time and money are not available for such an undertaking.

¹¹ "Report of Dr. Jaime Munoz" P. 2

In line with the recommendation to establish "integrated" nutrition programs, Workshop members urged the creation of youth corps. "Tremendous potentialities" were envisioned through the employment of university-age students in community nutrition programs.

"Food, education, community development, social welfare are . . . offering similar services for the welfare of the same group, namely, the preschool group. The personnel posted in these sectors must be oriented in the subject of nutrition. Besides administering programs they could in turn train others. This multiplier training program can be extended to cover the general community also. Organizations like the Peace Corps and the proposed International Volunteer Corps provide middle level manpower which can be tapped for the purposes suggested." ¹²

Evaluation

Participants cited this area as the one having most importance and least commitment in several developing nations. Guidelines are needed which place evaluation at the core of nutrition program development, providing continuous feedback for planning purposes.

First priority was placed on assessing current nutritional status. Participants were specific in this regard. The effectiveness of current nutrition programs must be measured with techniques that are "simple, practical, and in accordance with the available resources in each country." Realizing the long-range implications, participants additionally recommended that "simple and common anthropometric measurements such as weight for age, height/weight index, be internationally adopted for determining improvement of nutritional status." ¹³

¹³ "Report of Group II", P. 6

Second priority was given to providing nutrition program planners and implementers with evaluation tools. Participants recognized the varying levels of sophistication in evaluation methods. In light of this they urged the development and dissemination of a variety of evaluation instruments.

Finally, Workshop members recommended "that the relationship of mental development and improved nutrition be established using a variety of techniques applicable to a given population sample. " 14

14

Ibid, P. 6

III

CONCLUSIONS

Boston and the annual meeting of the American School Food Service Association was the site of the Workshop's final sessions. Participants met with Dr. Martin Forman to discuss their observations and recommendations. They hammered out the following statements as conclusions to their efforts:

1. The most valuable resource which a nation possesses is its people. They are its future. That future is jeopardized when a vital element of population is not reached with services and goods which can insure growth into productive, healthy citizens. It is the basic conclusion of this Workshop that jeopardy exists for pre-school children living in developing , as well as highly developed, countries.
2. There is no simple method for reaching the preschool child. Socio-economic conditions, diverse educational levels, food production/distribution potential, consumption patterns , ethnic diversities are but a few of the factors which complicate the task of accomplishing this goal. However, two ways of reaching the preschool child are obvious:

- a) Directly, through feeding programs serving low-cost nutrition meals in health/nutrition centers, e.g. , Mothercraft Centers, schools.
- b) Indirectly, through nutrition education of mothers and children either in health/nutrition centers or in schools.

The merits of these approaches and the impact of nutrition programs have not been well-documented . Evaluation is urgently needed.

3. Support for these programs can be better assured through a national policy committed to improved nutrition as a vital ingredient of a nation's total development. This

policy should be based upon a nation's legal responsibility for the health of all citizens , particularly the preschool child.

A national nutrition policy should operate within the political framework and yet be above partisan consideration. In terms of planning, development, implementation, and evaluation of health/nutrition programs, the policy should be administered by a cabinet-level minister who receives his authority directly from the country's chief executive.

Of priority concern to this organization should be an assessment of the current health/nutrition status of the nation's citizens. The complexities and dimensions of such an assessment are realized. However, until specific baseline data can be identified, the expansion or creation of programs designed to reach the preschool child will continue to have limited effect.

It is recommended that, following assessment, health/nutrition program planning identify priority objectives to be met with available resources, part of which can be supplied by the national government, part by local governmental/voluntary resources , and part by international agencies.

This planning should specify short- and long-range requirements in such areas as food production and distribution, personnel training (including the use of supervised volunteers) nutrition education, health services, supplementary feeding efforts, and food fortification. The planning of health/nutrition programs should include prescribed implementation procedures. This aspect is vital in order to coordinate effectively the efforts of agencies involved in health, education, agricultural, and international programs. Implementation procedures must reflect commitment to ongoing evaluation. Data must be reported in a way that they will have significance to administrators. As programs

are carried out, necessary modifications can be made, based upon evaluation results.

4. Self-sufficiency on the part of communities and individuals should be a basic goal in child feeding programs. However, such a goal cannot be attained without an interim period when subsidies are provided by the national governments.

5. The manpower needed to reach preschool children with health/nutrition programs will require the involvement, training, and supervision of volunteer youth and parents. Attention should be directed to the extensive use of the mass media, existing institutions (e.g. schools), and civic and charitable organizations as means to enlist public support.

6. To reinforce and expand existing programs, there is continuing need for international exchange and cooperation with regard to supplies, information, and technical personnel.

7. Nutrition as a preventive measure should be emphasized. Since the major impact of nutrition programs will be upon the health services sector, leadership in this area must be committed and strong. While other agencies should be considered as well (e.g., a national nutrition committee), health officials must have primary awareness of the importance of nutrition.

8. The long-term objectives of health/nutrition programs can only be achieved when integrated with family planning efforts.

9. The preceding recommendations call in general for extension, expansion, and intensification of existing services. In appreciation, however, of the need to offer more effective services, new lines of operation should be considered.

Workshop attention has been directed to this issue. However, definitive observations

or recommendations have not been presented. This is an issue requiring the concentrated and extended attention of all countries. As a follow-up measure, it is recommended that the participants of this Workshop initiate action in their separate countries to explore new dimensions in the field of child nutrition. In this context the following are illustrative ideas:

- a) It may be worthwhile to operate programs similar to the Food Stamp Program in the United States. This approach could include the issuance of bonus coupons for enriched baby foods.
- b) National Governments should consider promoting production of new foods. Fortified, indigenous products could provide better nutrition at lower cost. Subsidization of manufacturing costs should be considered as a means of keeping down the price of the final product. This arrangement could also serve as an incentive for manufacturing low-cost baby foods.
- c) From a long-range point of view it is recommended that all countries stress the nutritional importance of breast feeding. This can be accomplished through government support of programs and/or laws which encourage and protect the lactating mother and child, through educational campaigns, and through other means deemed appropriate to the separate countries.

The participants of the Preschool Nutrition Workshop recognize that five weeks of observation and discussion have not produced momentous conclusions. However, out of those deliberations has come a conviction that the future of nations -- their children -- was being discussed. The time is past when good intentions and promises will suffice. There is a consuming need for governments and the people who are those governments

to realize that commitments must be made which will insure a systematic, adequately funded, and accountable attack upon the problem which threatens each nation's future: malnutrition.

APPENDIX I

AMERICAN SCHOOL FOOD SERVICE ASSOCIATION BACKGROUND

The American School Food Service Association (ASFSA) is a nonprofit, professional organization of more than 49,000 members representing the school food service industry. Its membership includes school lunch directors and supervisors on the state and local levels, lunchroom managers, foodservice workers and other educators throughout the nation. The Association is dedicated to the health and well being of the nation's school children through advanced school food service practices and nutrition education.

Membership in the Association is open to persons engaged in nonprofit school food service or related activities in public, private and parochial schools, colleges and universities.

In October 1946, ASFSA was organized by a merger of the Food Service Directors' Conference and the National School Cafeteria Association. The first convention of the Association was held in 1947, when membership was 709 . Since then school food service has expanded and today, it is second in scope only to the U. S. Armed Forces feeding program.

Association business is managed and conducted by the Executive Board and the House of Delegates elected from among its members.

ASFSA 's headquarters office is located at 4101 East Iliff Avenue, Denver, Colorado, 80222. Dr. John N. Perryman is Executive Director of the Association. There are 14 full-time staff members, including Mrs. Jean Pitts, Deputy Director; Mr. Gordon Speckman, Marketing and Sales Director; Miss Louise A. K. Frolich, Field Coordinator; Mr. Jay Caton, Administrative Assistant; and Mrs. Patricia Bayer, Managing Editor, SCHOOL LUNCH JOURNAL.

APPENDIX II

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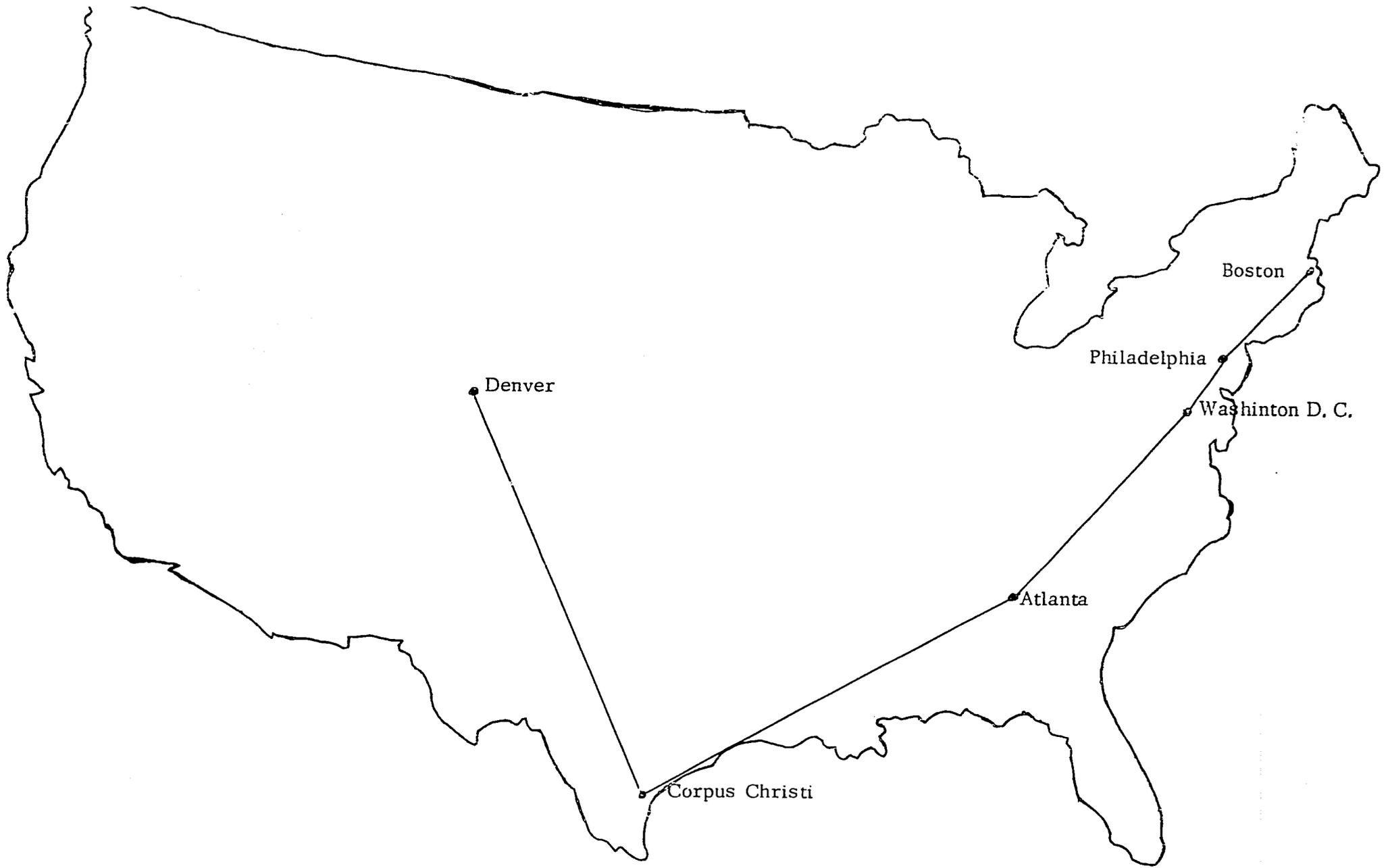
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APPENDIX III



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