

Conclusions and Recommendations of National Conference on Strategies for Early Child Nutrition for Improving Health Profile

International Life Sciences Institute- India (ILSI-India) organized a **National Conference on Early Child Nutrition for Improving Health Profile**, in association with The Micronutrient Initiative (MI), on May 23, 2003, in Hyderabad. More than 125 delegates participated.

The Conference was inaugurated by Dr. K. Shiv Prasad Rao, Minister of Health and Family Welfare, Government of Andhra Pradesh and the Keynote Address was presented by Dr. Lalit Nath, Consultant, WHO, Member, Core Group on Health, National Human, Rights Commission and former Director and Dean, All India Institute of Medical Sciences (AIIMS).

Papers were presented by 14 experts on the subject covering the nature, causes, spread of malnutrition in young children and the health problems they gave rise to. Strategies to mitigate these problems were also suggested.

Conclusions of the Conference

- Nearly one-third of the children born had less than 2.5 kg weight. About 40 per cent of the mortality in childhood was in this group. The basic cause of low-weight babies was quantitatively and qualitatively poor diet of pregnant women. The present intervention program, particularly in respect of iron supplementation, was not effective and the program had to be re-designed.
- Nutrition deficiencies in mother and child occur because of poverty, ignorance, faulty choice of foods with low bioavailability, food taboos, high population growth leading to neglect of children and so on. As a result, about one-third of the world's malnourished children are in India and only 20 per cent of the children really get adequate nutrition.
- What is called for is a life cycle approach in health and nutrition including iron supplementation starting with the girl child or at least girl adolescent
- Apart from iron, other common nutrient deficiencies are in respect of vitamin A, protein energy, iodine, calcium, B-complex vitamins, particularly folic acid and riboflavin, and zinc. Lately obesity among children has also been observed.
- The first two years after birth are critical and most nutrient deficiencies and health disorders occur during this period. Stunting, mental retardation, loss of appetite, susceptibility to diseases and behavioral changes are natural consequences. What is of concern, these disabilities can be long lasting and cause major health disorders, like diabetes, hypertension, cardio vascular diseases, in later life.

Conference Recommendations*:

Stress on Child Health and Nutrition security

- There has to be a shift in approach from child survival to child health and from national food security to household nutrition security

Breast Feeding and Breast Feeding Practices

- As recommended by World Health Assembly in 2001, it is necessary that the child be fed exclusively on mother's milk in the first six months.
- While breast-feeding is commonly practiced in India, breast-feeding practices need to be improved. Delayed initiation causes problem for the child and breast-feeding should start from the very first hour after birth. Equally important, colostrums should not be discarded but used for feeding. A massive program should be undertaken to educate mothers about feeding practices.

Complementary Foods

- From the sixth month onwards, complementary foods have to be added to the child's diet while continuing with the mother's milk for another 18 months. Complementary foods have a narrow age window but are crucial since growth is the fastest during that period and the demands on nutrition are at their peak.
- Complementary foods have therefore to be nutrient-rich to prevent energy, mineral and vitamin deficiencies. The regulatory system should ensure that complementary foods are fortified with all necessary nutrients mentioned earlier, to prevent deficiencies. Other alternatives are sprinklers, foodlets and spreads. Effective marketing by industry is essential.
- National goals should be set for commercial production and distribution of affordable complementary foods. These goals would be facilitated with attractive tax incentives. Fortified complementary foods should be distributed through PDS at subsidized prices along with other essential family foods like cereals, pulses, etc.
- Equally, it is important that culturally acceptable and locally available complementary foods which have high energy density and good protein quality and balanced minerals and vitamins, should be identified and popularized. Soya based and ragi based infant foods have shown good results. Fortification of domestically made complementary foods is also a possible alternative.

*As recommended by Conference participants

- To introduce effective complementary foods and make them acceptable to rural people a counseling system at the village level should be initiated involving related agencies. The training programs, field work and distribution of new balanced foods by ICDS and other government organizations have made considerable difference to the health status of women and children in villages. These efforts need to be supplemented by NGOs and private agencies. 'Nutrition entrepreneurs' introduced in some of the villages have had considerable success. Anganwadi workers can be trained on similar lines.
- Research should be undertaken to develop low cost high density complementary foods from raw materials locally available. Some of the research organizations have already made studies on this subject and have developed excellent formula foods. These foods need to be popularized.

Biofortification

- Biofortification is another possibility in the near future to deliver requisite nutrients to all population.

Center of Excellence for Child Nutrition

- A national institution should be identified as "center of excellence" for child nutrition. It should devise innovative strategies for promoting nutritious foods and improving feeding practices to ensure healthy childhood to all children.

Oversight Committee

- There has to be greater nutrition awareness and better coordination and cooperation among different agencies, including state governments, international agencies, NGOs, private sector, presently involved in health and nutrition issues, as also representatives of local community in order to achieve the maximum possible benefit from field work.
- To strategize for effective action, a permanent Oversight Committee should be set up at the center involving concerned ministries, research organizations, representatives of select NGOs and of complementary foods manufacturers.