

Micronutrient Initiative

NATIONAL PLAN OF ACTION FOR THE CONTROL OF MICRONUTRIENT MALNUTRITION IN PAKISTAN – A STRATEGY DOCUMENT OF THE MoH, GOVERNMENT OF PAKISTAN



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BACKGROUND

In Pakistan, progress in reducing child deaths, and maternal and child morbidity has been inadequate in achieving the relevant Millennium Development Goals. In response to the broader problems of malnutrition in Pakistan, the Executive Committee of the National Economic Council approved a National Nutrition Program (NNP) of around USD 5.05 million during 2001-02 resulting in the establishment of a Nutrition Wing (NW) in the Federal Ministry of Health. As a means to strengthen NNP, the government sought a National Nutrition Strategy (NNS) document to assure proper coherence and integration of its components as well as delineation between different government and non government partners. Micronutrient malnutrition is a major contributing factor with enormous development consequences (Figure 1). However important and preventable these deficiencies might be, they have been addressed only through isolated interventions without proper planning in Pakistan. Cognizant of this important link, the Ministry of Health (MoH), requested assistance to convene expert technical advisers, policy makers and program managers to give expression to the government's commitment to achieve the MDGs in the form of a comprehensive micronutrient deficiency reduction strategy for Pakistan.

AIM

To devise an action plan to address the country's micronutrient malnutrition problems systematically and efficiently.

FRAMEWORK

Through an interactive and consensus-based effort, a team of experienced consultants to the MoH developed a National Plan of Action (NPA) for the Control of Micronutrient Malnutrition in Pakistan. As one important step in NNS formulation, in May 2003, the NW requested the participation of the Micronutrient Initiative in drafting the Micronutrients' malnutrition component of the NNS. Intensive work on the NPA was carried out in late 2003 and early 2004. The NPA emerged from interdepartmental discussions and a widely attended national workshop which dealt with micronutrient issues in the context of national needs. A desk review of all national health and nutrition surveys from 1995 to 2001 was conducted. Recent economic surveys in Pakistan, Medline and Extra Med databases, bibliographies of national publications, dissertations compiled by the College of Physicians and Surgeons, and all available reports on maternal and child health and malnutrition in Pakistan were reviewed (Figures 2, 3 and 4).

OUTCOME

The whole consultative and analytic process took around two years. The MoH approved and prioritized a comprehensive, streamlined, and practical three year NPA designed to address the country's micronutrient malnutrition problems. The NPA aims at reducing IDA by 33% among women and young children, sustain (93%) and increase coverage of VAS for children under 5, 100% availability of iodized salt and elimination of severe iodine deficiency by 2008. The NPA in Part I and II, presents succinct statements of existing and proposed means of addressing

micronutrient malnutrition in Pakistan through supplementation and food fortification. Part III highlights the Behavioral Change Communication strategies emphasizing dietary modification in general and as related to fortified foods and supplements. Part IV presents proposed research and pilot studies to help fill information gaps and explore opportunities. Part V presents a monitoring and evaluation framework. All these sections are designed to correspond as closely as possible with the governments current programming. Annexed to the NPA is a practical three year action plan designed to address the country's micronutrient malnutrition problems systematically and efficiently. Work is currently underway on the implementation of various supplementation and fortification strategies outlined in the NPA.

IMPLICATIONS

The NPA process and the resulting document are useful tools for managers and policy makers to guide the design of coherent and sustainable programs for the control of micronutrient malnutrition in Pakistan and potentially in other developing countries. It is a milestone and first of its kind document in Pakistan.

ACKNOWLEDGEMENTS

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NUTRITION AND THE LIFE COURSE

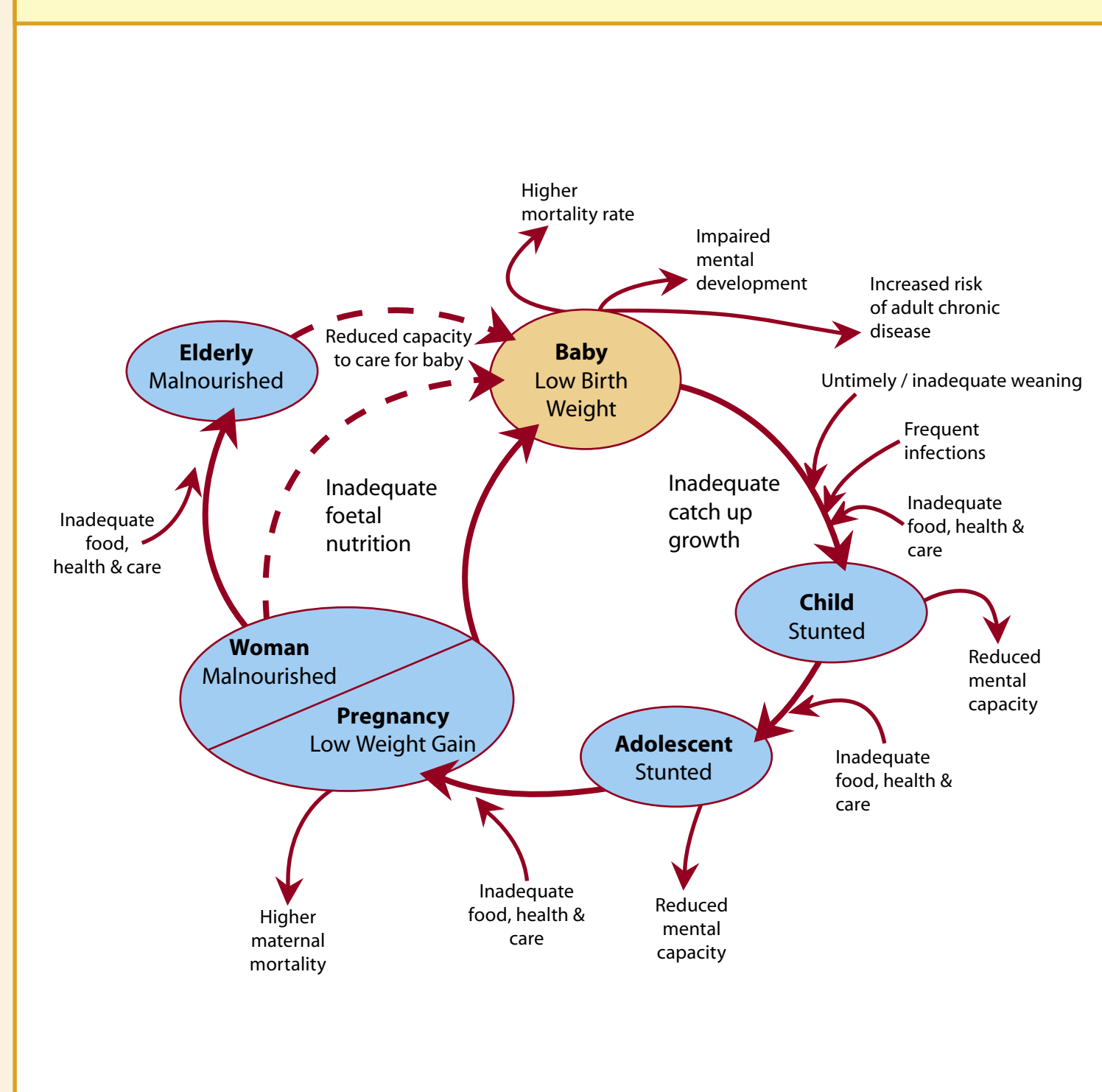


Fig. 1

TIME TRENDS IN PREVALENCE OF MALNUTRITION AMONG CHILDREN UNDER 5 IN PAKISTAN

Malnutrition	1965	1976-77	1985-87	1990-94	2001-02
Measure	NSWP	MNS	NNS	NHS	NNS
Underweight	?	53.3	47.9	40.1	37.4
Stunted	49.0	43.3	41.8	36.3	40.0
Wasted	11.0	8.6	10.8	11.8	14.9

NSWP= National Survey of West Pakistan; MNS= Micronutrient Survey; NNS= National Health Survey of Pakistan; NHS= National Nutrition Survey

Fig. 2

SUMMARY OF MICRONUTRIENT DEFICIENCY PREVALENCE RATES FROM NUTRITIONAL SURVEYS (%)

Survey	Sample	Area	Total N	Vitamin A Deficiency	Iodine Deficiency Anaemia	Iron Deficiency Iron	Iron Deficiency	Anaemia	Zinc Deficiency
MNS 1976-77	Children 0-5 years	Pakistan	?	12.6	?	?	?	?	?
MNS NWFP 2000-01	Children 0-5 years	NWFP	2,836	32	?	42	69	50	54
NNS 2001-02	Children 0-5 years	Pakistan	10,034	12.5	22.9*	35.6	66.5	50.9	37
	Mothers 15-49 years of age	Pakistan	?	5.9	36.5	25.5	45	29.4	41

?= Unknown; Vitamin A deficiency less than 7 µmol/l; Urinary iodine excretion severe and less than 20 mcg/l; Iron deficiency Serum Ferritin less than 12 ng/ml; Zinc deficiency less than 60 µg/dl; BMI less than 18.5

Fig. 3

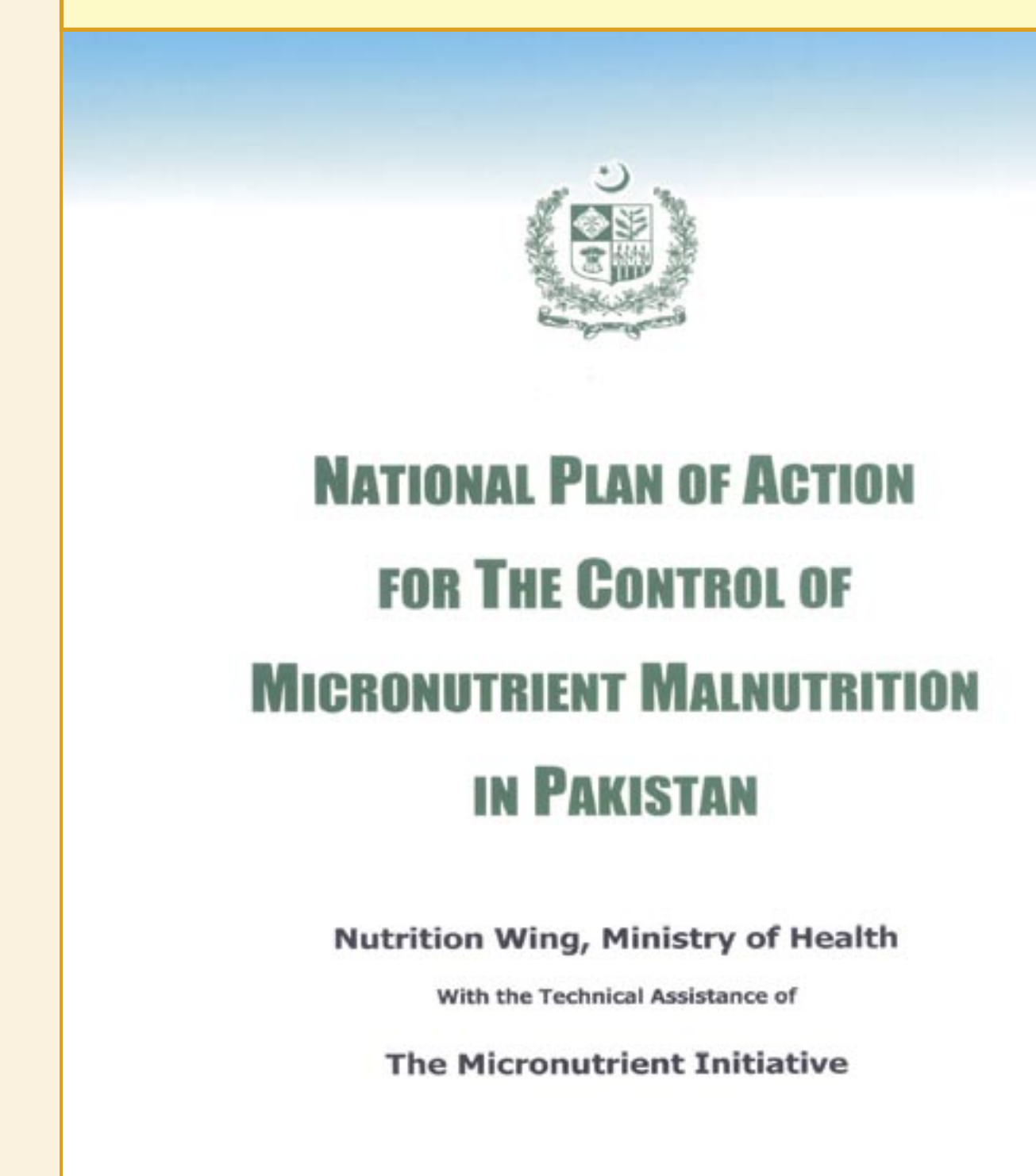
FOOD AVAILABILITY PER CAPITA

Items	Unit	49-50	79-80	89-90	95-96	97-98	98-99	99-2000	2000-2001 (E)	2001-02 (T)
Cereals	Kg	139.3	147.1	164.7	156.9	159.7	171.0	163.5	164.9	149.3
Pulses	Kg	13.9	6.3	5.4	6.2	5.9	6.8	7.2	7.0	6.1
Sugar	Kg	17.1	28.7	27.0	26.4	32.8	31.2	26.4	30.8	26.1
Milk	Ltr	107.0	94.8	107.6	121.1	147.3	148.0	148.8	149.6	150.8
Meat	Kg	9.8	13.7	17.3	21.4	17.9	18.2	18.7	18.8	18.9
Eggs	Doz	0.2	1.2	2.1	2.2	2.2	5.1	25.1	5.2	5.2
Edible Oil	Ltr	2.3	6.3	10.3	11.4	11.6	12.3	11.1	11.2	11.3

Caloric & Protein Availability (Per Capita)										
Calories per day (Number)	2078	2301	2534	2522	2655	2728	2625	2706	2306	
Protein per day (Gms)	62.8	61.5	65.47	67.38	68.37	71.85	70.00	71.74	67.00	

Fig. 4

REPORT ON THE NATIONAL PLAN OF ACTION FOR THE CONTROL OF MICRONUTRIENT MALNUTRITION IN PAKISTAN



PRESS COVERAGE OF THE OFFICIAL LAUNCH OF THE NPA

