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UNITED NATIONS DEVELOPMENT PROGRAMME

SOUTH PACIFIC COMMISSION

PROJECT REPORT

on

Regional Study on the Nutritional Effect
of Western Diets on the Pacific Population

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UNITED NATIONS DEVELOPMENT PROGRAMME

SOUTH PACIFIC COMMISSION

PROJECT REPORT

Project title: Regional Study on the Nutritional Effect
of Western Diets on the Pacific
Population

Project number: RAS/79/026/A/01/31

Dates of project: 30 July 1980 to 31 December 1981

Implementing agency: South Pacific Commission,
P.O. Box D5,
NOUMEA CEDEX,
New Caledonia.

Project coordinator: Dr Peter Bennett, Epidemiologist
(30 July 1980 to 15 August 1981)

South Pacific Commission
Noumea, New Caledonia
January 1982

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I. DEVELOPMENT OBJECTIVE

THE PURPOSE OF THE PROJECT IS TO BRING ABOUT IMPROVED FOOD UTILISATION PRACTICES, AND CONSEQUENTLY BETTER NUTRITION, BY HELPING COMMUNITIES TO BE AWARE OF THE CHANGES TAKING PLACE AND THEIR CONSEQUENCES, AND THEN TO PROVIDE THEM WITH THE KNOWLEDGE NEEDED TO SEEK SOLUTIONS FOR THEMSELVES.

A. Completed activities

Although the project was of relatively short duration, considerable interest, concern and awareness has been generated regarding present and potential nutritional health problems in Pacific Island countries. A number of activities were undertaken to meet this objective:

1. National workshops

Pacific Island countries were invited to sponsor national workshops (Savings Appendix A). Five countries requested such workshops:

Cook Islands
Federated States of Micronesia
Solomon Islands
Tokelau
Vanuatu.

Due to time and funding constraints, three national workshops were held:

(a) Federated States of Micronesia

October 5-9, 1981
Truk State, Eastern Caroline Islands
Complete report - Appendix B
Number of participants: 31.

(b) Solomon Islands

October 22-28, 1981
Honiara
Complete report - Appendix C
Number of participants: 18.

(c) Republic of Vanuatu

November 2-6, 1981
Port Vila
Complete report - Appendix D
Number of participants: 17.

Press releases and radio programmes concerning these workshops created additional community awareness of this topic.

2. Regional Meeting

"The Effects of Urbanisation and Western Diets on the Health of Pacific Island Populations"

November 7-16, 1981

Suva, Fiji

Savingram - Appendix E

Draft report - Appendix F

Number of participants: 14

Number of observers: 26

3. Interim report

A discussion paper entitled "The Effects of Urbanisation and Western Diets of the Health of Pacific Island Populations" has been prepared (Appendix G). The discussion paper summarises the medical data on this subject, draws conclusions from the data, and suggests possible solutions, proposals and recommendations for the formulation of food and nutrition policies for future strategies.

The discussion paper has been circulated to approximately 120 individuals in Pacific Island Governments and others involved in health and/or agriculture in the Pacific. Copies have been sent to the following for comments and suggestions:

- All Ministers of Health of Pacific Island countries,
- All Ministers of Agriculture of Pacific Island countries,
- Individuals working in nutrition-related fields in the Pacific,
- Consultants who have or are working in nutrition-related areas in the Pacific,
- All participants, observers and consultants attending the Regional Meeting in Fiji on this topic.

B. Intended activities

Additional reports will be circulated via the South Pacific Commission's general mailing to governments, agencies and organisations involved in the Pacific as well as to those individuals, agencies, and organisations, specifically working in areas related to agriculture, health and nutrition. The following reports are in preparation and will be distributed:

1. Report of the Regional Meeting: "The Effects of Urbanisation and Western Diets on the Health of Pacific Island Populations". This report summarises discussions of the meeting and includes recommendations for the formulation of food and nutrition policies (Draft Report - Appendix F).
2. A monograph of papers presented at the Regional Meeting.

3. A monograph of the revised interim report.
Revisions of the interim report will be based on comments and suggestions solicited from governments, individuals and agencies.

C. Limitations

Many Pacific Island countries have shown considerable commitment to finding ways of dealing with the health problems associated with increased urbanisation and reliance on imported foods. Those countries which have initiated national workshops, have participated in the Regional Meeting, or have already established food and nutrition policies, are:

Cook Islands
Federated States of Micronesia
Fiji
French Polynesia
New Caledonia
Papua New Guinea
Tokelau
Solomon Islands
Vanuatu
Wallis and Futuna
Western Samoa.

For most of these countries the national workshops and Regional Meeting are only a beginning to the discussions and development of their national food and nutrition policies. All of these countries, with the exception of Fiji and Papua New Guinea, will need continued assistance and consultation to enable them to formulate long-term nutrition policies.

Other Pacific Island countries, which have not participated in the workshops and Regional Meeting, may need to be approached to determine their commitment to dealing with their emerging health and nutrition problems. Those countries which appear to have the highest rates of chronic diseases and greatest reliance on imported foods, but have not participated in these discussions, include:

American Samoa
Nauru
Kiribati
Tuvalu
Guam
Northern Marianas
Marshall Islands.

Other countries which may not have significant health problems and/or reliance on imported foods include:

Niue
Tonga
Palau.

There is a need to continue the educational, promotional and training activities begun by this project in relation to way of life, in the following ways:

1. Continue education, promotion and consultant services for those countries which have begun discussions on food and nutrition policies.
2. Continue education, promotion and consultant services for those countries which have NOT initiated national planning with regard to nutritional needs.
3. Continue gathering and dissemination of information related to nutritional status and nutrition planning for individual countries, as needed or requested.

II. INTERMEDIATE OBJECTIVES

- A. TO COMPILE AND IDENTIFY POSSIBLE GAPS IN THE EXISTING KNOWLEDGE OF NUTRITIONAL AND DIETARY PROBLEMS IN THE PACIFIC ISLANDS

A comprehensive report (Interim Report - Appendix G) has been prepared which reviews much of the accessible data and comments on the following subjects:

1. Historical trends in dietary patterns,
2. Present-day (or recent) dietary patterns,
3. Food imports for some countries, both qualitative and quantitative,
4. Present-day nutrition-related health problems,
5. Gaps in present-day knowledge of nutritional status,
6. Information which is necessary to complete the profile of nutritional and dietary status (Appendix G, pages 171-173).

This interim report has been circulated to government officials, agencies, individuals and consultants who are involved in health and/or nutrition in the Pacific. Their comments and suggestions will be the basis for revisions for a final report.

Additional information on nutritional dietary status was provided by countries and consultants attending the Regional Meeting and will also be included in a detailed report of papers presented at the Regional Meeting.

Limitations

The report has not fully collected and analysed data on food imports to and exports by various countries, food production (particularly subsistence agriculture) and sociological and anthropological factors. Additional information in these areas is needed.

B. TO CO-ORDINATE RESEARCH ACTIVITIES TO FILL IN THE GAPS

Co-ordination of research activities will be a long-term process and will require the services of a nutritionist based at the South Pacific Commission. Research needs have recently been identified by countries at national workshops and at the Regional Meeting and are included in the recommendations of those meetings. Discussions have begun with countries and consultants to plan future research projects. Possible research activities include:

1. Investigation of rates of hypertension in Federated States of Micronesia, with particular attention to traditional-living groups who use salting as a method of preserving fish.
2. Evaluation of a beef salting project in Vanuatu on the improvement of nutritional status of children and the effect on blood pressure of adults.
3. Gathering and compiling of food composition data on Pacific foods through a working group of nutritionists in the Pacific presently using food composition data. The working group will also make recommendations for further requirements for food composition analysis.

C. TO CREATE MORE AWARENESS IN THE PACIFIC ISLANDS OF THEIR GROWING NUTRITIONAL PROBLEMS

Increased awareness in Pacific Island countries of existing and potential nutritional problems related to urbanisation and western diets has been achieved through:

1. National workshops
2. Regional meeting
3. Interim report.

1. National workshops

Three national workshops were organised to provide discussions among government and non-government organisations concerning the present nutritional status and to increase awareness of potential problems related to nutritional health. The workshops also highlighted the needs in individual countries for the development of food and nutrition policies. (See Appendices B, C and D for full reports.)

(a) Federated States of Micronesia

October 5-9, 1981
31 participants

After having gathered data, reviewed and discussed the major nutritional problems in FSM, the workshop participants recommended that: "A system of Nutrition Policy Co-ordinating Councils be established to recommend nutrition policy and integrate community nutrition programmes". (See Attachment 1.)

A letter was sent to the Presidents of the Federated States of Micronesia, Palau and Marshall Islands and to the governor of each of the states of the Federated States of Micronesia - Yap, Truk, Kosrae and Ponape - urging them to implement this recommendation. (See Attachment 2.) The President of the Federated States of Micronesia has supported the recommendation and has submitted it to the Department of Social Services for further study and comments.

(b) Solomon Islands

October 22-28, 1981
18 participants

The workshop participants recommended that: "A Food and Nutrition Organising Committee be established in the Ministry of Health and Medical Services... This Committee should consider and refine other recommendations made". (See Attachment 3.)

The Ministry of Health has begun organising the Committee and planning a national food and nutrition policy. They have also received consultation from Dr Alvarez, WHO, Papua New Guinea, and Ms Gloria Renda, Foundation for the Peoples of the South Pacific.

(c) Republic of Vanuatu

November 2-6, 1981
17 participants

The ni-Vanuatu participants of the workshop concluded that: "A nutrition co-ordinator and planner be recruited immediately since this is urgently needed",

and further recommended that:

"A National Food and Nutrition Committee be established and consist of representatives of the Ministries of Health, Agriculture, Finance, Social Affairs, as well as chiefs, directors of local governments, National Council of Women, Churches and other appropriate organisations". (See Attachment 4.)

The Ministry of Health is currently recruiting a nutrition planner through overseas volunteer organisations.

2. Regional Meeting

A Regional Meeting on "The Effects of Urbanisation and Western Diets on the Health of Pacific Island Populations" was held in Suva, Fiji, December 7 to 16, 1981. A total of 14 participants, 26 observers and 9 consultants reviewed and discussed the complexity of the issues involved in solving the problems associated with increased urbanisation and imported foods in Pacific Island countries.

The meeting participants unanimously agreed that high priority should be given in each country to "the establishment of national food and nutrition committees/councils to formulate national food and nutrition policies".

The meeting participants also made recommendations concerning food production, training needs, nutrition education and data collection and research needs. (See Attachment 5.)

3. Interim Report

A draft report entitled "The Effects of Urbanisation and Western Diets on the Health of Pacific Island Populations" has been prepared. The report reviews and summarises medical data, showing an increase in nutritional health problems as reliance on imported food increases.

The report has been circulated to approximately 120 individuals involved in nutrition-related work in the Pacific. Comments and suggestions from these individuals will form the basis for revisions for the final document.

D. TO ASSIST GOVERNMENTS AND ADMINISTRATIONS IN THE REGION TO FORMULATE FOOD AND NUTRITION POLICIES

The national workshops and Regional Meeting provided information and discussions related to the formulation, development and implementation of national food and nutrition policies. In all of the workshops and the Regional Meeting, the first and major recommendation dealt with the establishment of National Food and Nutrition Committees or Councils to formulate national food and nutrition policies.

At the national workshops and the Regional Meeting, consultants with first-hand experience in the development of national food and nutrition policies discussed with the participants the mechanisms necessary for the planning and implementation of food and nutrition policies. The consultants offered consistent, practical and realistic advice, such as the need for a nutrition planner, the establishment of a Food and Nutrition Committee, the organisation of such a committee, mechanisms for formulating legislation, and the need for broad-based community involvement.

Limitations

While the national workshops and the Regional Meeting provided much helpful assistance to government participants regarding the formulation of food and nutrition policies, further assistance will be required.

The ideal solution would be for each country to employ its own nutrition planner. Some countries already have nutrition planners, e.g. Papua New Guinea and Fiji. Countries such as Vanuatu are seeking ways to recruit a nutritionist through voluntary organisations.

Other countries have local nutritionists who, with additional training, consultation and support from a nutrition planner, would be instrumental in the formulation of national food and nutrition policies. Western Samoa would be an example of this situation.

Most countries in the Pacific, however, do not have nutrition personnel and would require continuing consultation from a nutrition planner to assist them in formulating national policies.

E. TO IDENTIFY TRAINING NEEDS AND ASSIST WITH THE ORGANISATION OF EDUCATIONAL PROGRAMMES AT THE REGIONAL OR NATIONAL LEVELS

In each of the national workshops, training needs were identified for the individual country. Each country indicated a need to have more information regarding existing training personnel in the field of nutrition. All of the workshops recommended training in nutrition for health personnel, agriculture workers and teachers.

At the Regional Meeting in Fiji, specific recommendations dealt with the lack of trained nutrition personnel and the need to establish a regional training centre. Those recommendations included:

"That a regional training programme in nutrition and health education should be established in conjunction with the Fiji School of Medicine and/or the University of the South Pacific which would accept students from all Pacific Island countries. Such training should include local training in the country as well as formal training in Suva".

It would be appropriate for the SPC to assist with the organisation and planning of this regional nutrition programme. This would depend upon the services of a nutrition planner being available at the South Pacific Commission.

III. FUTURE STRATEGIES

The project has been effective in creating among many Pacific Island governments and organisations an increased awareness of and concern about the need to determine the level of nutritional health status in their countries, to investigate the relationship between dietary patterns and nutritional disorders, and to look at food production and food import policies in relation to health. A number of countries are already committed to taking steps to deal with these issues through the formulation of national food and nutrition policies.

The activities undertaken by the project in 1981, however, are only a beginning to long-term planning of food and nutrition policies in the Pacific. While many of the objectives of the project have been met, others have only been partially met.

The project, through the national workshops and the Regional Meeting, has identified additional and continuing needs in the Pacific region. These include the following:

1. To continue educational and promotional activities to increase awareness by governments of present and potential nutrition problems and the need for the development of food and nutrition policies. This is particularly important for governments who have not participated in the national workshops or the Regional Meeting.
2. To provide continued consultation and support for those countries embarking on national nutrition policy planning.
3. To disseminate additional information on nutritional status in individual countries and information on national nutrition planning.
4. To formulate plans and co-ordinate research activities as identified at national workshops and regional meetings, from requests by governments and advice of consultants.
5. To continue data collection and interpretation, particularly in the areas of:
 - (a) food imports and exports,
 - (b) food production, particularly subsistence agriculture,
 - (c) sociological and anthropological factors related to urbanisation and the effect on nutritional status.

In order to meet the above objectives and to carry out many of the recommendations of the Regional Meeting, it is necessary to employ a nutritionist at a regional level.

The Regional Meeting held in Fiji recommended:

"That the South Pacific Commission should employ a regional adviser in nutrition to assist countries in nutrition policy planning, to co-ordinate nutrition activities in the region, monitor nutrition training at the Community Education Training Centre and monitor the implementation of the recommendations of this meeting".

This meeting further recommended:

"That the South Pacific Commission should provide advice and assistance in planning and implementing national food and nutrition policies which aim to increase self-sufficiency of individual countries in the region. This should include advice on such areas as nutritional requirements, food technology, food marketing and agriculture strategies. SPC should also provide advice and assistance to individual countries with other problems relating to nutrition, upon request".

This recommendation concurs with that of the Seminar of South Pacific Women held in Tahiti in July 1981, which recommended:

"That the South Pacific Commission appoint a nutritionist to assist countries of the region to achieve better health for women and children in general and to advise on the development of national food and nutrition policies..."

It is therefore recommended that the UNDP provide funds to the South Pacific Commission to employ a nutrition planner to provide continuing training, consultation and support to those countries embarking on nutrition policy planning. A nutrition planner is also required to continue to increase awareness in many countries of the need for long-term food and nutrition planning.

Attachment 1

Recommendations

Workshop, Federated States of Micronesia
October 5-9, 1981

Having reviewed and discussed many of the health problems associated with nutrition in the various states, the workshop participants expressed concern about the high rates of infant and child morbidity and mortality, particularly from diarrheal disease, and the increasing rates of hypertension, stroke, diabetes, alcoholism and cancer. Of great concern was the potential for the diseases to become even more of a problem as a result of increased population, insufficient land, movement of outer island people to district centres, increased reliance on imported foods and the lack of reasonably priced, locally grown traditional foods.

In concurrence with and in support of the Sixth State National Leadership Conference of the Federated States of Micronesia in September 1981 which endorsed that Nutrition Programmes be established, and in support of the recommendation of the South Pacific Commission's Seminar of South Pacific Women held in Tahiti in July 1981 which "directed activities to improve women's health and nutrition in the region",

The workshop recommended that:

1. A system of Nutrition Policy Coordinating Councils be established in states and countries in Micronesia to recommend nutrition policy and integrate community nutrition programmes. The Councils shall be made up of representatives from island groups, community organisations, public agencies and the private sector. Representatives of State Councils of FSM should meet annually to recommend National Food and Nutrition Policies.
2. Emphasis be given to the development of primary health care systems which integrate available community services and include nutrition as a major component.
3. The states of Truk, Kosrae and Ponape establish a Programme for the Control and Prevention of Diarrhoea among infants and young children. Other states (not represented) may also choose to establish programmes.
4. Nutrition surveys and medical and social science research be undertaken in order to identify nutritional and dietary problems and develop culturally appropriate nutrition and health messages.
5. Dietary guidelines and other nutrition education materials suitable for Micronesia be developed and widely disseminated, and that nutrition education be provided with special emphasis for school children, parents, migrants to district centres, health personnel, cooks, and others as appropriate.
6. Trained nutritionists be hired for each state and country in Micronesia and the school food service and nutrition staffs be expanded.

7. Priority be given to training in the area of nutrition; that available nutrition training facilities in the Pacific be investigated and information regarding such training programmes be distributed throughout the states and countries.
8. Future workshops be held on this topic in the states, and countries continue to discuss and follow up on recommendations made at this meeting. Request SPC/UNDP to sponsor one follow-up workshop in Micronesia in 1982.

Action plans and further recommendations:

1. Nutrition Policy Co-ordinating Councils

- A letter from the workshop participants was sent to the Governor of the four States of FSM and the Presidents of Marshall Islands and Belau requesting that Nutrition Policy Co-ordinating Councils be established in their state and/or country. (See sample letter, Attachment 2.)

- Meeting participants recommended individuals from each state/country to follow up on this recommendation and letters to the Governors and Presidents:

Truk State - Senior Director of Health Services

Ponape State - NET Co-ordinator, Ponape

Yap State - Co-ordinator, Aging Programme

Kosrae State - Public Health Supervisor, Kosrae

Belau - NET Co-ordinator, Belau

Marshall Islands - NET Co-ordinator, Majuro

Federated States of Micronesia - Director of Social Services.

- Recommendations of the National Policy Co-ordinating Councils should be made available to the public in the local vernacular.

- A comprehensive guide to community services should also be made available in the local vernacular.

- Nutrition Policy Co-ordinating Councils would organise and co-ordinate community workshops and discussions on this topic.

2. Primary health care

- Establish village and community level programmes to provide screening, treatment and prevention of such nutrition-related disorders as diabetes mellitus, hypertension, alcoholism and diarrhoea.

- Develop positive preventive programmes rather than problem-solving-only programmes.

- Include nutrition as part of primary health care and totally integrate community services.



Federated States of Micronesia

KOLONIA, PONAPE, EASTERN CAROLINE ISLANDS
TELEPHONE: 228 CABLE: FSM GOVT.

Office of the President

November 20, 1981

Honorable Daro Malon
Chairman
UNDP/SPC Workshop, Truk
Truk State Hospital
Moen, Truk 96942

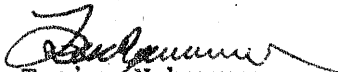
Dear Mr. Malon:

This is to acknowledge receipt of the UNDP/SPC/FSM joint workshop recommendation dated October 9, 1981 in relation to establishment of a State-National Nutrition Policy Coordinating Council in Micronesia.

This recommendation has been submitted to the Department of Social Services for further study and comments. My immediate comment at the present is that I am in full support of the concept of this recommendation. For that I like to thank you and all the workshop participants and the consultants for your continuing concerns for the people of the Federated States of Micronesia.

Thank you.

Sincerely,


Tosiwo Nakayama
President, FSM

TN:KA/rr

Attachment 3

Recommendations

Workshop, Solomon Islands
October 22-28, 1981

A Food and Nutrition Organising Committee be established in the Ministry of Health and Medical Services, with the assistance of other appropriate Ministries. The Committee should consider and refine the following recommendations:

1. A Solomon Islands' representative should attend the South Pacific Commission Regional Meeting on the Effects of Urbanisation, in Suva, in December, 1981.
2. The present nutritional status of Solomon Islands' people should be determined by:
 - (a) Reviewing and defining existing data (baseline data on nutrition).
 - (b) Using existing surveys (by Dr. Roberts and Dr. Eritara) which should be supported and continued, and be done at minimum cost.
 - (c) Asking the Statistics Department to look into adult health in a similar manner to recent surveys of child nutrition.
3. Restrict the promotion and sales of infant milk, baby bottles, and baby foods.
4. A Health and Nutrition Education Policy be developed to include advice on nutrition education for schools, health personnel, teachers, consumers, and the private sector. Mass media, radio and all available resources and personnel should be used to achieve this.
5. Discussion with rural landowners, Ministry of Agriculture, the Cattle Development Authority, and presidents of provinces, on appropriate food production practices, particularly regarding the preservation of gardens near villages.
6. A National Policy should encourage the production of traditional foods.
7. The training of Nutritionists/Dietitians be initiated in numbers according to needs.
8. Maternity leave of three months be provided to women at full pay. Existing maternity leave benefits be publicised, for example, 1/2 hour break in morning and afternoon for breast feeding mothers.
9. Restriction of specific imported foods to be considered, such as confectioneries, soft drinks and fruits.
10. Technical and consultant services - WHO, FSP, SPC, UNDP, etc. - should be available when needed, especially 1982-1985.

11. Measures be devised to limit the abuse of alcohol.

The workshop participants further concluded that if population growth continued at the present rate, any attempts to improve nutritional health in Solomon Islands would be wasted.

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Recommendations

Workshop, Republic of Vanuatu
November 2-6, 1981

We, the delegates of the in-country workshop, have spent five days looking at various aspects of the problem. We have studied the statistics of food imports against the trends and patterns of infant malnutrition, chronic degenerative diseases and dental health. We have also looked into the patterns of food buying and availability of local foodstuffs in markets, and are concerned that more people are buying imported foods which are nutritionally inferior to traditional food.

We further believe that these discernable trends are going to become worse unless immediate action is taken to try to counter them. We believe that the best way to do this is to have a person working full-time to maintain co-ordination and follow-up, working with a local committee, to integrate government departments to work together to contribute to and promote nutrition and health education.

We therefore specifically recommend that:

A NUTRITION CO-ORDINATOR AND PLANNER BE RECRUITED IMMEDIATELY, SINCE THIS IS URGENTLY NEEDED.

A NATIONAL FOOD AND NUTRITION COMMITTEE BE ESTABLISHED AND CONSIST OF REPRESENTATIVES OF THE MINISTRIES OF HEALTH, AGRICULTURE, FINANCE, SOCIAL AFFAIRS, AS WELL AS CHIEFS, DIRECTORS OF LOCAL GOVERNMENTS, NATIONAL COUNCIL OF WOMEN, CHURCHES, AND OTHER APPROPRIATE ORGANISATIONS.

THE NUTRITION PLANNER BE ATTACHED TO THE CENTRAL PLANNING OFFICE AND CO-ORDINATE THE ESTABLISHMENT OF THE NATIONAL FOOD AND NUTRITION COMMITTEE AND BE ADVISED BY IT.

That the National Food and Nutrition Committee further investigate and consider the following specific recommendations:

1. NUTRITION EDUCATION

(a) That nutrition education be integrated into the subjects of Agriculture, Health and Home Economics in schools;

(b) The Government should put more emphasis on promoting Nutrition in Health Education;

(c) Provide education about nutrition to the community using individuals as needed from Agriculture and Medical Departments, where applicable;

(d) Utilise existing training centres to do further community work;

(e) Radio programmes and health talks to be simple and clear so they can be understood by all (avoid technical terms);

(f) Mass media-radio programmes to use only those who have expertise in the field.

2. RURAL DEVELOPMENT

(a) The Government should put more emphasis on rural development with a clear policy on it, and follow through on policies made;

(b) More emphasis to be put on training more extension officers, and placing them in more extension positions;

(c) The central government should encourage local government to try to meet rural peoples' needs by education, youth centres, and other appropriate needs.

3. STAFF TRAINING

(a) Train more public health nurses to carry out teaching programmes in nutrition and disease prevention, particularly with infants and young children. Also provide nutrition training for doctors, home economists, agricultural extension workers and others.

4. INFORMATION AND PLANNING

(a) Study the nutritional status of communities and develop nutrition programmes with traditional foods.

5. BREAST IS BEST

(a) The Government should control the sale of bottles, teats and dummies unless the mother is under the advice of a health worker;

(b) Places should be provided at place of work for breast feeding mothers to care for their babies;

(c) Maternity leave for all working mothers to be extended to a period of four months.

6. IMPORT DUTIES AND PRICE CONTROLS

(a) The Government should consider its present position on food import duties and price controls to ones that would encourage local food production and decrease the consumption of imported foods.

(b) That consideration be given to the availability of land in urban areas for family gardens, especially for low-income families.

Recommendations

Regional Meeting, Fiji
December 7-16, 1981

Preamble

The participants at this meeting recommend that the development of food and nutrition policies receive high priority by the countries in the region. Other recommendations were also made, but it was recognised that the relative priority given to these recommendations by individual countries will depend on local conditions.

Food and nutrition policies

1. That each country establish a national food and nutrition committee/council or other appropriate body to formulate a national food and nutrition policy.

- (a) This body should consist of personnel at political decision-making level and/or of very senior government officials. The body should also include traditional and other community representation.
- (b) The body should devise policies to suit the particular needs of the country.
- (c) The body should focus on health promotion and preventive measures against malnutrition and nutrition-related chronic diseases.
- (d) The body should initiate policies to co-ordinate the use of available resources and personnel (government and non-government) already working in the field of nutrition.
- (e) This body should liaise with government on all matters related to legislation concerning food and nutrition.
- (f) In view of the fact that some imported foods are of poor nutritional value, we recommend that this body should monitor the quality and nutritional value of imported foods.
- (g) That policies should be developed to promote the sale of nutritious foods within school premises and to discourage the sale of food items of poor nutritive value.

2. Government should consider measures to promote breast feeding by all available means, such as:

- (a) Adopt the WHO Code of Marketing of breast milk substitutes.

- (b) Facilitate continued lactation of working mothers by providing appropriate maternity benefits, such as flexible working hours for at least six months after birth, paid maternity leave, and the establishment of infant care facilities close to the working place of mothers in urban areas.
 - (c) Control importation of infant formula and weaning food.
 - (d) Control sale of bottles and teats by prescription.
3. That Government should consider the health, nutrition, cultural, social and agricultural implications in addition to economic factors when approving development projects, food import policies, foreign aid programmes and food aid programmes.
4. Each country should take steps to formulate and enact food standards and hygiene legislation taking, where appropriate, guidance from other countries (such as U.S., Australia, New Zealand and France) and the Codex Alimentarius. Consideration should be given to such topics as prohibiting the importation of foods which do not meet the food standards of the country of origin, the possibility of introducing information on the expiration date and composition of packaged foods, and the requirements for proper storage, transportation and handling of imported and locally produced foodstuffs.

Health and nutrition education

1. That efforts be made to increase awareness in the community of the importance of nutrition in relation to maternal and child health, and adult conditions such as obesity, hypertension, cardiovascular disease and alcoholism.

There is a need for increased health and nutrition education by:

- (i) Incorporating nutrition education in school curriculum at all levels,
 - (ii) Reviewing, improving and increasing use of mass media, audio and visual material for nutrition education purposes,
 - (iii) Direct community/consumer nutrition education, utilising available resources and trained personnel already working in the field of nutrition.
2. That nutrition education be included in training courses for doctors, nurses, agricultural extension workers, teachers, and other community workers.
3. That new recipes be developed which feature local foods and use modern cooking methods. "La Nouvelle Cuisine Océanienne" would be the result.

Training

1. That a regional training programme in nutrition and health education should be established, in conjunction with the Fiji School of Medicine and/or the University of the South Pacific, which would accept students from all Pacific Island countries. Such training should include local training in the home country, as well as formal training in Suva.
2. That government use available regional training courses on nutrition for the continuing education of personnel, and make effective use of these trained personnel.

Data collection

1. That a start be made by countries (with assistance from international, regional and academic institutions) to collect data on nutritional status, with particular emphasis on mothers and children, the incidence of degenerative diseases, and the food and trade balance, for the purpose of formulating a national nutrition policy.

Food production, processing and distribution

1. Owing to the detrimental decline in food crop production which often occurs in association with increase in non-food cash crops, the production of food crops at the national and family level should be stressed in order to break this vicious circle.
2. That a significant number of agricultural, health and nutrition extension workers be allocated to the technological improvement and encouragement of local, commercial, and home food production.
3. Policies should be developed with regard to the promotion, production, processing, preservation, transportation and marketing of local foods. For example, this would include dehydration of root crops.
4. That consideration be given to conservation of the ecological system. This would include:
 - (a) the recognition that, in most cases, traditional methods of agriculture conserve soil fertility and are sustainable in the long term,
 - (b) the controlled use of pesticides, herbicides and fertilisers,
 - (c) the production of cooking fuel and the development of alternative sources of energy for cooking foods, e.g. solar,
 - (d) the practices of blasting and poisoning for killing of fish be prohibited and that these measures be effectively policed.

5. That governments actively encourage both large-scale (possibly nationalised) food production for local consumption and/or increased production of local foods for commercial purposes by small holders.
6. That governments actively encourage the expansion of subsistence home food gardening, in both urban and rural areas, as one of the most direct avenues to greater self-sufficiency and improved nutrition. Cultivation of available land by youth and community committed and institutions such as schools should also be encouraged.
7. That nurseries be established to provide a wide range of food, and tree crops to be actively propagated and distributed to home and institutional gardens.
8. That there should be research in appropriate technology in agriculture. A balance should be struck between local food production and cash crops (for example, rotation of crops and intercropping of cash crops with food crops).
9. That appropriate technology in fisheries be expanded and research into fish poisoning receive continued support.
10. That incentive schemes be established by governments to make social, cultural and economic conditions in rural areas more attractive to the community. These would include:
 - (a) creation of jobs in rural areas which in turn would assist with the control of migration, inflation, alcoholism and juvenile delinquency,
 - (b) decentralisation into villages and outer atolls of training facilities for health and agricultural administrators. This will enable them to become more familiar with the production and use of local foods.

Recommendations for regional organisations

1. That the SPC should employ a Regional Adviser in nutrition to assist countries in nutrition policy planning, to coordinate nutrition activities in the region, monitor nutrition training at CETC, and monitor the implementation of the recommendations of this meeting.
2. That the SPC should provide advice and assistance in planning and implementing national food and nutrition policies which aim to increase self sufficiency of individual countries in the region. This should include advice on such areas as nutritional requirements, food technology, food marketing and agricultural strategies. SPC should also provide advice and assistance to individual countries with other problems relating to nutrition, upon request.

3. That SPC organise a Regional Workshop in 1982 on strategies in nutrition education. Such a workshop should devise and improve educational methods, and advise on the development of educational materials for use throughout the region.
4. That the SPC Community Education Training Centre place increased emphasis on nutrition, and upgrade the existing curriculum to achieve this end.
5. That SPC organise a technical workshop to gather, review and make available existing (but often unpublished) data on the nutrient composition of Pacific Foods, and make recommendations concerning needs for additional food composition data in the region.
6. That SPC investigate the facilities available in the region for food nutrient and food contaminant analysis with the aim of upgrading existing facilities to ensure that a prompt food analysis service is available within the region.
7. Additional appropriate nutrition education materials should be developed and these and existing materials be widely distributed by SPC and UN agencies.
8. UN agencies, SPC, and Foundation for the Peoples of the South Pacific should include all the Pacific countries in their mailing list for the latest publications on nutrition. Mailing of multiple copies to appropriate people should be considered.

SUMMARY OF MAJOR RECOMMENDATIONS

Food and nutrition policies

1. That each country establish a national food and nutrition committee/council or other appropriate body to formulate a national food and nutrition policy.
2. Government should consider measures to promote breast feeding by all available means.
3. That Government should consider the health, nutrition, cultural, social and agricultural implications, in addition to the economic factors, when approving development projects, importation of food, foreign aid, and food aid programmes.

Health and nutrition education

That efforts be made to increase awareness in the community of the importance of nutrition in relation to maternal and child health and adult conditions such as obesity, hypertension, cardiovascular disease and alcoholism.

Training

That a regional training programme in nutrition and health education should be established in conjunction with the Fiji School of Medicine and/or the University of the South Pacific, which would accept students from all Pacific Island countries. Such training should include local training in home country as well as formal training in Suva.

Data collection and research

That a start be made by countries (with assistance from international, regional and academic institutions) to collect data on nutritional status, with particular emphasis on mothers and children, the incidence of degenerative diseases, and the food and trade balance, for the purpose of formulating a national nutrition policy.

Food production, processing and distribution

1. Policies should be developed with regard to the promotion, production, processing, preservation, transportation and marketing of local foods.
2. That governments actively encourage both large-scale (possibly nationalised) food production for local consumption and/or increased production of local foods for commercial purposes by small holders.
3. That governments actively encourage the expansion of subsistence home food gardening, in both urban and rural areas, as one of the most direct avenues to greater self-sufficiency and improved nutrition.
4. That a significant number of agricultural, health and nutrition extension workers be allocated to the technological improvement and encouragement of local, commercial and home food production.
5. That consideration be given to conservation of the ecological system.
6. That incentive schemes be established by governments to make social, cultural and economic conditions in rural areas more attractive to the community.

Recommendations for regional organisations

See complete text.