

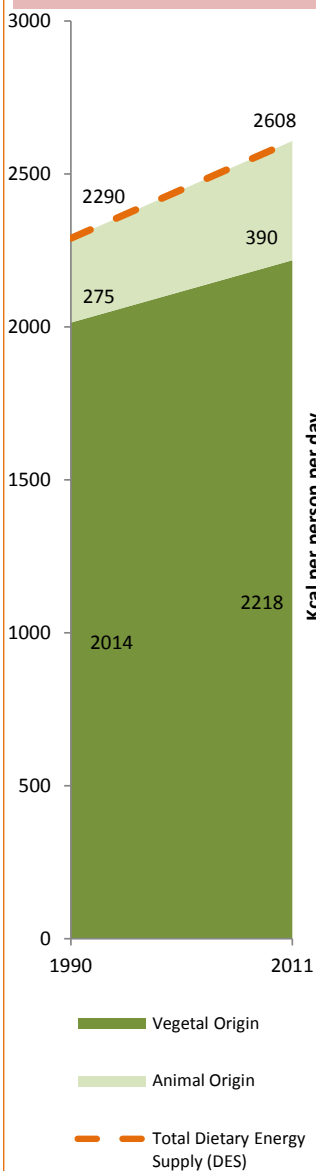


Key Indicators

- Although the Philippines has experienced growth in per-capita GDP and Dietary Energy Supply (DES), the dietary quality has remained poor and based on cereals. Food access remains especially problematic for low-income groups because of income inequality and /or disparities.
- Poor quality of diet is the main factor responsible for persistent high levels of stunting and underweight among young children, high levels of anaemia, and Vitamin A deficiencies.
- In addition, one-third of adults are overweight, and obesity represents an emerging issue because of unbalanced and calorie-dense diets, as well as reduced levels of physical activity.

Figure 1.1 Food Availability

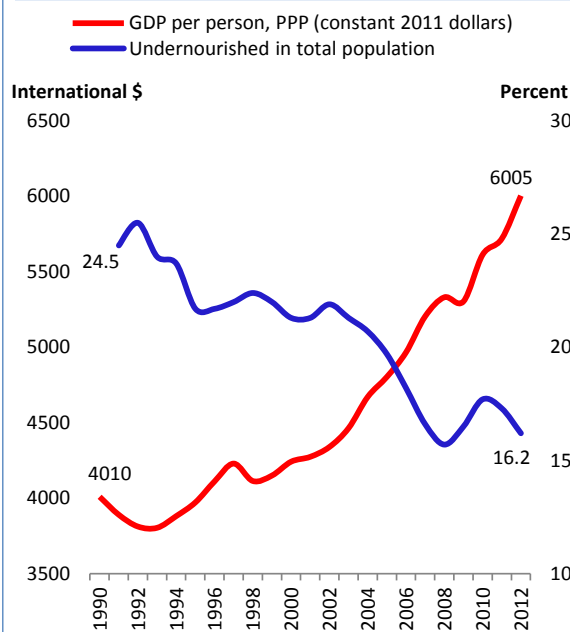
- From 1990 to 2011:
- DES increased 14%
 - Animal-origin supply (including livestock and fish) increased 42%
 - Vegetal-origin products (mainly cereals) increased 10% and remained the major DES source



Source: FAOSTAT FBS: 2014 update

Figure 1.2 Undernourishment and Economic Growth From 1990 to 2012:

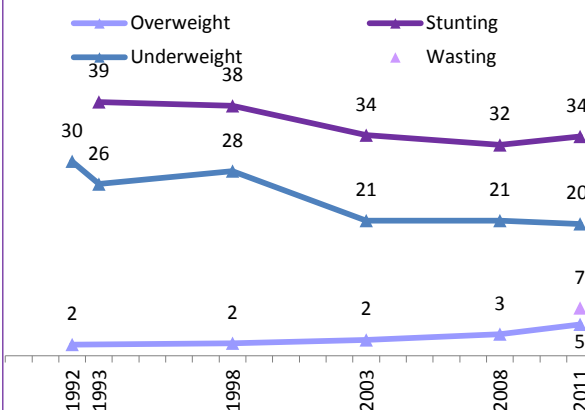
- GDP increased 50%
- Undernourishment declined 34%



Source: GDP: WDI 2014 / Undernourished: FAO FSI_2013

Figure 1.3 Child Malnutrition From 1993 to 2011:

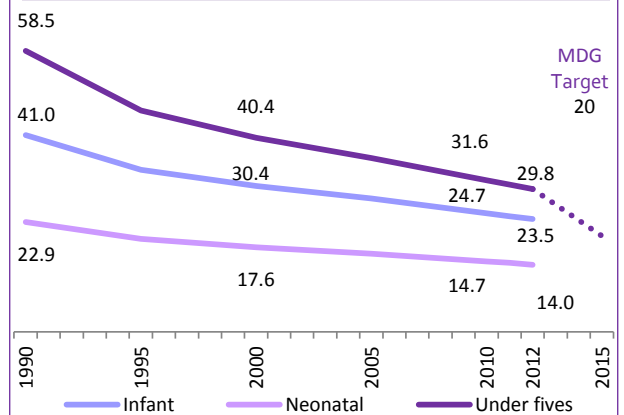
- Stunting declined 14%, but remained high at 34%
- Underweight declined 31%, but remained high at 20%
- Wasting, at 7%, comprised a "poor" situation
- Overweight increased 153%, and stood at 5%
- Low Birth Weight (21%) represents a serious public health concern



Source: Nutritional Survey 2011/ WHO Global Database on Child Growth and Malnutrition 2013

Figure 1.4 Child Mortality From 1990 to 2012:

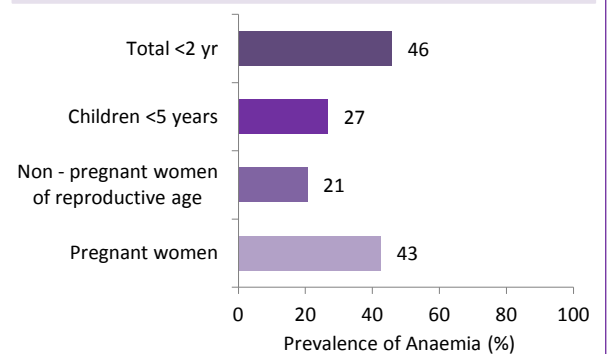
- Under-5 mortality reduced 49%, will not achieve the Millennium Development Goal (MDG) target
- Infant mortality reduced 43%
- Neonatal mortality reduced 39%



Source: Inter-agency Group for CME (2013)

Figure 1.5 Anaemia

- Anaemia is a severe public health issue, high among pregnant women (43%), and under-2 children alike (46%)



Source: 2008 NNS, FNRI-DOST

Anthropometry (Table 1.1)

Underweight women (BMI* < 18.5 kg/m ²)	10.7 %	2011
Underweight adolescent girls aged 10-19 (BMI -2SD)	10.3 %	2011
Overweight adults (BMI* ≥ 25 kg/m ²)	28.4 %	2011
Proportion of infants with low birth weight	21 %	2008-2012

Source: SOWC 2014/Nutrition Fact and Figures 2011 FNRI-DOST



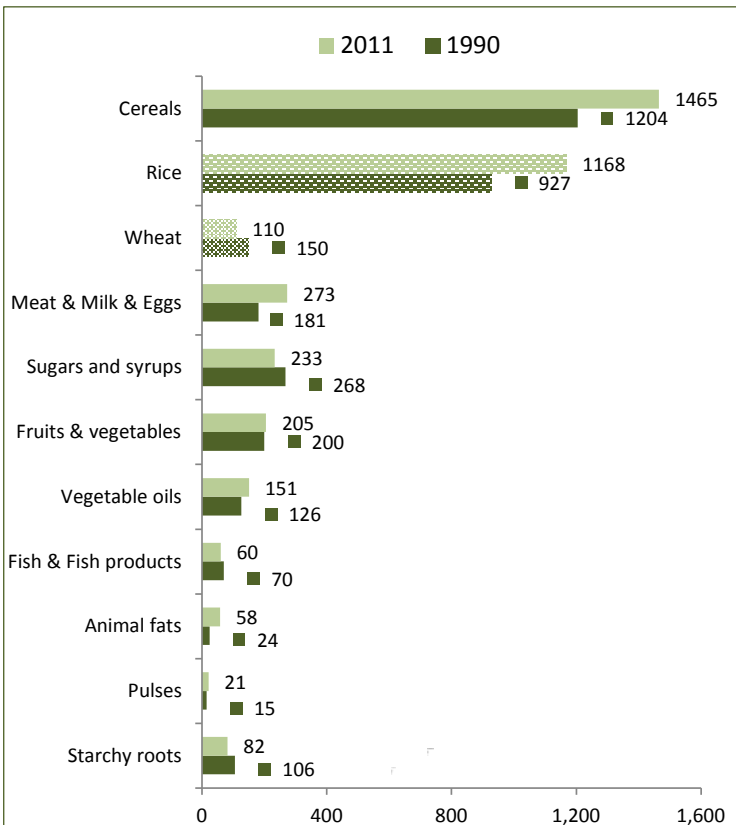
Food Availability / Food Access



Food Availability

Figure 2.1 Food supply by food group - main food commodities contributing in aggregate to more than 80 percent of the dietary energy supply.

(kcal/person/year) Total dietary energy supply= 2608 (2011)



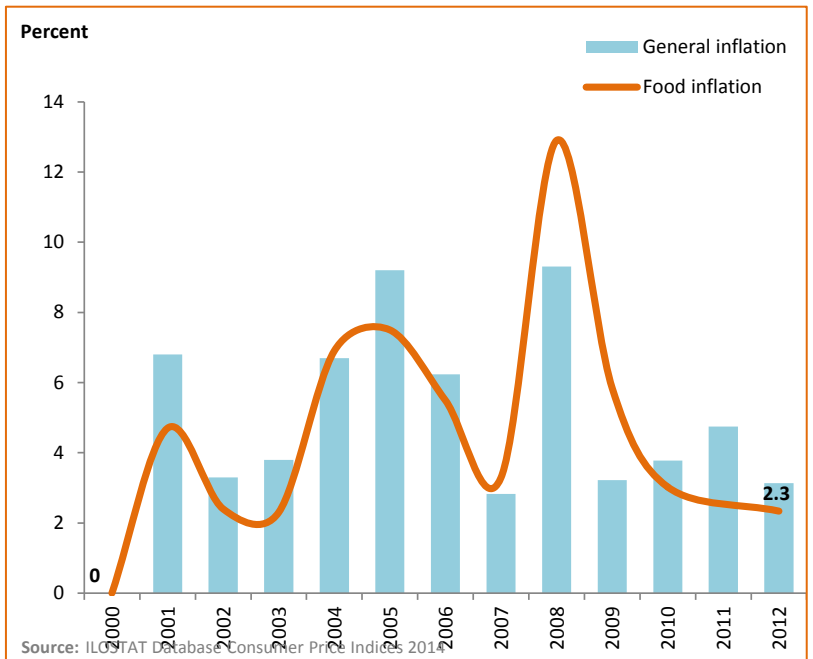
Source: UN_FAO Food Balance Sheets_2014 Update

- Although cereals remain the most important source of food energy, animal fats have more than doubled their availability, by 142%, and meat increased 51%
- Rice contributes to 56% of the food intake; more than 75% of rice consumed in Philippines is locally produced. Nevertheless, imports and stock management still play an important role in rice availability.

Access to food

Figure 2.2 Economic access to food

General and food inflation

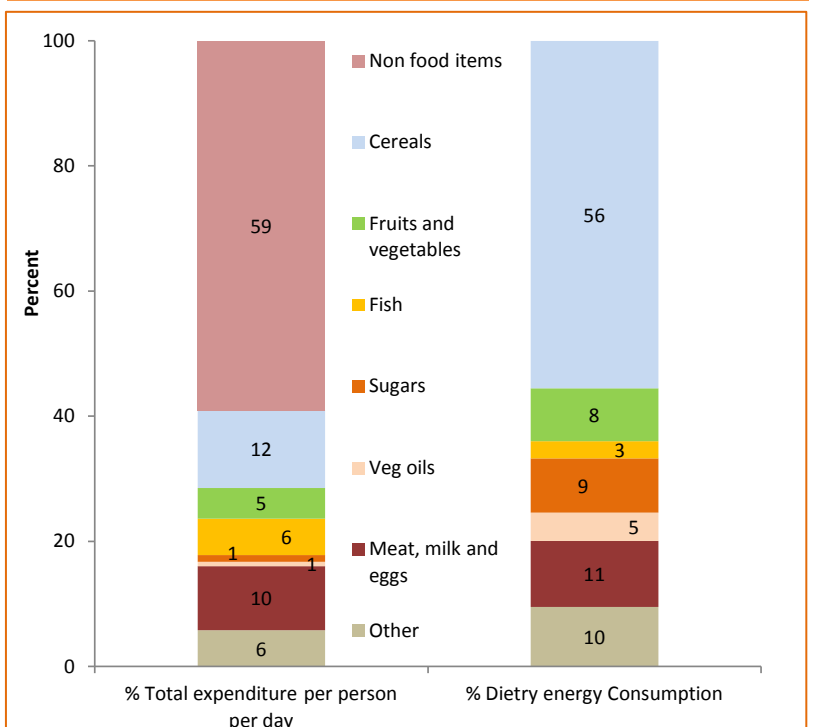


Source: ILOSTAT Database Consumer Price Indices 2014

- Food prices are in general correlated to the general price index.
- Families generally spent one-third of their income on food. While cereals contributed more than half (56%) of food intake, they only affected 10% of food expenditure at household level.

Figure 2.3 Share of food expenditure

(2009)



Sources: UN_FAO RAP based on national HIES, ECS, SES, HLSS_2013 Update, Philippines



Food Utilization

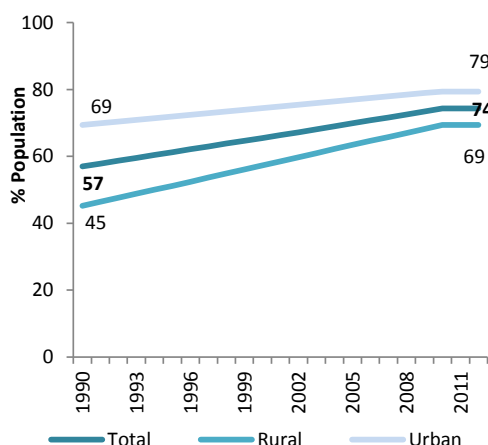
Food utilization refers both to household preparation practices of foods, which influence nutrient content of consumed foods, and to the absorption of nutrients by the human body after consumption. Nutrient absorption in the gut is strongly influenced by health status, particularly the presence of diarrhoea. Hygienic environmental conditions related to improved water and sanitation are important determinants of health and infection incidence and prevalence. In Philippines, water and sanitation conditions have improved during the past 20 years, resulting in a decrease in diarrhoea prevalence. These improvements have contributed to the reduction in malnutrition among under-5 children shown in Fig 1.3. At the same time, coverage of improved management of diarrhoea with zinc supplementation is still too low to have a notable impact.

Water and Sanitation

Figure 3.1 Access to Improved Sanitation

From 1990 to 2012:

- Access to improved sanitation increased 30% in 22 years
- Disparities in access between rural and urban areas have decreased (from 24% to 10%)
- 26% of people do not have access to improved sanitation

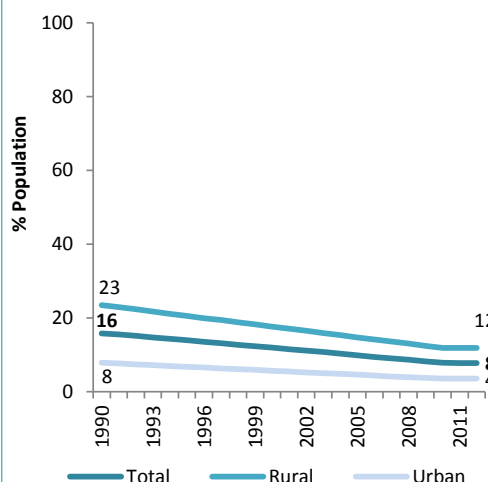


Source: WHO-UNICEF Joint Monitoring Programme, 2014

Figure 3.2 Open Defecation

From 1990 to 2012:

- Open defecation decreased 51% in 22 years
- In rural areas (12%) this unhygienic practice is three times more common than in urban areas (4%).

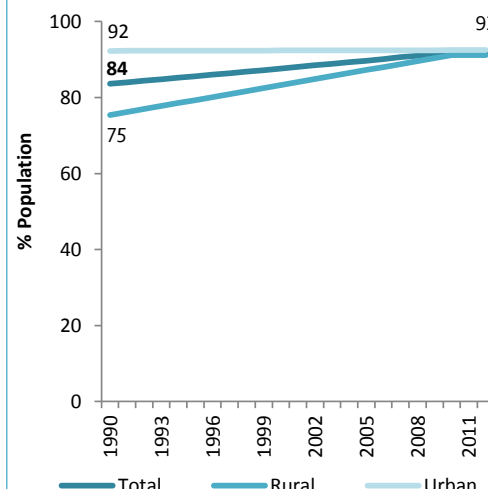


Source: WHO-UNICEF Joint Monitoring Programme, 2014

Figure 3.3 Access to Improved Water Sources

From 1990 to 2012:

- Disparities in access to improved water sources between urban and rural areas have been essentially overcome
- At least 92% of people have sustainable access to improved water



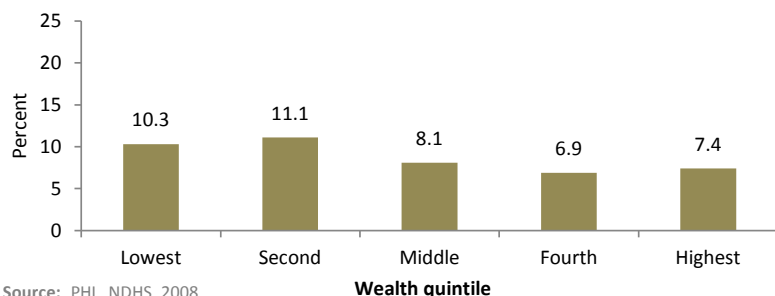
Source: WHO-UNICEF Joint Monitoring Programme, 2014

Food Safety

Quality and food safety efforts cover the entire complex chain of agriculture production, processing, transport, and food production and consumption. On the production side, food safety challenges exist at farm level and in the processing stage. On the consumption side, the prevalence of diarrhoea among under-5 children is relatively low for all wealth quintiles (Fig 3.4), even as food contaminants remain a challenge.

Figure 3.4 Diarrhoea

- Diarrhoea among young children is most common in the poorest wealth quintiles, reflecting disparities in sanitation as well as in general hygiene and food safety
- Therapeutic zinc is used for diarrhoea treatment in only 2% of cases



Source: PHL_NDHS_2008

Management of Diarrhoea (Table 3.1)

Therapeutic zinc supplementation for diarrhoea treatment was only recently introduced, and coverage was still low during the latest national survey (2008).

Zinc

Share of children under age 5 with diarrhoea receiving zinc treatment	1.5 %
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Existing policy framework

Zinc Supplementation and Reformulated Oral Rehydration Salt in the Management of Diarrhea

Source: PHL_NDHS_2008

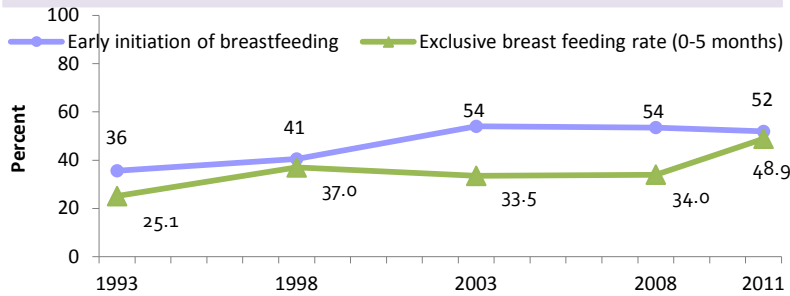


Food Utilization

Nutrition and Health

Figure 3.5 Exclusive Breastfeeding From 1993 to 2008:

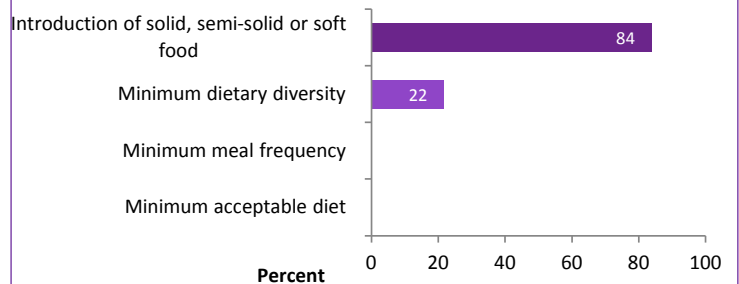
- Exclusive breastfeeding increased from 25% to 34%. Nevertheless, about two-thirds of infants younger than 6 months old were not exclusively breastfed.
- Early initiation of breastfeeding (54%) is correlated with lower infant mortality and relatively prolonged breastfeeding.



Source: PHL_NDHS_2008, Nutritional Survey 2011

Figure 3.6 Complementary Feeding

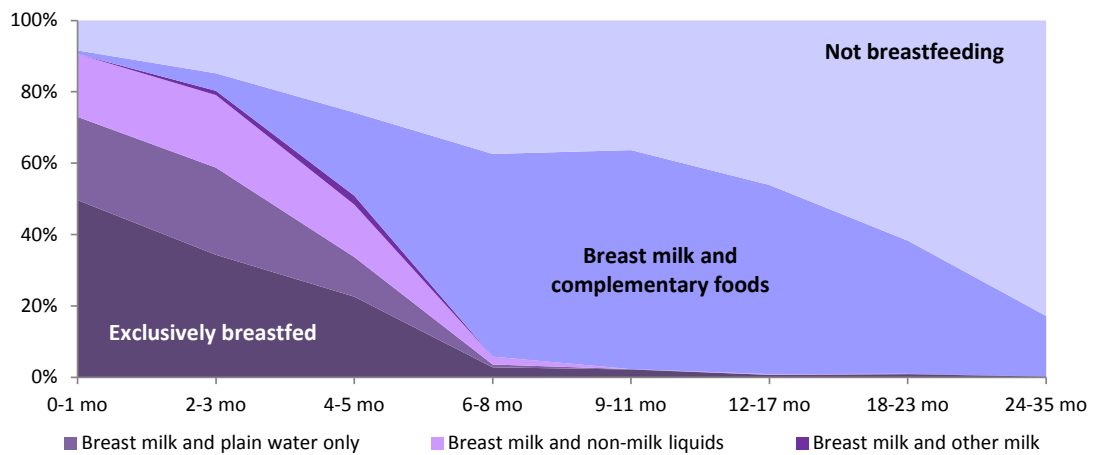
- Introduction of complementary feeding is timely for 84% of children
- 22% of children aged 6-23 months meet the minimum dietary diversity



Source: FNRI_DOST Updating survey 2011

Figure 3.7 Duration of Breastfeeding

- Duration and frequency of breastfeeding affect the health and nutritional status of both mother and child.
- Exclusive breastfeeding is recommended up to age 6 months, and continued breastfeeding with complementary feeding is recommended from age 6 months to 2 years and beyond
- The proportion of children receiving any breastmilk declines from 63% at age 6-8 months to 38% at age 1.5-2 years



Source: PHL_NDHS_2008

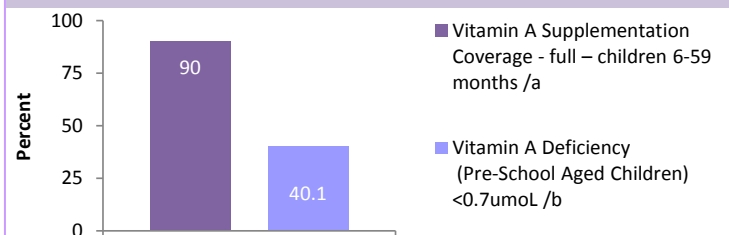
Figure 3.8 Child Malnutrition and Poverty

No Data

Micronutrient Status

Figure 3.9 Vitamin A

- Successful Vitamin A supplementation (90%) is a likely contributor to the observed reductions in child mortality
- Severely high Vitamin A deficiencies (40% of pre-schoolers) indicate that Vitamin A is still lacking in the daily diet, and that food-based interventions, including food fortification, deserve ongoing attention. Vitamin A deficiency is the leading preventable cause of paediatric blindness and increases the mortality risk of episodes of illness.



* VAD is a severe public health problem if >20% of preschool children (6-71 months) have low serum retinol (<0.7µmol/L)

Source: a/ UNICEF, State of the World's Children 2014, b/ WHO Global prevalence of vitamin A deficiency in population at risk 1995-2005 report.

Iodine (Table 3.2)

Households consuming iodized salt /a	44.5 %
Iodine deficiency (Urinary Iodine Concentration <100ug/L) among school-age children (2003) /b	23.8 %

*Optimal UIE 100 - 199ug/L

Source: a/ UNICEF State of the World's Children 2014 b/WHO Global database on iodine deficiency



Enabling environment for Nutrition and Food security - Policy documents			
<p>1. AO No. 2008-00201 Strategy for maternal and new-born child health and nutrition (MNCHN) 2008-2014, Department of Health 2008 M&E by Department of Health; Existing legislation monitored and enforced – Monitors Guide to the Milk Code Department Circular 2009-0228</p>			
<p>2. AO No. 2005-0014: National Policies on Infant and Young Child Feeding Nationwide implementation involving government and other partners agencies</p>			
<p>3. AO No. 2010-0010: Revised Policy on Micronutrient Supplementation Nationwide implementation. Policy includes general guidelines specifying the roles and responsibilities of different concerned agencies. Department of Health is tasked for the overall execution of the policy.</p>			
<p>4. AO No. 2007-0045 Zinc Supplementation and Reformulated Oral Rehydration Salts in the Management of Diarrhoea, Department of Health 2007 M&E by Department of Health; nationwide implementation ongoing. Policy includes scope and coverage by all Government health agencies as well as private and other health facilities.</p>			
<p>5. Philippine Code of Marketing of Breastmilk Substitutes (E.O. 51) and Administrative Order 2006-0012 (Revised Implementing Rules and Regulations of Executive Order No. 51m (The "Milk Code", Relevant International Agreements, Penalizing, 15-05-06) A bill was filed in 2012 before the House of Representatives seeking to amend the Milk Code (known as Executive Order 51) and the Expanded Breastfeeding Promotion Act of 2009, also known as Republic Act 10028. The bill seeks to limit application of the law to infants aged 0 to 6 months instead of 0-36 months.</p>			
Nutrition related issues covered in these policies	Covered	Comments	
Maternal and Child Undernutrition	Child undernutrition	Yes	Covering stunting, wasting and underweight Universal health care, conditional cash transfers, growth monitoring and promotion, acute malnutrition management and Infant and Young Child Feeding are strategies to manage and prevent undernutrition. Moderate acute malnutrition/severe acute malnutrition (MAM/SAM) management guidelines (draft 2011; still to be formalized), localized community-based management Interim guidelines for integrated management of acute malnutrition for piloting
	Low Birth Weight	Yes	
	Maternal undernutrition	Yes	
Obesity and diet related NCDs	Child obesity	Yes	National Guidelines published by FNRI including overweight and obesity in its contents
	Adult obesity	Yes	
	Diet related NCDs	Yes	
Infant and Young Child Nutrition	Breastfeeding	Yes	Infant and Young Child Feeding (IYCF) policy and guidelines approved 2005; guidelines for emergency IYCF 2010 Promotion of breastfeeding Implemented at national scale Behaviour change communication and/or counselling for improved complementary feeding implemented at national scale
	Complementary feeding	Yes	
	Int'l Code of Marketing of BMS	Yes	
Vitamins and Minerals	Supplementation: Vitamin A children/women Iron Folate children/women Zinc children Other vitamins & min child/women	Both Both Yes Child	Deworming of children 6-59 mo. is implemented nationwide as part of child health weeks Vitamin and mineral supplementation is implemented nationwide based on 2005 guidelines, Diarrhoea management guidelines, including zinc, approved 2007
	Food fortification	Yes	
Underlying and contextual factors	Food Safety	Yes	Food Safety Act updated 2012, was pending approval in Senate at time of research Emergency rice supplies and mechanisms in place to ensure availability and price stability during disasters and calamities. Primary health care programmes such as EPI, WASH, Accelerated Hunger Mitigation programmes, mixed small scale food crop, gender mainstreaming address underlying factors of malnutrition Nursing breaks after return to work for at least 40 minutes per day.
	Food security	Yes	
	Food Aid	Yes	
	Nutrition and Infection	Yes	
	Gender	No	
Maternal leave	8 weeks		
Social Protection policies or legislation including food or nutrition component			
<p>1. Pantawid Pamilia (Poverty Reduction Strategy – Conditional Cash Transfers) - 2010 Conditional cash transfer reaching 3 million out of 5 million of the registered poor, conditionality's comprising primary health care for pregnant women and children; key household members have to attend Family Development Sessions regularly, including nutrition information and Infant and Young Child Feeding community counselling, as part of the materials on nutrition education.</p>			
<p>2. Magna Carta Of Women IRR Republic Act 9710, 2009 Legal instrument that protect the rights of women in line with UN CEDAW, ensuring that women especially in marginalized sectors have food security and access to production resources, etc. Implementation is mandate of all state agencies, offices, and institutions at all levels.</p>			



Philippines - Food and Nutrition Security Profiles



Policy Table - 2

Food safety policies or legislation
<p>1. HBO 6474 Food Safety Act of 2012 – Still to be signed by the President.</p> <p>Act to strengthen the food safety regulatory system in the country to protect consumer health and facilitate market access of local foods and food products, and for other purposes. Bill approved by House of Representatives, in Senate considered for approval in November 2012.</p>
Other policies addressing food security
<p>1. National Food Authority: Emergency Rice Reserves for Disaster and Crisis Preparedness Program – Presidential Decree Circular No. 4</p> <p>Provides 13% market-share of rice at subsidised price; aims to ensure rice availability during disasters. Discoloration due to iron fortification reduces demand; largest consumer sector is institutional sector rather than poor households where anaemia prevalence is high.</p>

Demographic Indicators (Table - 5.1)		Year	Economic Indicators (Table - 5.3)		Year	
Population size (thousands) /a	96,707	2012	GDP annual growth rate /c	6.8 %	2012	
Average annual population growth /a	1.72 %	2012	GDP per capita (PPP) (constant 2011 international dollars) /c	6,005	2012	
Proportion of population urbanised /c	49.1 %	2012				
Number of children <5 years (thousand) /a	11,307	2012	Gini index /c (100= complete inequality; 0= complete equality)	42.98	2009	
Education level of mothers of under-fives: None (%)	2	2011		44.04	2006	
Life expectancy at birth (Years) /c	Male	65	2012	Unemployment rate /c	7 %	2012
	Female	72.1	2012	Population below US \$ 1.25 (PPP) per day /c (%)	18.42	2009
Agriculture population density(people/ ha of arable land /b)	3.1	2006-2008				
Employment in agriculture sector (% of total employment) /c	32.2 %	2012	Poverty gap ratio /e	5.5	2006	
Women employed in agriculture sector (% of total female employment) /c	21 %	2012	Income share held by households /c	Poorest 20%	5.98 %	2009
				Richest 20%	49.69 %	2009
Adolescents (Table - 5.2)		Year	<p>Sources:</p> <p>a/ World Bank Health Nutrition and Population Statistics 2013</p> <p>b/ FAOSTAT 2013 Update;</p> <p>c/ World Bank, World Development Indicators Database, 2014 Update;</p> <p>d/ UNICEF, State of the World Children 2014 (data refer to the most recent year available during the period specified) ;</p> <p>e/ UN Statistics Division, MDG database 2013 Update.</p> <p>f/ FNRI-DOTS Philippines Nutrition Facts and Figures 2011</p>			
Adolescent birth rate (number of births per 1,000 adolescent girls aged 15-19) /a	47	2012				
Adolescent girls aged 15-19 currently married or in union /d	10.3 %	2008				
Women aged 20-24 who gave birth before age 18 /d (%)	7	2008-2012				

The information included in this Food Security and Nutrition profile, is backed by recognized, validated and properly published information available until June 2014. Although updated information might be available at national level from different sources, until requirements of quality, validity and proper publication are met, it has not been included in this profile.

