



Key Indicators

In recent years Mongolia has experienced significant improvements in GDP per capita and a slight increases in the Dietary Energy Supply (DES). Among countries in the region, Mongolia has the biggest contribution from animal sources to energy consumption, comprising nearly one-third of calories.

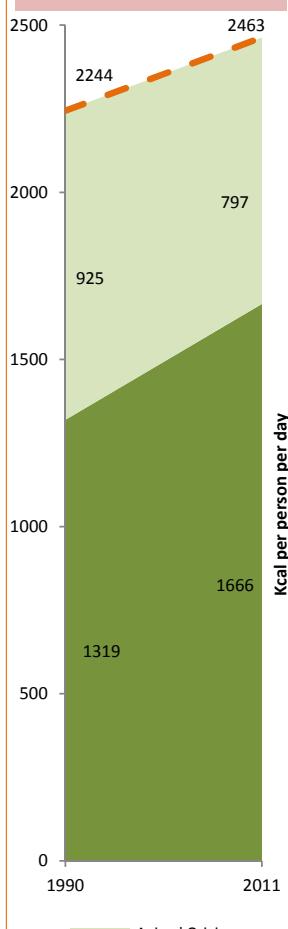
These improvements in economic indicators are reflected in health and nutritional indicators. The country will succeed in reaching the Millennium Development Goal (MDG) for child mortality and has recorded significant improvements in all nutrition indicators with the exception of overweight in children and adults, which is increasing. The prevalence of anaemia is relatively high.

With almost two thirds of infants exclusively breastfed, Mongolia has one of the highest rates in the region for this indicator.

Figure 1.1 Food Availability

From 1990 to 2011:

- DES increased 10%
- Animal-origin supply decreased 14%
- Vegetal-origin products increased 26%



Source : FAOSTAT FBS: 2014 update

Figure 1.2 Undernourishment and Economic Growth

From 1990 to 2012:

- GDP increased 93%
- Undernourishment declined 45%

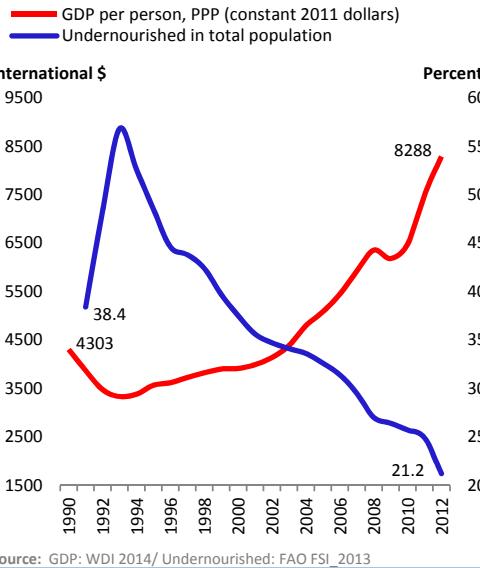


Figure 1.3 Child Malnutrition

From 1999 to 2010:

- Stunting declined 49%
- Underweight declined 69 %
- Wasting was 2 % in 2010
- Overweight high prevalence 13% in 2010
- Low Birth Weight 4.7 in 2010

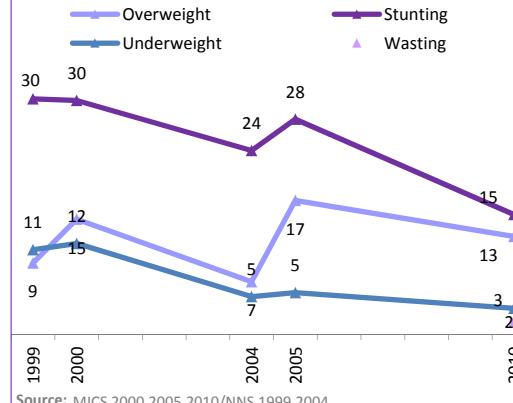


Figure 1.4 Child Mortality From 1990 to 2012:

- Under-5 mortality reduced 74%, and has already achieved the MDG target for 2015
- Infant mortality reduced 70%
- Neonatal mortality reduced 61%

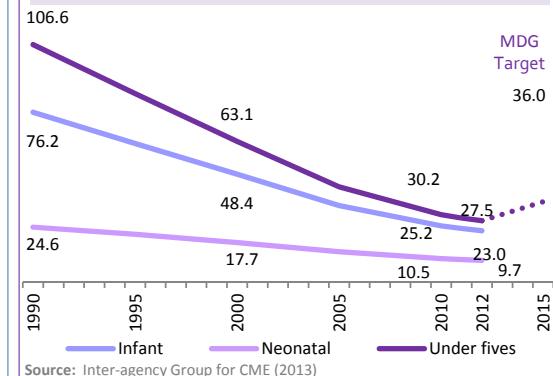
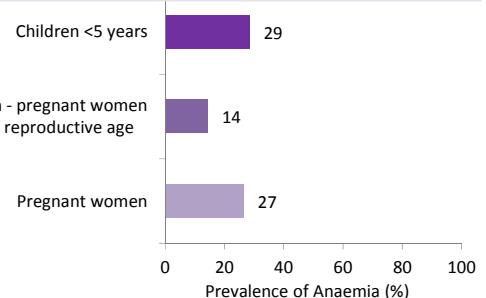


Figure 1.5 Anaemia

- Anaemia remains a public health concern, among pregnant women (27%) and children under 5 (29%)
- Non-pregnant women record anaemia rates of 14%



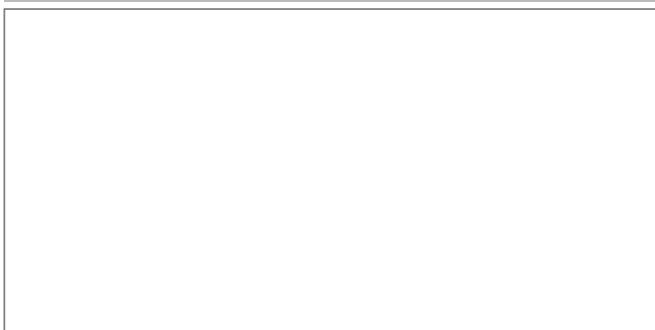
Anthropometry (Table 1.1)

Underweight women (BMI < 18.5 kg/m ²) /a	6 %	2010
Overweight adults (BMI >= 25 kg/m ²) /b	39.8 %	2009
* BMI values calculated using adult cut off points, population < 20 should be analyzed using WHO growth reference for school aged children and adolescents		
Proportion of infants with low birth weight /c	4.7 %	2010

Source: a.NNS 2010 / b.STEPS Survey 2009 / c.MICS 2010



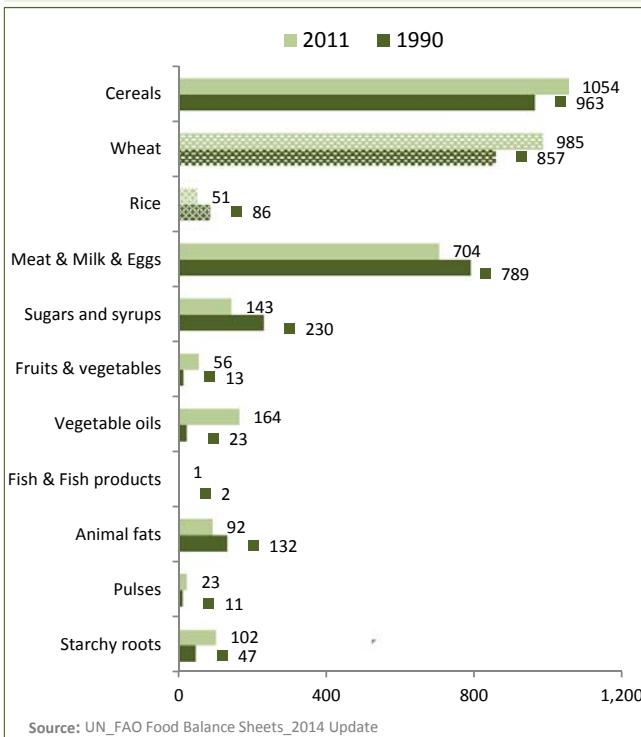
Food Availability / Food Access



Food Availability

Figure 2.1 Food supply by food group

(kcal/person/year) Total dietary energy supply= 2463 (2011)

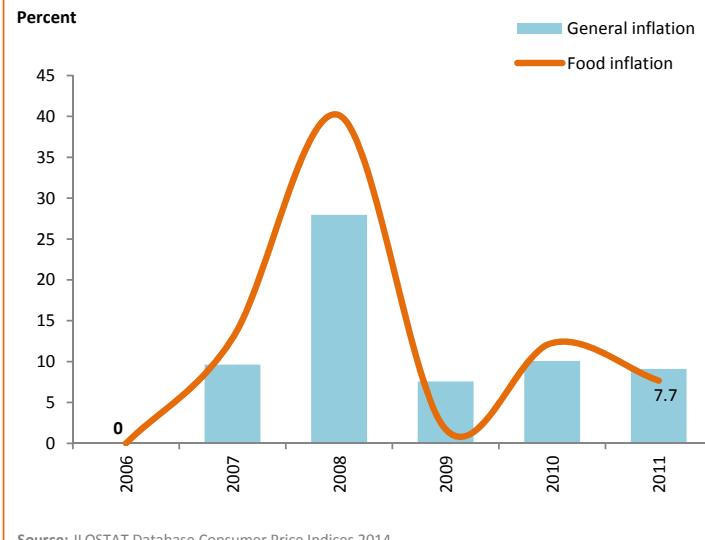


- Cereals remain the most important source of food energy (43%), mainly from wheat (93% of all cereals)
- Contributions of vegetable oils and fruits and vegetables have surged 613% and 333% respectively, but are still not significant in overall DES
- Meat, milk and eggs comprise a large proportion (29%) of DES

Access to food

Figure 2.2 Economic access to food

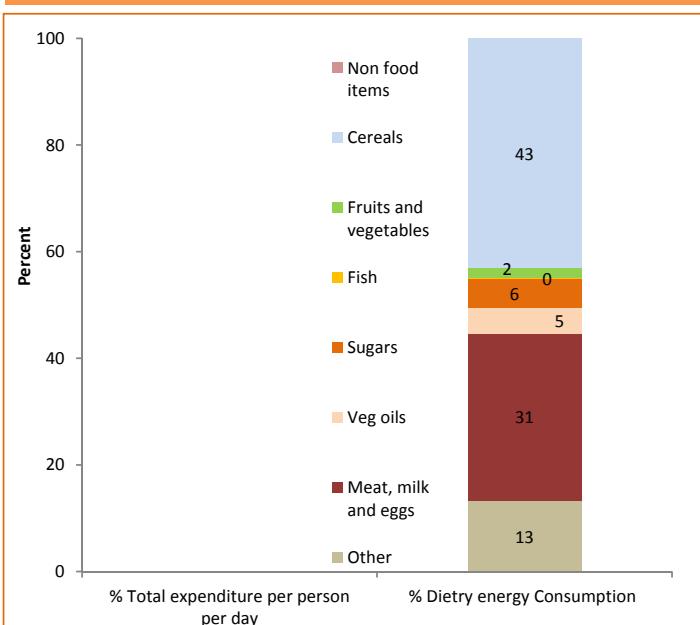
General and food inflation



- In 2008 food prices increased 40%, while general prices rose 28%

Figure 2.3 Share of food expenditure

(2009)





Food Utilization

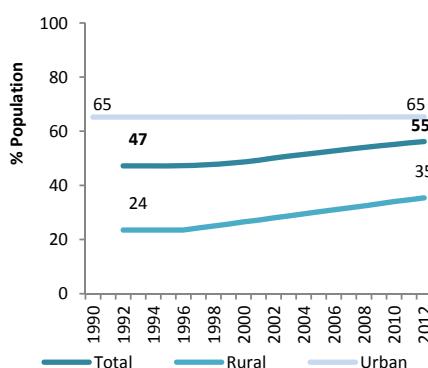
Food utilization refers both to household preparation practices of foods, which influence nutrient content of consumed foods, and to the absorption of nutrients by the human body after consumption. Nutrient absorption in the gut is strongly influenced by health status, particularly the presence of diarrhoea. Hygienic environmental conditions related to improved water and sanitation are important determinants of health and infection incidence and prevalence. In Mongolia, water and sanitation conditions have not improved significantly during the past 20 years.

Water and Sanitation

Figure 3.1 Access to Improved Sanitation

From 1992 to 2012:

- Access to improved sanitation increased 19% in 20 years and covers 55% of the population
- Disparities between rural and urban areas slightly decreased
- 65% of people in rural areas do not have access to improved sanitation

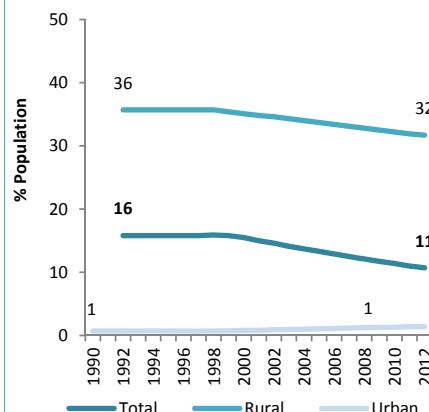


Source: WHO-UNICEF Joint Monitoring Programme, 2014

Figure 3.2 Open Defecation

In 2012:

- Open defecation was still prevalent among 11% of the population.
- In rural areas, 1 in 3 households practice open defecation (32%)

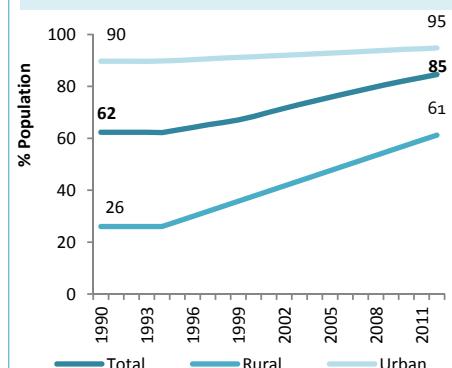


Source: WHO-UNICEF Joint Monitoring Programme, 2014

Figure 3.3 Access to Improved Water Sources

From 1990 to 2012:

- Access to improved water sources increased 36% during 22 years and stands at 85%
- Disparities in access to improved water sources between urban and rural areas continue
- Access to improved water sources in urban areas is no longer a key development issue



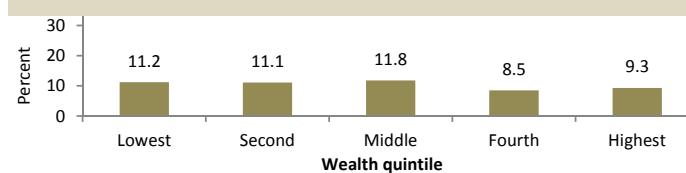
Source: WHO-UNICEF Joint Monitoring Programme, 2014

Food Safety

Quality and food safety efforts cover the entire complex chain of agriculture production, processing, transport, food production and consumption.

Figure 3.4 Diarrhoea Among Under-5 Children

- Diarrhoea is not significantly different among young children from the different wealth quintiles, although this does not reflect the significant disparity in access to improved sanitation
- Diarrhoea still represents a public health issue, regardless of the wealth quintile.
- Only 0.2% of cases receive zinc treatment, an insignificant proportion



Source: MNG_MICS_2010-2011

Management of Diarrhoea (Table 3.1)

Zinc

Share of children under age 5 with diarrhoea receiving zinc treatment

0.2%

Existing policy framework

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

Source: MNG_MICS_2010-2011



Food Utilization

Nutrition and Health

Figure 3.5 Exclusive Breastfeeding From 2005 to 2010:

- Exclusive breastfeeding increased slightly (57% to 66%). Even so, about a third of infants younger than age 6 months are not exclusively breastfed.
- Early initiation of breastfeeding decreased (78% to 71%).

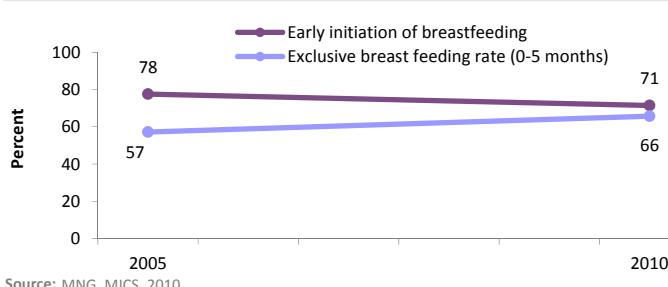


Figure 3.6 Complementary Feeding

- Introduction of complementary feeding is timely for 66% of children
- Just 30% of children aged 6-23 months meet the minimum meal frequency

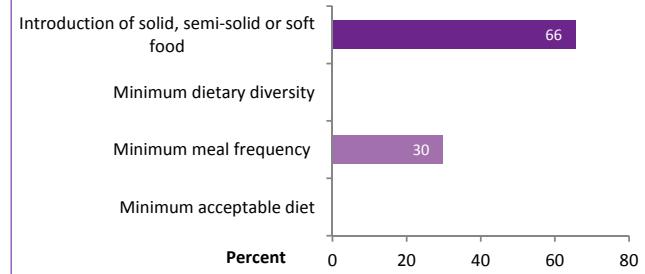


Figure 3.7 Duration of Breastfeeding

- Prolonged breastfeeding of up to 2 years is prevalent in almost 50% of children
- A large proportion of Mongolian children is given breastmilk but also non-milk liquids from birth

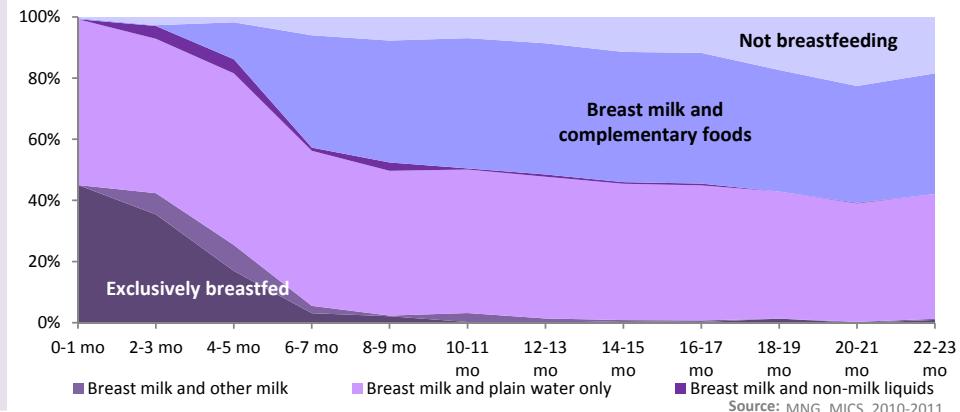
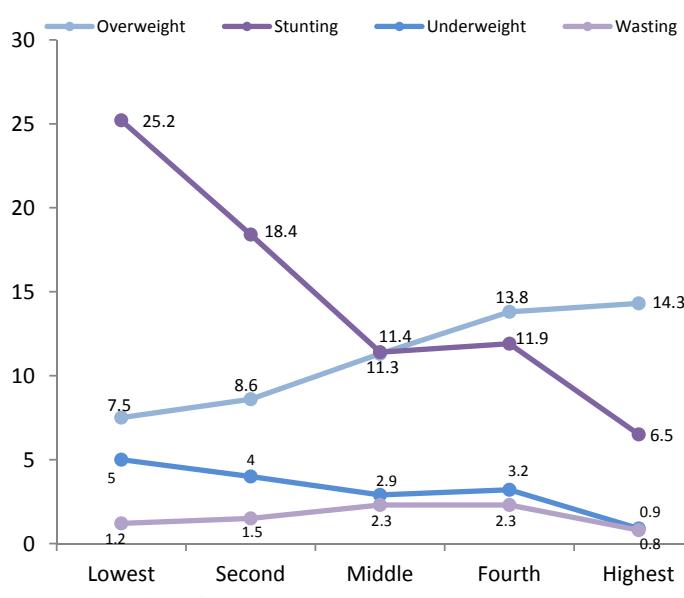


Figure 3.8 Child Malnutrition and Poverty

Children in the wealthiest quintile have 74% less stunting than children in poorer quintiles

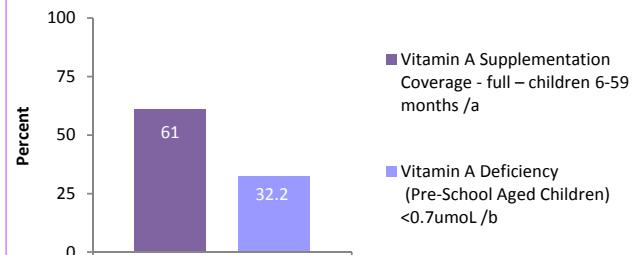
Overweight is a growing public health issue among the wealthiest quintiles (14%)



Micronutrient Status

Figure 3.9 Vitamin A

- Vitamin A supplementation – a child survival intervention – is a likely contributor to the observed reductions in child mortality, with 61% coverage, nevertheless it can be significantly improved.
- At the same time, severe Vitamin A deficiencies (32% of pre-schoolers) indicate that Vitamin A is still lacking in the daily diet



Iodine (Table 3.2)

Households consuming iodized salt (2010)/a	69.9 %
Iodine deficiency (Urinary Iodine Concentration <100μg/L) among school-age children (2010) /b	22.9 %

*Optimal UIE 100 - 199μg/L

Source: a/ MICS 2010 b/NNS Fourth National Survey 2010



Enabling environment for Nutrition and Food security - Policy documents addressing nutrition issues			
1. The National Food Security Programme, NFSP, 2009-2016 2. National Strategy on Healthy Diet and Physical Activity 2009-2021, M&E by Ministry of Health Document web-link: http://www.legalinfo.mn			
3. National Strategy on Micronutrients Deficiencies 2005-2015, Ministry of Health 2007 Adopted by MoH, 2005. This policy build on the National Plan of Action for Iodine Deficiency Disorders (1996 - revised in 2002) Document web-link: http://www.moh.mn			
4. The National Programme on Prevention and Control of Diseases Related to Lifestyle Risk Factors, 2014-2021 Endorsed by the Government in 2014.			
5. National Code on Marketing of Breastmilk Substitutes endorsed in 2005.			
6. National program on Child protection and development, 2001-2010			
Nutrition related issues covered in these policies		Covered	Comments
Maternal and Child Undernutrition	Child undernutrition	yes	
	Low Birth Weight	yes	
	Maternal undernutrition	yes	
Obesity and diet related NCDs	Child obesity	both	
	Adult obesity	yes	
Infant and Young Child Nutrition	Diet related NCDs	yes	
	Breastfeeding	yes	
	Complementary feeding	yes	
Vitamins and Minerals	Int'l Code of Marketing of BMS	yes	
	Supplementation: Vitamin A children/women Iron Folate children/women Zinc children Other vitamins & min child/women	both both yes both	Deworming is not done nationwide as a public health intervention. But children do receive deworming treatment when they diagnosed as infected.
	Food fortification	yes	Mandatory: Salt , Voluntary: Flour (20%)...
Underlying and contextual factors	Food Safety	yes	
	Food security	yes	
	Food Aid	yes	
	Nutrition and Infection	no	
	Gender	yes	
Maternal leave		17 weeks	Nursing breaks for 2 hrs. after return to work till baby is age 6mo and 1 hr. till 12 mo.
Social Protection policies or legislation including food or nutrition component			
Food safety policies or legislation			
1. Food Law December 2012 The food law and the food safety law have been approved by parliament of Mongolia on December 2012. Law are in effect since March 2013.			
2. Food Safety Law Endorsed in 2012			
Other policies addressing food security			
1 National Programme on Food Security 2009-2019, Ministry of Food, Agriculture and Light Industry 2009 M&E by Ministry of Food, Agriculture and Light Industry http://www.legalinfo.mn			
2. State Policy on Food and Agriculture 2003, approved by Parliament of Mongolia, 2003			
3. National Mongolian Livestock Programme The national Mongolian livestock programme has been approved, and is in effect from 2010 to 2021. One of the core purposes of the programme is to provide a safe and healthy food supply to the population, to deliver quality raw materials to processing industries and to increase exports.			
4. Milk National Programme, 2006, approved by Government			



Demographic Indicators (Table - 5.1)			Year	Economic Indicators (Table - 5.3)		Year
Population size (thousands) /a	2,796	2012		GDP annual growth rate /c	12.3 %	2012
Average annual population growth /a	1.5 %	2012		GDP per capita (PPP) (constant 2011 international dollars) /c	8,288	2012
Proportion of population urbanised /c	69.3 %	2012				
Number of children <5 years (thousand) /a	298	2012		Gini index /c (100= complete inequality; 0= complete equality)	32.8	2002
Education level of mothers of under-fives: None (%) /f	5	2010			36.5	2008
Life expectancy at birth (Years) /c	Male	63	2012	Unemployment rate /c	5.2 %	2012
	Female	71.4	2012	Population below US \$ 1.25 (PPP) per day /c (%)	-	-
Agriculture population density(people/ ha of arable land /b)	0.6	2006-2008		Poverty gap ratio /e	6.2	2005
Employment in agriculture sector (% of total employment) /c	32.6 %	2011		Income share held by households /c	7.1 %	2008
Women employed in agriculture sector (% of total female employment) /c	32.2 %	2011			Richest 20%	44.04 %
Adolescents (Table - 5.2)			Year			
Adolescent birth rate (number of births per 1,000 adolescent girls aged 15-19) /c	38	2010		Sources:		
Adolescent girls aged 15-19 currently married or in union /f	4.8 %	2010		a/ World Bank Health Nutrition and Population Statistics 2013		
Women aged 20-24 who gave birth before age 18 /f (%)	2	2010		b/ FAOSTAT 2013 Update;		
				c/ World Bank, World Development Indicators Database, 2014 Update;		
				d/ UNICEF, State of the World Children 2014 (data refer to the most recent year available during the period specified)		
				e/ UN Statistics Division, MDG database 2013 Update.		
				f/ Mongolia Multiple Indicator Cluster Survey 2010		

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.



Food and Agriculture Organization of the United Nations

