

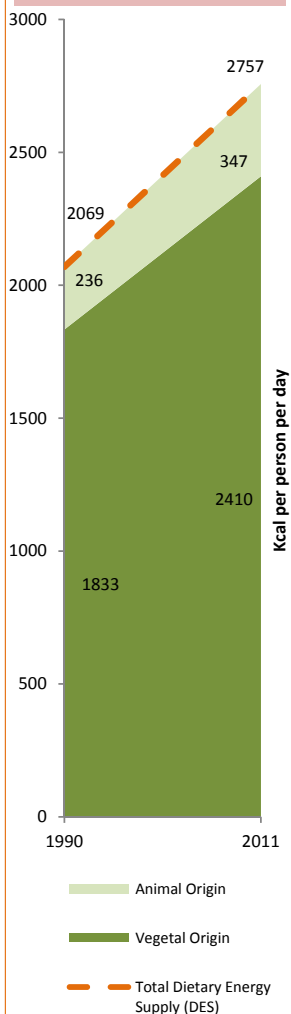


Key Indicators

- Thailand has an integrated framework for food and nutrition security, with a National Food Safety and Nutrition plan. The country has experienced rapid growth in per-capita GDP and Dietary Energy Supply (DES), as well as a sustained decline in undernourishment rates.
- Thailand displays a declining trend in underweight and stunting. Nevertheless, an emerging issue is that of overweight, both for children and one third of the adult population. Anaemia and Vitamin A deficiencies continue to be matters of public health concern.
- The International Code of Marketing of Breastmilk Substitutes is being implemented on a voluntary basis, with a current review to strengthen legislation.

Figure 1.1 Food Availability From 1990 to 2011:

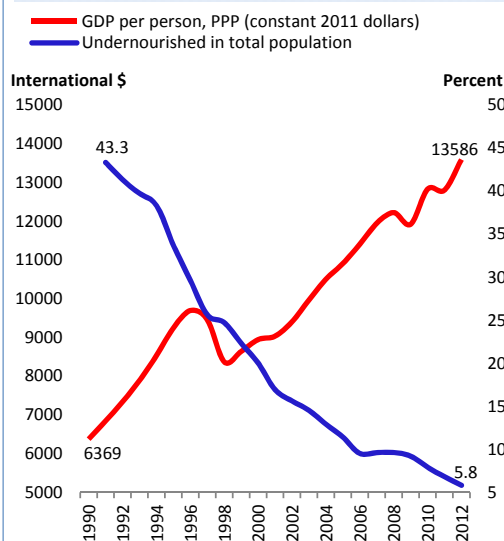
- DES increased 33%
- Animal-origin supply increased 47%
- Vegetal-origin products increased 31% and remained the major DES source



Source: FAOSTAT FBS: 2014 update

Figure 1.2 Undernourishment and Economic Growth From 1990 to 2012:

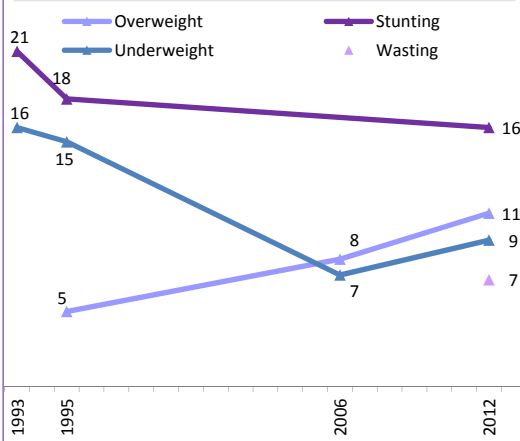
- GDP per capita increased 113%
- Undernourishment declined by 87%



Source: GDP: WDI 2014 / Undernourished: FAO SOFI_2013

Figure 1.3 Child Malnutrition From 1993 to 2012:

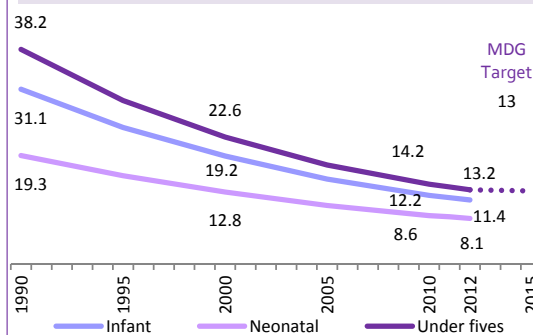
- Stunting declined 23%
- Underweight declined 44%
- Wasting stood at 7% in 2012
- Overweight increased 132% in 18 years



Source: Thailand MICS 2012

Figure 1.4 Child Mortality From 1990 to 2010:

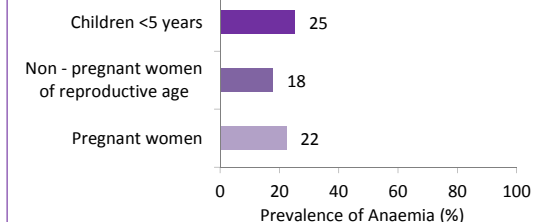
- Under-5 mortality reduced 65% and is set to achieve the Millennium Development Goal (MDG) target
- Infant mortality reduced 63%
- Neonatal mortality reduced 58%



Source: Inter-agency Group for CME (2013)

Figure 1.5 Anaemia

- Anaemia is a public health issue for pregnant women (22%), non-pregnant women (18%) and under-5 children alike (25%)



Source: WHO Worldwide prevalence of Anaemia (1993-2005)

Anthropometry (Table 1.1)

Underweight women (BMI < 18.5 kg/m ²)	9.6 %	2004
Overweight adults (BMI ≥ 25 kg/m ²)	31.5 %	2003
* 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	7.6 %	2012

Source: MICS 2012 / UN_WHO Global Database on BMI_2013



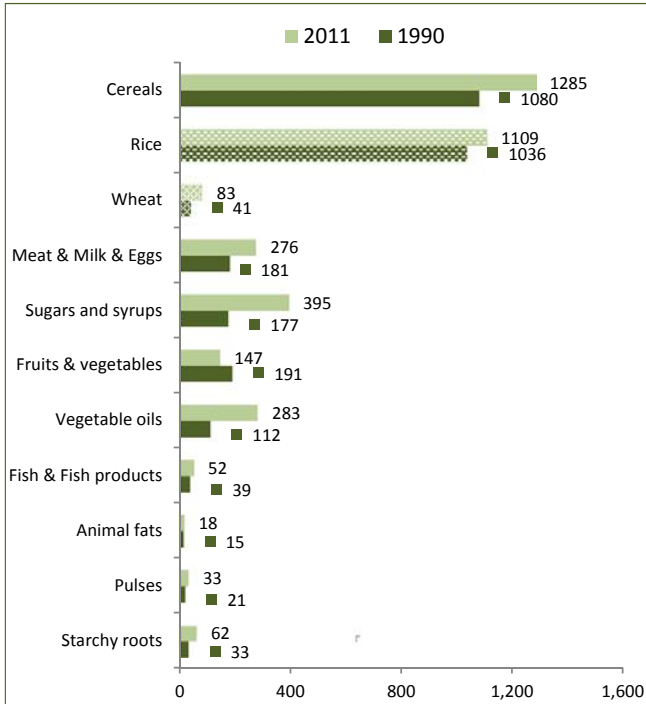
Food Availability / Food Access



Food Availability

Figure 2.1 Food supply by food group -

(kcal/person/year) Total dietary energy supply= 2,757 (2011)



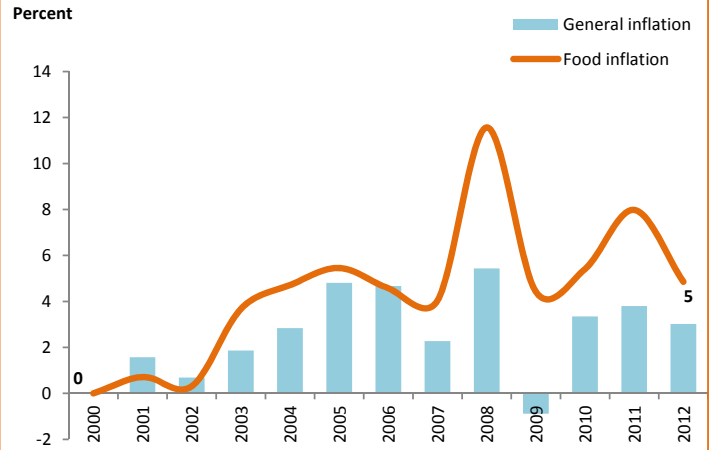
Source: UN_FAO Food Balance Sheets_2014 Update

- Cereals remain the most important source of food energy, and contribute to 52% of food intake, with rice representing 90% of these cereals
- Sugars and Syrups (123%) and vegetable Oils (153%) have increased considerably and are significant contributors to DES

Access to food

Figure 2.2 Economic access to food

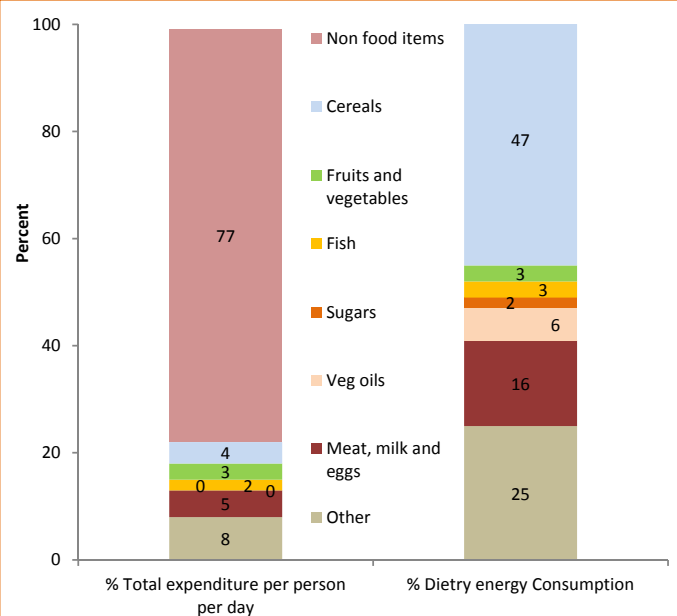
General and food inflation



Source: ILOSTAT Database Consumer Price Indices 2014

- In 2008, during the global food crisis, food prices increased significantly more than general prices and continued that trend through 2012
- In 2011:
- Families generally spent more than 23% of their income on food
- While cereals contributed 47% of food intake, they only affected 4% of food expenditure at household level

Figure 2.3 Share of food expenditure (2011)



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



Food Utilization

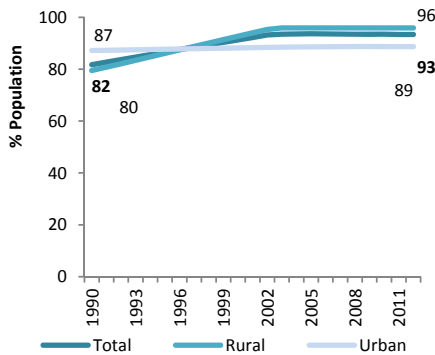
Food utilization refers both to household preparation practices of foods, which influence nutrient content of consumed foods, and to the absorption of nutrients by the human body after consumption. Nutrient absorption in the gut is strongly influenced by health status, particularly the presence of diarrhoea. Hygienic environmental conditions related to improved water and sanitation are important determinants of health and infection incidence and prevalence. In Thailand, improved water and sanitation conditions have been achieved during the past 20 years.

Water and Sanitation

Figure 3.1 Access to Improved Sanitation

From 1990 to 2012:

- Access to improved sanitation increased 14% in 22 years
- Disparities between rural and urban areas have been reversed; access is more frequent in rural than in urban areas
- 11% of houses in urban areas do not have proper sanitation

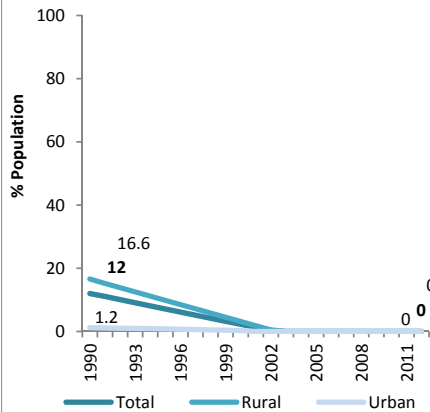


Source: WHO-UNICEF Joint Monitoring Programme, 2014

Figure 3.2 Open Defecation

From 1990 to 2012:

- No longer a development issue

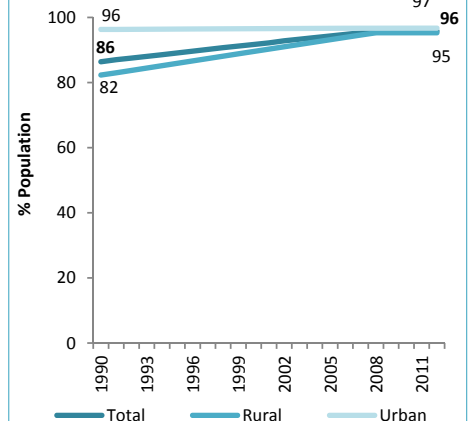


Source: WHO-UNICEF Joint Monitoring Programme, 2014

Figure 3.3 Access to Improved Water Sources

From 1990 to 2012:

- Disparities between urban and rural areas in access to improved water sources have essentially been solved
- At least 96% 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, food production and consumption.

Figure 3.4 Diarrhoea

- Diarrhoea in young children is not a public health concern in any of the wealth quintiles.



Source: THA_MICS 2012

Management of Diarrhoea (Table 3.1)

Zinc

Share of children under age 5 with diarrhoea receiving zinc treatment

Existing policy framework

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

Source:



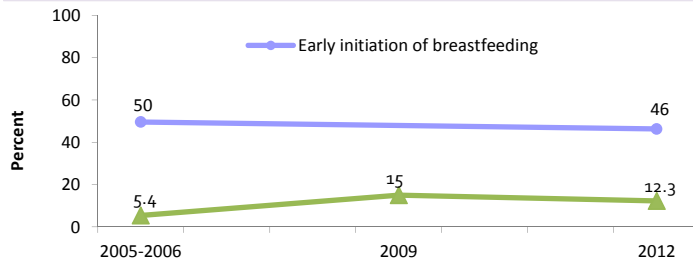
Food Utilization

Nutrition and Health

Figure 3.5 Exclusive Breastfeeding

- Early initiation of breastfeeding is correlated with lower infant mortality and relatively prolonged breastfeeding. It has decreased to 46% in 2012 from 50% in 2005. (Remained far from optimal)

Exclusive breastfeeding was only 12% in 2012, a very poor situation

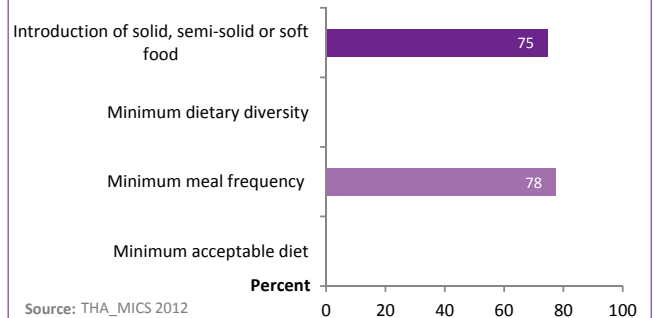


Source: Thailand MICS 2012

Figure 3.6 Complementary Feeding

- Introduction of complementary feeding is timely for 3 out of 4 children

- Minimum meal frequency is also met by 78% of children



Source: THA_MICS 2012

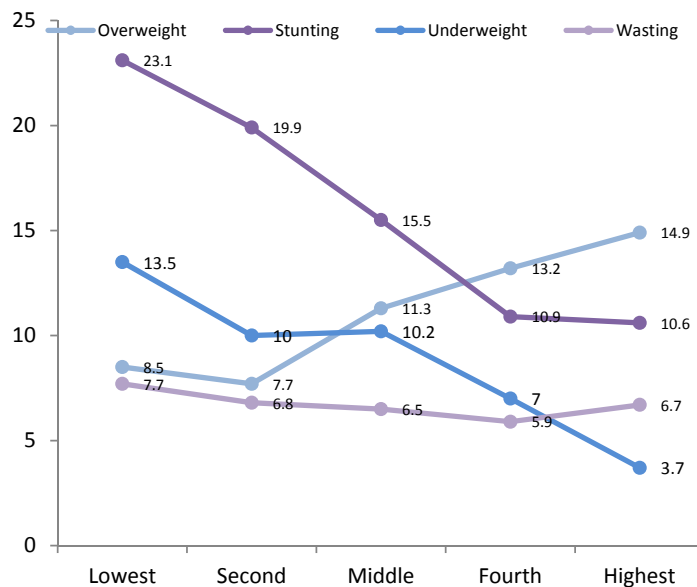
Figure 3.7 Duration of Breastfeeding

No Data

Figure 3.8 Child Malnutrition and Poverty

Underweight is 4 times more frequent in the lower wealth quintile than in the higher, and stunting is more than double in the poorest quintile than in the richest ones.

Overweight is nearly double in the richest quintile compared to the poorest ones.

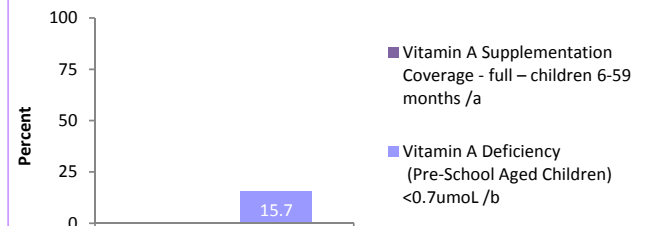


Source: Thailand MICS 2012

Micronutrient Status

Figure 3.9 Vitamin A

- Vitamin A deficiencies (16% 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.



* 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 adequately iodized salt (2012)/a	70.9 %
Iodine deficiency (Urinary Iodine Concentration <100µg/L) among school-age children (6-14 years old)/b	24.3 %
*Optimal UIC 100 - 199µg/L	

Source: a/ Thailand MICS 2012 b/ Fourth National Health Examination Survey, 2008-09



Enabling environment for Nutrition and Food security - Policy documents addressing nutrition issues	
1. Thailand Food Strategy 2010 Using a food-chain approach, the strategy addresses the continuum from agriculture to health	
2. Thailand National Food Committee Act of 2008 Act covers food security, food safety, food quality and food education: committee chaired by prime minister and meeting at least twice a year: 11 related ministries, 30 national agencies, 30 relevant Acts; developed and approved the Food Strategy	
3. National Food and Nutrition Plan Formulated to guarantee security and safety of food and nutrition through the establishment of the national food safety system. Policies focusing on the management of food system and food safety supervised by the newly established National Food Committee	
4. Improving Nutritional Care: A Joint Action Plan from the Department of Health and Nutrition Summit stakeholders Monitoring by Nutrition Action Delivery Board http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_079931	

Nutrition related issues covered in these policies		Covered	Comments
Maternal and Child Undernutrition	Child undernutrition	yes	Only inpatient treatment of SAM
	Low Birth Weight	yes	
	Maternal undernutrition	yes	
Obesity and diet related NCDs	Child obesity	both	
	Adult obesity		
	Diet related NCDs	yes	
Infant and Young Child Nutrition	Breastfeeding	yes	Voluntary agreement between government and business companies on adherence to Int'l Code on BMS; currently extensive review on BMS Code legislation to strengthen the Code
	Complementary feeding	?	
	Int'l Code of Marketing of BMS	yes	
Vitamins and Minerals	Supplementation: Vitamin A children/women	?	Iron (and/or folate) supplementation in pregnant and lactating women; weekly dose of iron supplementation in children aged 6 months- 5 years old, and in school aged children 6-14 years old. Iodine supplementation in pregnant and lactating women (for 6 months after delivery).
	Iron Folate children/women	yes	
	Zinc children	?	
	Other vitamins & min child/women	yes	
	Food fortification	yes	Iodization of salt, fish sauce, soya sauce and salt brine made mandatory in 2011
Underlying and contextual factors	Food Safety	yes	Policies promote a multi-sectorial approach to nutrition Payment after first 45 days is 50%; National Health Assembly approved maternity leave period to be doubled to 6 months, but legislation is pending. No provisions for nursing breaks or childcare after return to work.
	Food security	yes	
	Food Aid	?	
	Nutrition and Infection	?	
	Gender	?	
	Maternal leave	12 weeks	

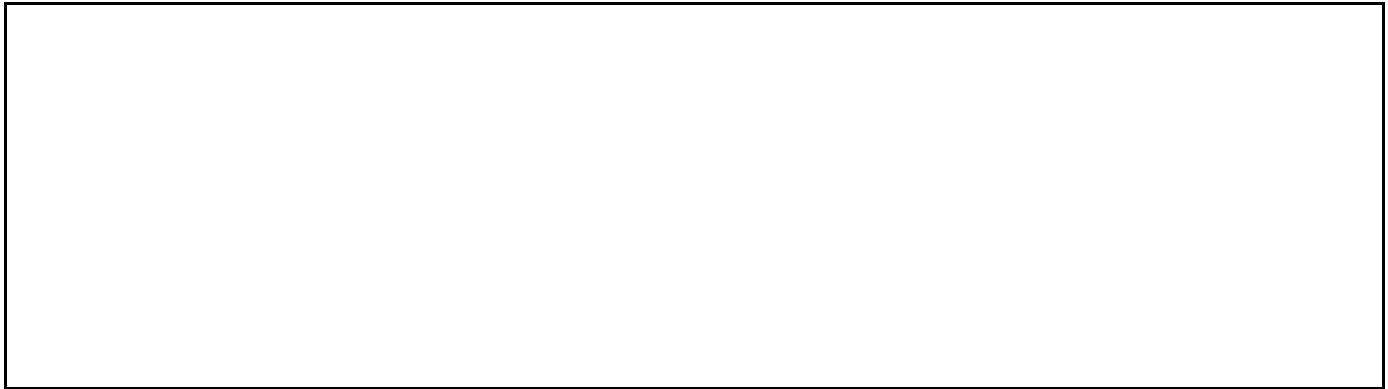
Social Protection policies or legislation including food or nutrition component	
1. Five-Year Social Welfare Strategies (2007-2011) The ultimate goal is to lead the country to balanced and sustainable development. The Second Strategic Plan (2012-2016) remains to be approved at the time of research; it seeks to empower society and expand the country's social security system to cover all groups of Thai people, especially those in the non-formal sector groups of Thai people, especially those in the non-formal sector	
2. Social Welfare Promotion Act 2003 (revised 2007)	
Food safety policies or legislation	
1. Food Act (B.E. 2522) 1979 Minister of Public Health is designated by law to be in charge of the execution, specifically the Food and Drug Administration and the Provincial Offices of Public Health are responsible for legal food control operations; Act covers matters relative to food safety and hygiene, food production, trade in food, and there administration	
Other policies addressing food security	
1. Thailand Food Strategy 2010 Using a food chain approach the strategy address the continuum from agriculture to health...	
2. Thailand National Food Committee Act of 2008 Act covers food security, food safety, food quality and food education: committee chaired by prime minister and meeting at least twice a year: 11 related ministries, 30 national agencies, 30 relevant Acts; developed and approved the Food Strategy	



Thailand - Food and Nutrition Security Profiles



Policy Table - 2



Demographic Indicators (Table - 5.1)		Year	Economic Indicators (Table - 5.3)		Year	
Population size (thousands) /a	66,785	2012	GDP annual growth rate /c	6.49 %	2012	
Average annual population growth/a	0.31 %	2012	GDP per capita (PPP) (constant 2011 international dollars) /c	13,586	2012	
Proportion of population urbanised/c	34.5 %	2012				
Number of children <5 years (thousand)	3,730	2012	Gini index /c (100= complete inequality; 0= complete equality)	39.37	2010	
Education level of mothers of under-fives: None (%) /f	4	2012		40.02	2009	
Life expectancy at birth (Years) /c	Male	71	2012	Unemployment rate /c	0.69 %	2012
	Female	77.6	2012			
Agriculture population density(people/ ha of arable land /b)	1.5	2006-2008	Population below US \$ 1.25 (PPP) per day /c (%)	0.38	2010	
Employment in agriculture sector (% of total employment) /c	39.6 %	2012	Poverty gap ratio /e	2	2009	
Women employed in agriculture sector (% of total female employment) /c	37.8 %	2012	Income share held by households /c	Poorest 20%	6.76 %	2010
Adolescents (Table - 5.2)				Year	Richest 20%	46.67 %
Adolescent birth rate (number of births per 1,000 adolescent girls aged 15-19) /a	41	2012	Sources: a/ World Bank Health Nutrition and Population Statistics 2013 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/ Thailand Multiple Indicator Cluster Survey 2012			
Adolescent girls aged 15-19 currently married or in union /d	14.6 %	2008-2012				
Women aged 20-24 who gave birth before age 18 /d (%)	47	2008-2011				

The information included in this Food Security and Nutrition Security 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



World Health Organization