

Role of the Milling Industry in Public Health and National Development









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WE CAN
END POVERTY
2015 MILLENNIUM
DEVELOPMENT
GOALS



MILLENNIUM DEVELOPMENT GOALS	
	End Poverty and Hunger
	Universal Education
	Gender Equality
	Child Health
	Maternal Health
	Combat HIV/AIDS
	Environmental Sustainability
	Global Partnership

Asia: unprecedented progress and development

- Strong economic recovery since financial crisis
- Education achievements
- Good communication
- New technologies
- Opening up of rural markets
- Increased purchasing power

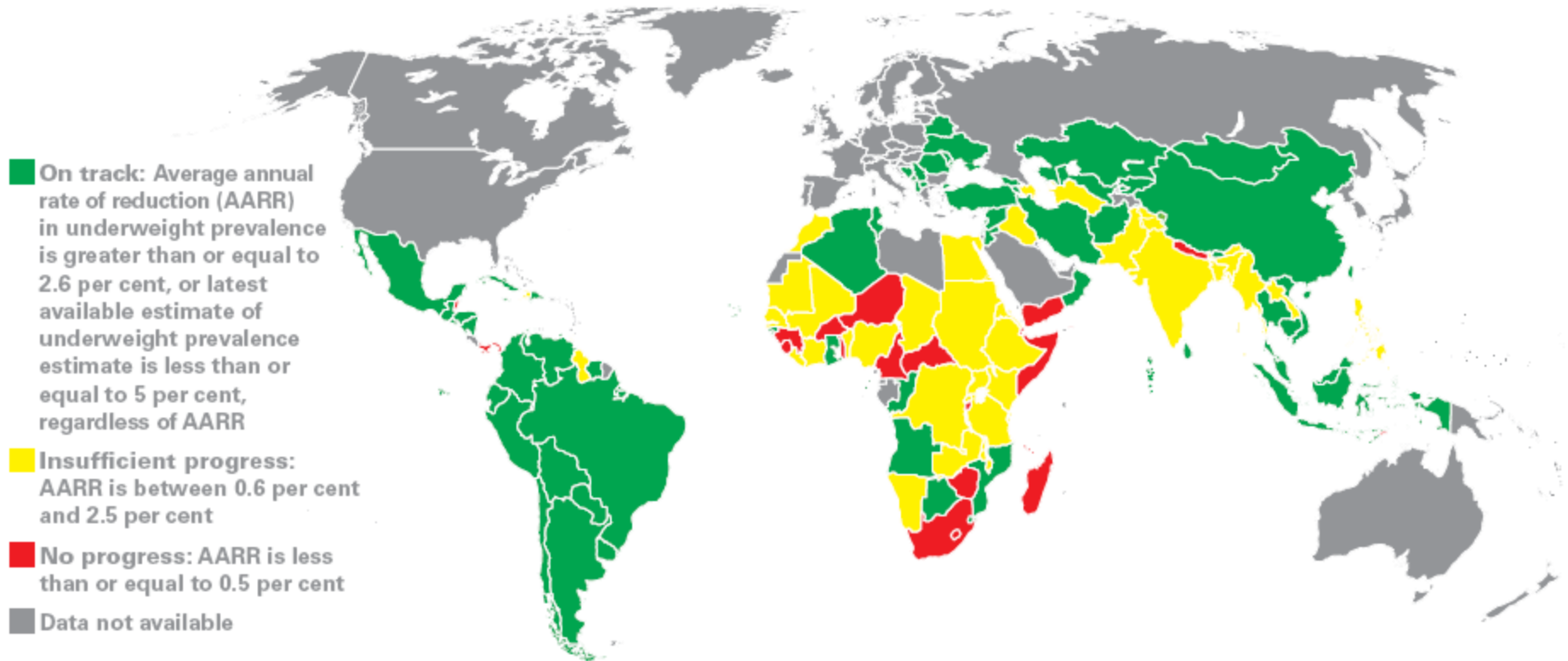


However.....

- There are MDGs in which there has been slower progress:
 - Child mortality
 - HIV/AIDS
 - Maternal mortality shows little progress on aggregate
 - Gender equality
 - Environmental stability (water and sanitation, deforestation, unplanned urbanization)
- Economic development is unequal
- Progress in improving child nutrition is still unacceptably low

Several countries in Asia are not achieving the goal for hunger.

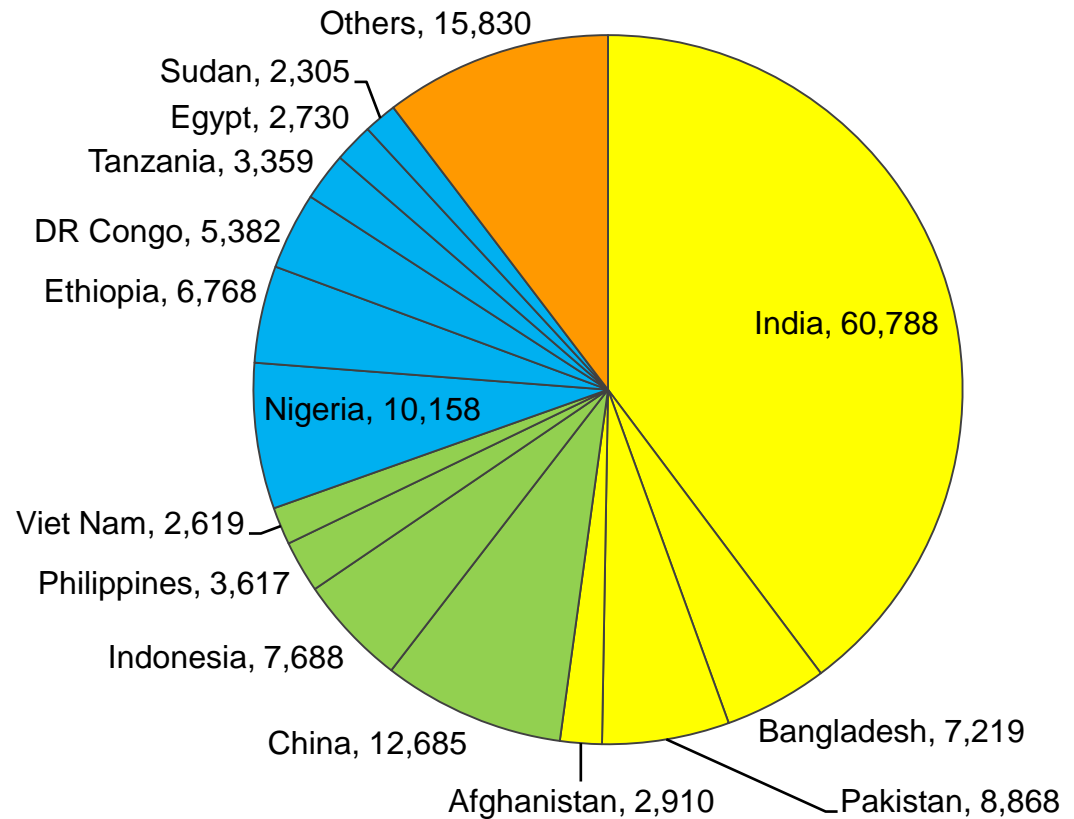
Progress is insufficient to meet the MDG target in 34 countries, and 20 countries have made no progress



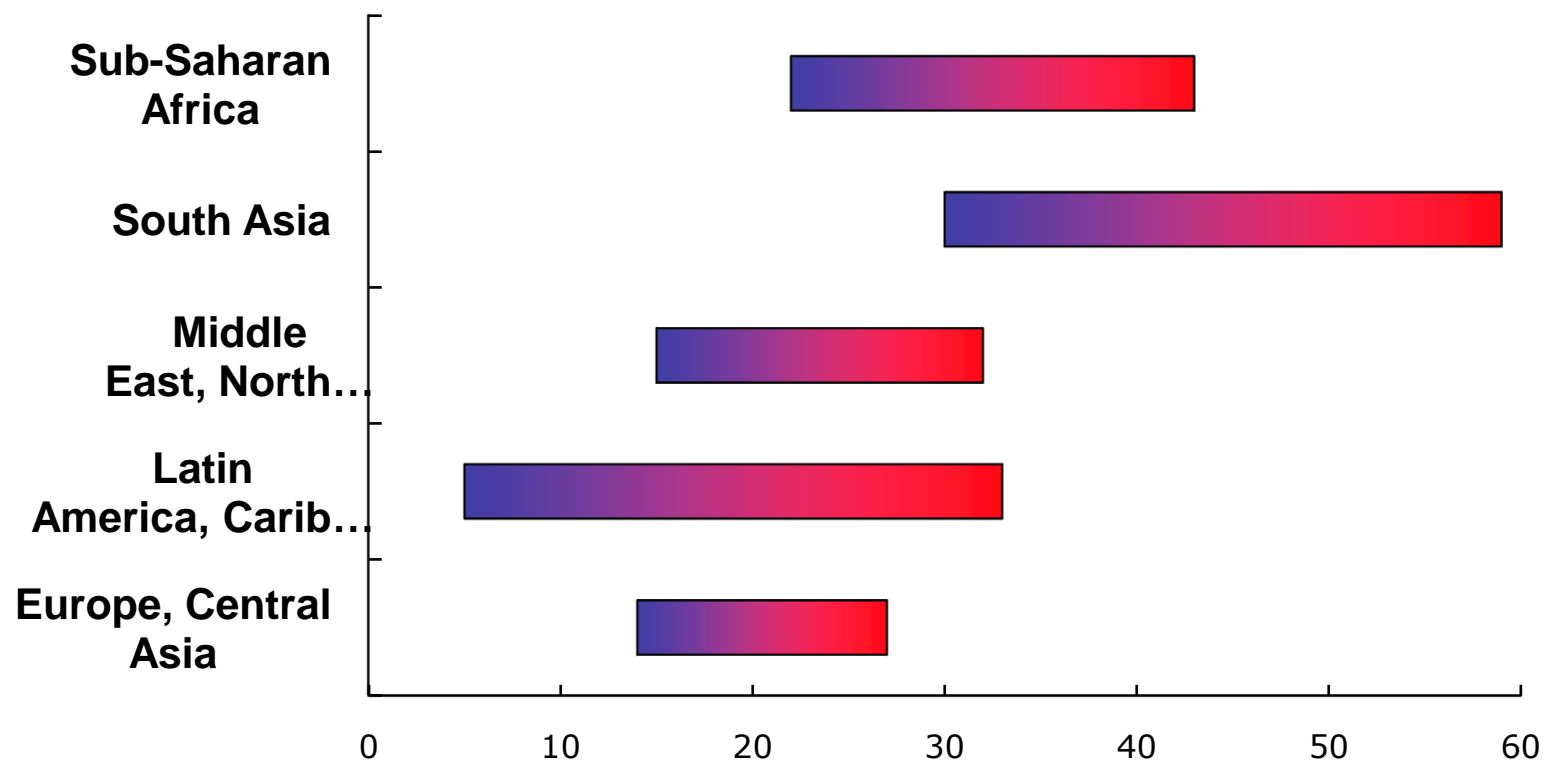
Undernutrition: a critical, outstanding problem

- 195.1 million children in the developing world are stunted
- Almost $\frac{3}{4}$ are in Asia
- Majority of these are in countries represented here today

Number of Children Stunted (thousands)



Equity Gaps in Undernutrition (Stunting) Prevalence



Prevalence gap between the poorest (red) and richest (blue) quintiles (%)

Undernutrition and Vitamin and Mineral Deficiencies

- Poor growth (underweight & stunting) is a measure of ‘visible’ undernutrition
- Additional dimension of *hidden hunger* – vitamin and mineral deficiencies
- Co-exist with and contribute to poor growth
- In addition, a major cause of mortality, illness and loss of intellectual capacity.

The continued existence of VMDs is impacting upon global social and economic development

Vitamin A deficiency is contributing to 6% of child deaths

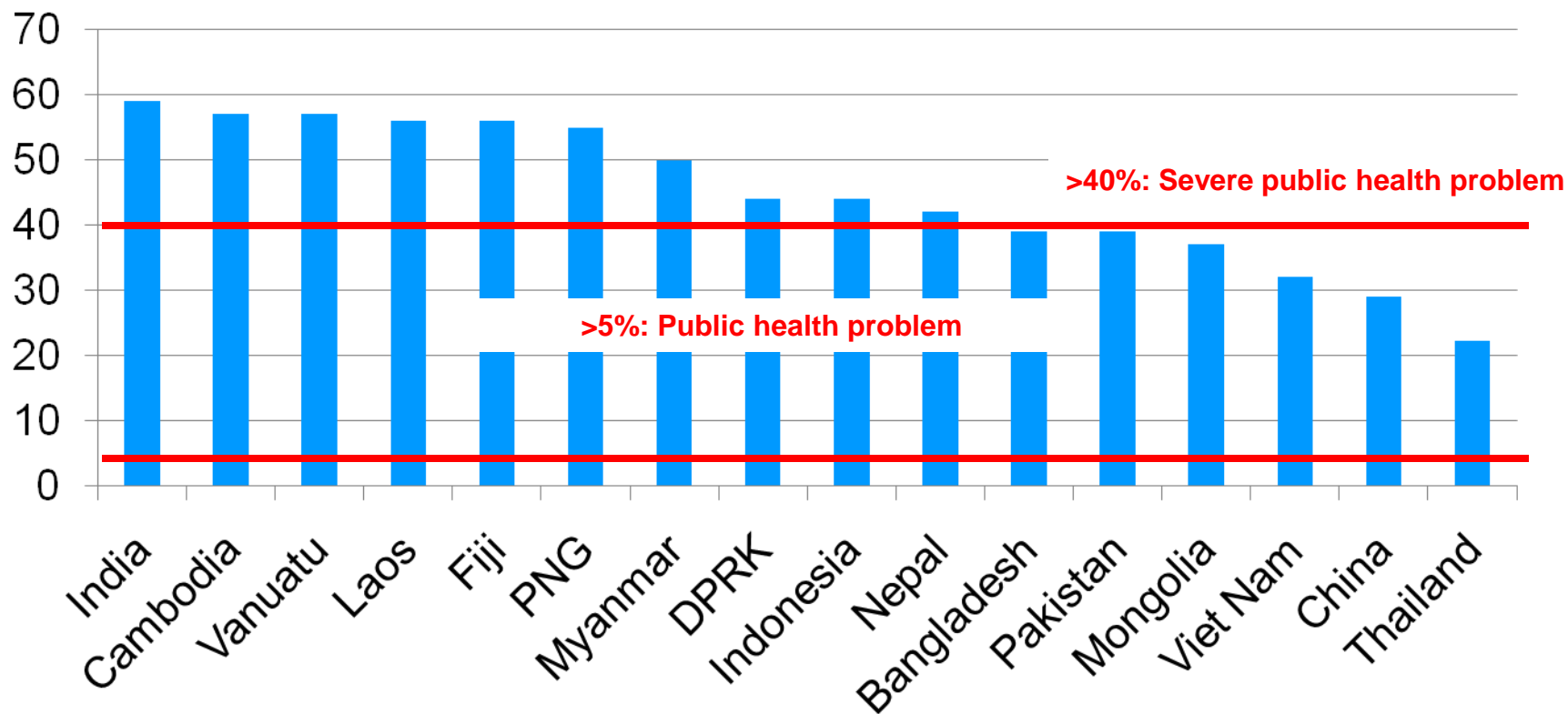
41 million newborns remain unprotected from iodine deficiency

240,000 CHILDREN ARE BEING BORN WITH PREVENTABLE NEURAL TUBE DEFECTS

...and countries are losing about 1-3% of their GDP



Prevalence of anaemia in pregnant women

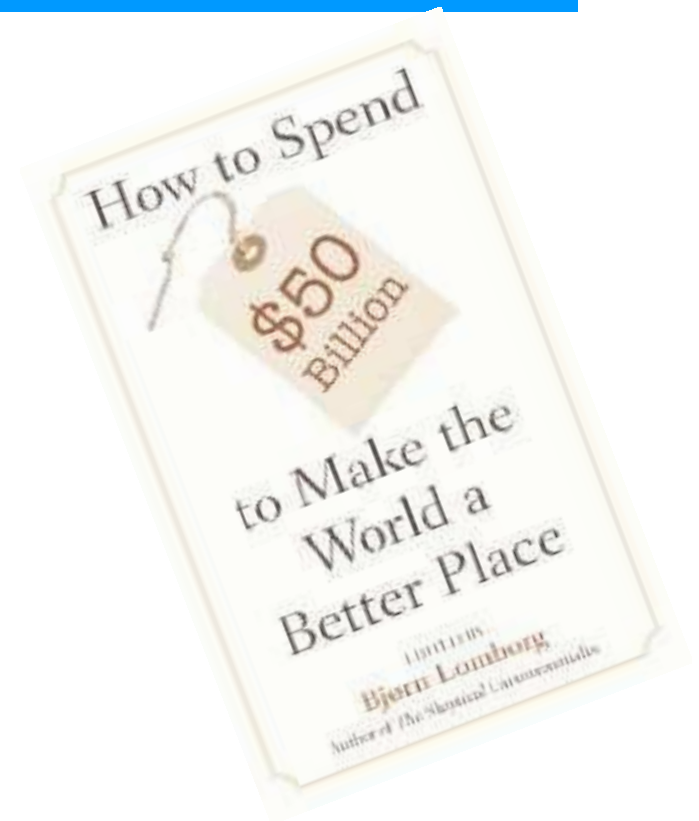


How VMDs constrain progress towards the MDGs

1. Eradicate extreme hunger and poverty	Erodes human capital through effects on cognitive and physical development, and reduces productivity
2. Achieve universal primary education	Constrains cognitive development which affects attendance and performance
3. Promote gender equality and empower women	Dis-empowers women more than men
4. Reduce child mortality	Underlying cause and contributing factor for much of child mortality
5. Improve maternal health	Contributes to several causes of maternal morbidity and mortality
6. Combat HIV/AIDS, malaria and other diseases	Contributes to susceptibility, increases severity and accelerates progression

Prioritizing Development Challenges by Economic Criteria

Copenhagen Consensus: 10 Global Development Challenges Considered by Panel of Nobel Prize Winning Economists



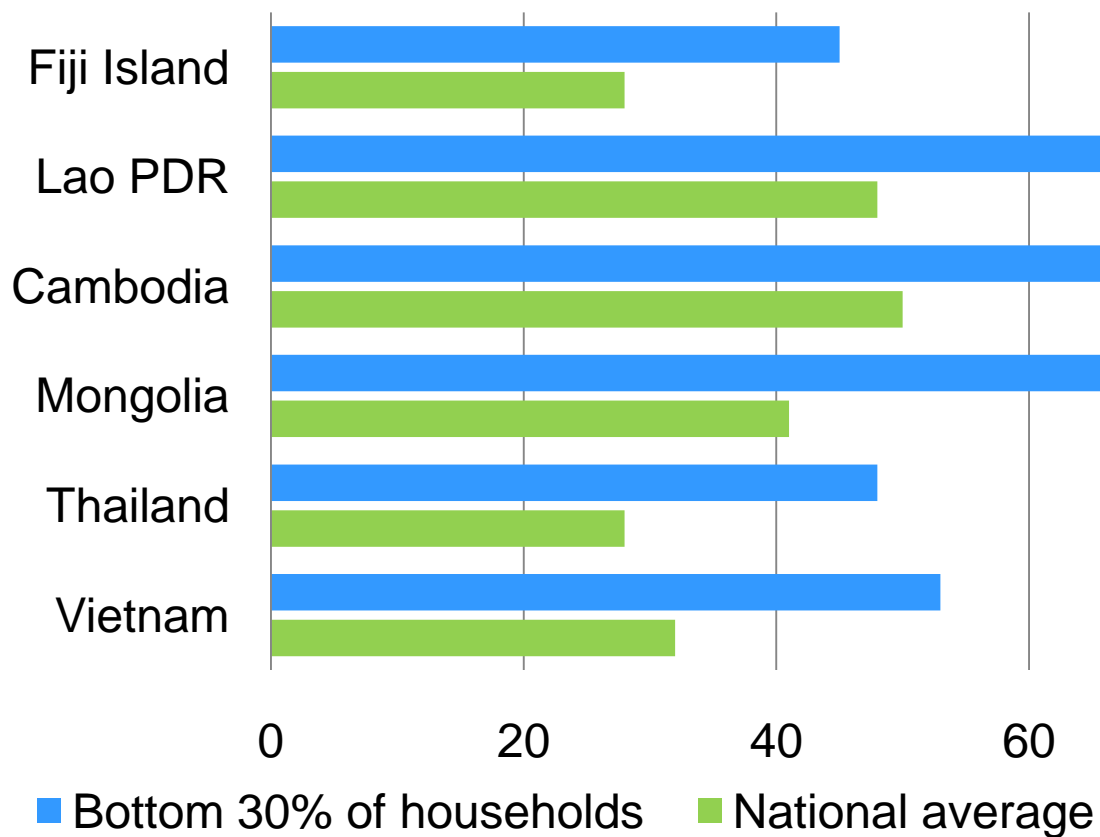
The Copenhagen Consensus: High Benefit Cost Ratio

	Solution	Challenge
1	Micronutrient supplements for children (A & Zn)	Malnutrition
2	The Doha development agenda	Trade
3	Micronutrient fortification	Malnutrition
4	Expanded immunization coverage for children	Diseases
5	Biofortification	Malnutrition
6	Deworming, other nutrition programs in school	Malnutrition
7	Lowering the price of schooling	Education
8	Increase and improve girl's schooling	Women
9	Community-based nutrition programs	Malnutrition

Providing vitamins and minerals... through food fortification

- Fortification of staple foods and condiments provides a way of providing a majority of the population with increased intake
- The most **cost-effective** way of providing micronutrients
- Technology is simple
- Cost of fortificants is minimal
- Steadily expanding consumption of centrally-processed foods such as flour, oil, sugar, condiments (growing urban population and reaching wider rural markets)

Percentage of Household Expenditure on Food



Food fortification in the Asia region



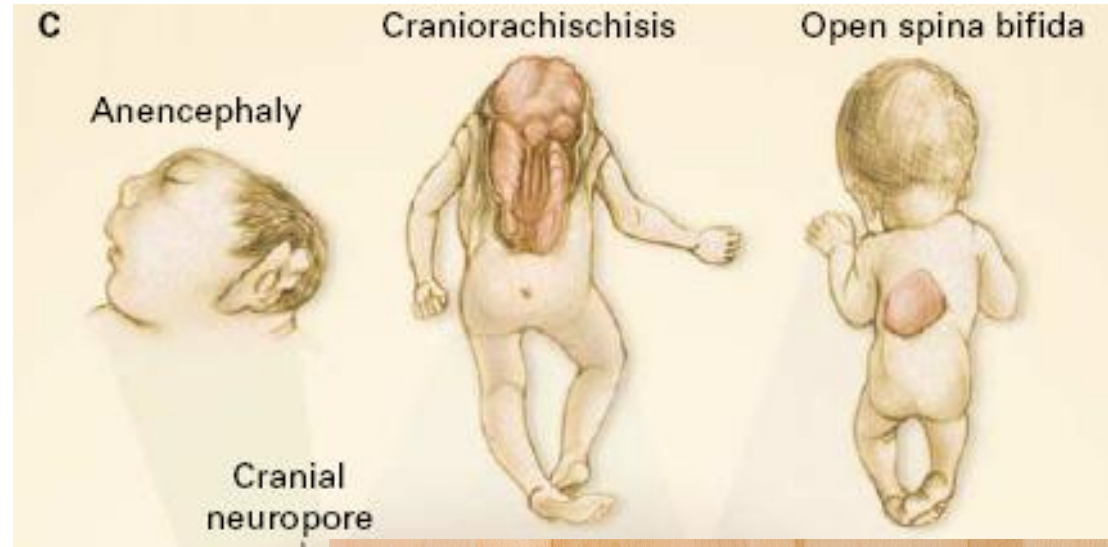
Country	Mandatory salt iodization	Mandatory wheat flour fortification	Other foods being fortified (M/V)
China	Yes	No	Soya sauce
Indonesia	Yes	Yes	Oil, rice, sugar
Philippines	Yes	Yes	Oil, rice, sugar
Vietnam	Yes	No*	Fish sauce
Bangladesh	Yes	No	--
India	Yes	No**	--
Nepal	Yes	No*	--
Sri Lanka	Yes	No*	-

*under consideration

** several states

M/V = mandatory/voluntary

Flour Fortification in the US



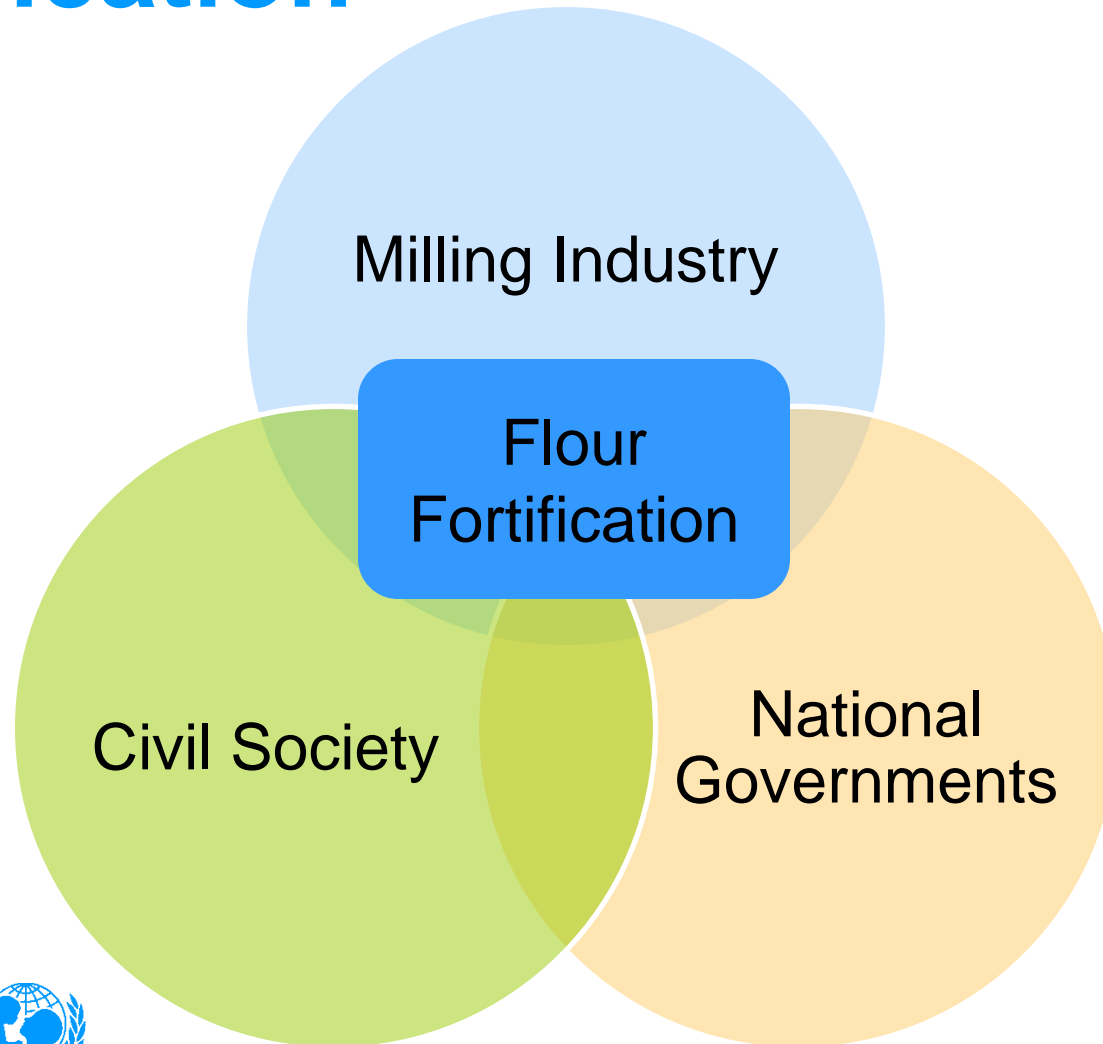
Despite extensive education since 1992 and high awareness of folic acid (81%), only 40% of women took supplements in 2007.



South Africa: Decline in NTDs with folic acid fortification

- Folic acid fortification of wheat flour and maize meal started Oct 2003
- Baseline: Jan 03-June 04. Endline: Oct 04-June 05
 - Decline of 30.5% in NTDs
 - Spina bifida decline: 41.6%
 - Anencephaly decline: 10.9%
 - Oro-facial decline: 5.7% (NS)
 - Decline in NTD perinatal deaths: 65.9%
 - Decline in NTD infant mortality: 38.8%
 - Cost benefit ratio was 46:1

A Partnership for Flour Fortification



Why now?

- Nutrition, in particular anaemia, remains an un-addressed issue for the region
- Impacts upon social and economic development are significant
- The solutions are simple, highly cost-effective and proven
- Industry is capable

WHY NOT?



Preventing undernutrition, including vitamin and mineral deficiencies will contribute to further social and economic development

