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Conclusion



Lessons

Nutrition efforts should be appropriate to the level of nutrition risk and the capacity of the government and other related stakeholders in the country involved. Thus, it is important to (i) collect geographic and socioeconomic data on distribution of malnutrition and micronutrient malnutrition risks prior to developing the appropriate mix of effective nutrition interventions; (ii) confirm that reliable baseline information exists; and (iii) make certain that periodic assessments are conducted for evidence-based planning, such as regularly updating information on childhood population nutrition and micronutrient status. Improving the monitoring and risk management capacity of the participating DMCs allows governments to make managerial decisions that enable increased coverage and sharper focus on delivery of fortified foods consumed by the poor. Identifying new technologies, and facilitating transfer of these technologies to governments, NGOs, the food industry, and consumer groups, thus facilitating resources and synergies of the public-private sector and civil society, is essential to ensure successful and sustainable fortification projects. All of the above considerations are strengths of TA 9005-REG, made possible because of strong ownership and provision of investment for pilot testing and equipment.

ADB can play the role of a catalyst, as shown by (i) TA 5944-REG, where DMCs have received support from various funding agencies to implement their fortification CIPs developed by the RETA, and by (ii) TA 9005-REG in mobilizing other funding agency assistance for nutrition and food fortification in ACT.

The RETAs offered to pursue what was considered as the best, most cost-effective nutrition intervention rather than determination of what mix of activities was the most appropriate for a specific country. There were large claims as to the effect of fortification without acknowledging the limitations in the efficiency of this approach because of dietary patterns and other local conditions. Although food fortification is a cost-effective approach, it is part of a comprehensive nutrition program, not a substitute for programs to promote strong household food security and good nutrition-related health behavior.

Fortification has been promoted as the most cost-effective nutrition intervention, and one having the ability to improve GDP growth. However, in most areas, particularly those with the largest risk of micronutrient malnutrition, the majority of the high-risk population (the poor) rarely consumes processed foods suitable for fortification.

While fortification holds great promise in improving regional nutrition status, it has to be combined with the development of other important household food security and community nutrition initiatives. Adequate information to develop effective fortification plans, which is often lacking in many DMCs, needs to be assured.

ADB should make more effort to include development partners, representatives of civil society, and the private sector in nutrition-related RETAs. For example, if further effort is needed on regional networking to support fortification, ADB could work closely with development partners, such as GAIN, MI, MOST, and UNICEF and include them not only in meetings, but also in the design and implementation of a RETA. In the case of household food security, the Food and Agriculture Organization of the United Nations, World Food Programme of the United Nations, and related agencies should also participate. Involvement of the World Health Organization is also essential, particularly during the design stage. In addition, RETAs should be more focused, as those with generalized themes appear to be less effective and less efficient.

Key Issues

The key issues are:

- (i) Some cost components in food fortification programs that support quality assurance and standardization are often forgotten when designing food fortification intervention. They include government regulatory costs and costs for development of enforcement mechanisms, installation of laboratories (particularly for quality control purposes), and training of personnel to ensure sustainable and good quality food fortification.
- (ii) RETA/TA that does not include small investment components appears to be less effective in ensuring sustainable impact.
- (iii) The nature of the general design of RETAs and the low participation of DMCs at the design stage have reduced the impact of RETAs in developing effective nutrition policy for the Asia and Pacific region.

Recommendations

ADB should include the costs that are often ignored in food fortification, as noted above, when designing food fortification interventions and when calculating the cost effectiveness of such interventions.

Modified (hybrid) modality RETA/TA that allows small investment components appears to have potential in enhancing effectiveness and ensuring sustainable impact of ADB's RETA/TA, which will also enable optimum utilization of the Eighth Replenishment of the Asian Development Fund (ADF IX) grants for TA. ADB should further explore the possibility of this modified (hybrid) modality for its RETA/TA in the ongoing effort to restructure its TA operations.

ADB RETAs should build ownership by tailoring nutrition interventions to local social conditions. RETAs need to be formulated and designed based on the expertise and orientation of the DMCs' local communities by using participatory approaches on problems definition and objective setting. This will also make it easier to achieve "buy-in" from potential stakeholders.

A coherent nutrition policy was expected to be adopted by ADB in 2002 as an impact of the nutrition RETAs, particularly TA 5824-REG. This did not materialize. A separate ADB policy for nutrition is not needed. Rather, the findings and outputs of the nutrition-related RETAs, and lessons from other ADB nutrition-related operations, could be useful inputs for a nutrition section in the updated ADB Policy for the Health Sector or the integrated Health, Nutrition, and Population Strategy planned for 2006.

ADB should continue playing the role of a catalyst in nutrition development efforts in the region.

Holistic solutions to poverty reduction that will correct underlying risks of poor nutrition should be promoted by supporting complementary activities for improved nutrition and empowerment of women in ADB operations.