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The Parliament of the Commonwealth of Australia

# Food for thought: improving health and nutrition in the Indo-Pacific region

**First report for the inquiry into development partnerships in agriculture and agribusiness in promoting prosperity, reducing poverty and enhancing stability in the Indo-Pacific region**

Joint Standing Committee on Foreign Affairs, Defence and Trade  
Inquiry of the Foreign Affairs and Aid Sub-Committee

May 2016  
Canberra

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# Contents

Foreword .....	vii
Membership of the Joint Standing Committee on Foreign Affairs, Defence and Trade .....	xi
Membership of the Foreign Affairs and Aid Sub-Committee.....	xiii
Terms of reference .....	xv
List of abbreviations .....	xvii
Glossary .....	xix
List of recommendations .....	xxiii
<b>1 Introduction .....</b>	<b>1</b>
Conduct of the inquiry.....	1
Focus of the first report.....	2
Inquiry evidence and stakeholder engagement .....	4
Structure of the first report .....	6
<b>2 Background .....</b>	<b>7</b>
Good nutrition as a human right.....	7
Nutrition definitions.....	9
Importance of good nutrition .....	9
Global trends.....	11
Global discussions .....	11
Global targets .....	12
Aid spending on nutrition.....	14
Australia's policy settings.....	15
Australian funded aid programs focused on nutrition.....	16
Nutrition-specific programs and partnerships .....	17
Nutrition-sensitive programs and partnerships .....	18

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<b>3</b>	<b>Nutrition and health: a looming crisis in the Pacific region.....</b>	<b>21</b>
	Malnutrition: global problem, Indo–Pacific dimensions.....	24
	Causes of malnutrition—a brief overview.....	26
	The high costs of malnutrition.....	31
	<b>Malnutrition in the Pacific.....</b>	<b>32</b>
	Dietary and lifestyle changes.....	35
	Educating for nutrition.....	40
	Committee comment.....	43
<b>4</b>	<b>Agriculture, nutrition and women.....</b>	<b>47</b>
	<b>Partnerships for food and nutrition security.....</b>	<b>48</b>
	The potential of nutrient fortified foods.....	51
	Diet diversification and ‘scaling up’.....	52
	Safe food storage and supply.....	55
	<b>Gender and nutrition.....</b>	<b>57</b>
	Empowering rural women for better nutrition.....	58
	Labour saving technology.....	63
	<b>Sustainable agriculture and aquaculture in the Pacific.....</b>	<b>64</b>
	Committee comment.....	67
<b>5</b>	<b>Future directions for nutrition security.....</b>	<b>71</b>
	<b>Prioritising child and maternal nutrition.....</b>	<b>71</b>
	Committee’s assessment.....	76
	<b>The role of innovation.....</b>	<b>77</b>
	Partnerships, approaches and funding modalities.....	78
	Policy environment.....	80
	Scientific and technological advances.....	83
	Committee comment.....	85
	Recommendations.....	90
	<b>Appendix A—Submissions list.....</b>	<b>93</b>
	<b>Appendix B—Exhibits list.....</b>	<b>97</b>
	<b>Appendix C—Witnesses at public hearings.....</b>	<b>101</b>

Appendix D—Answers to questions on notice .....105

Appendix E—Australia’s agriculture development partners.....107

**LIST OF TABLES**

Table 5.1 ODE Review: *A Window of Opportunity*—recommendations and DFAT’s responses . 73

**LIST OF FIGURES**

Case study 4.1 One Health partnership model—poultry in Tanzania and Zambia..... 54

Case study 4.2 Gender strategy for sustainable and resilient farming in the Gangetic Plains ..... 60

Case study 5.1 GAIN food fortification..... 84





## Foreword

Good nutrition is an essential foundation for a good life. Access to adequate food is also a fundamental human right. Yet malnutrition remains an immense global problem, despite the benefits of sustained economic growth in many parts of the world.

This is particularly the case in the Indo-Pacific region where there is much evidence of a perverse ‘double burden’ of malnutrition – a combination of both undernutrition and overnutrition. While children’s growth is stunted, the highest rates of obesity and related non-communicable diseases, such as diabetes and heart disease, often blight the same populations.

All too many people in the Indo-Pacific, especially the Pacific, are also eating the wrong type of foods – foods that are high in fat and salt but low in nutritional value.

The terms of reference for the inquiry were very broad, covering the role of development partnerships in agriculture and agribusiness in promoting sustainable economic growth, improving livelihoods and strengthening food and nutrition security in developing countries in the Indo-Pacific region.

The inquiry took evidence that the double burden of malnutrition in the region, and especially in Pacific Island countries, threatens the health of individuals and the growth of their economies.

Undernutrition is a severe problem in some of Australia’s nearest neighbours with stunting all too prevalent in Timor-Leste and Papua New Guinea. An obesity epidemic with some of the world’s highest rates of obesity and associated non-communicable diseases afflicts Pacific Island countries such as Tonga, Samoa and Fiji. For example, the Fiji Ministry of Health and Medical Services has reported that diabetes is Fiji’s second biggest killer, with one in three Fijians affected.<sup>1</sup>

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1 The Fiji Ministry of Health and Medical Services, ‘What is Diabetes?’ <[www.health.gov.fj/?page\\_id=377](http://www.health.gov.fj/?page_id=377)> viewed 2 May 2016.

At the Diabetes and Wellness conference held in Lami, Fiji, in August 2015 the increase in diabetes and other non-communicable diseases were recognised as being at 'almost epidemic levels', with a diabetes related amputation being carried out in Fiji every 12 hours.<sup>2</sup>

Higher incomes have not necessarily led to better nutrition. On the contrary, evidence was given that nutritional intake has deteriorated. Economic and social change has led to significant dietary change. Where men have migrated to urban jobs or left the country for other work, women often remain behind to carry an additional burden of work, and are taking on more responsibility for agricultural production to both feed their families and earn an income. Remittances allow the purchase of convenience foods. The erosion of sustainable local agriculture and fisheries industries have also contributed to poor nutrition amongst many of our Pacific neighbours. Cheap, imported high fat foods including such items as deep friend mutton flaps, turkey tails and necks, and spam are available, affordable and often preferred.

In urban areas, advertising for fast foods and snacks have accelerated the move away from traditional, locally produced fish and vegetables. Soft drinks and processed convenience foods, as pointed out in our evidence, are promoted in advertising and are associated with higher status consumption.

Children are especially affected by this malnutrition. Stunted children face a greater lifetime risk of chronic health problems, have lower educational prospects, and less chance of escaping poverty. Obesity is a major factor in the rise of non-communicable disease including diabetes and heart disease – medical problems that are already placing considerable strain on the modest health care budgets and services of Pacific Island countries.

Women's experience of malnutrition is significantly different to that of men. Culture can constrain women; in some cultures women are expected to eat what remains after men have eaten, and at times of menstruation they may be restricted in their diets or from food preparation generally, or from tending to food production. Malnourished mothers face higher rates of mortality and can be more susceptible to complications during childbirth. Malnourished mothers can produce malnourished babies. Before the age of two the damage caused by this malnourishment can be irreversible.

Many women lack control over their family budgets, do not own land and have little or no access to finance to start up or sustain a business. These practices can all compound the problem of malnutrition.

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2 The Fiji Ministry of Health and Medical Services, 'Health Ministry Continues to address Diabetes', Media Centre [August 2015] < [www.health.gov.fj/?p=4588](http://www.health.gov.fj/?p=4588) > viewed 2 May 2016.



The multiple factors causing malnutrition need to be properly understood, but it does require urgent and sustained action through multi-sectoral partnerships – in agriculture, education, and health – to reduce and address the impacts of both over and undernutrition.

In this First Report the Committee makes a range of recommendations aimed at increasing and improving Australian and regional efforts to address the double burden of malnutrition, with a focus on the Pacific including Timor-Leste and Papua New Guinea. The Committee recommends that Australian aid funding for nutrition-related programs should become a sharper focus in our Official Development Assistance.

At a most fundamental level, efforts to address the complex problems of malnutrition require sustained and shared political commitment and the Committee urges the Minister for Foreign Affairs and the Minister for International Development and the Pacific to make these issues a high priority in Australia's bilateral and regional dialogues, especially with Pacific Island countries, and the Pacific Islands Forum.

The Committee would like to thank all of the non-government organisations, academics and individuals for generously donating their time, effort and resources to make submissions and appear at public hearings or private briefings.

The Committee also thanks the Australian Government agencies, as well as the governments of other countries that provided submissions or gave evidence. The range of information, expertise and experience that was available to the Committee was invaluable to the production of this report.

As Chair of the Foreign Affairs and Aid Sub-Committee, I would also like to thank my colleagues on the Committee who have worked collaboratively on, and engaged closely with, this inquiry.

The Hon Dr Sharman Stone MP  
Chair  
Foreign Affairs and Aid Sub-Committee





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## Terms of reference

The Committee will inquire into and report on the role of current and potential development partnerships in the food and agriculture sector with a range of stakeholders – including from business, civil society, the research and academic community, industry bodies and governments – in promoting prosperity, reducing poverty, and enhancing stability in the Indo-Pacific region. The inquiry will take into account the results of previous related inquiries, and will have particular regard to:

- Australia's contribution and achievements to date in catalysing sustainable economic growth, improving livelihoods and strengthening food and nutrition security through partnerships in the agriculture and food sector in developing countries in the region
  - including the extent to which these efforts support our national interest
- The particular roles of agricultural innovation in supporting agricultural development and inclusive economic growth
- Actions and approaches to agricultural development in the region that would promote gender equity, women's economic empowerment and health
- The current and potential role of the private sector, including small developing-country entrepreneurs and larger Australian and international businesses, in driving inclusive and sustainable development in Indo-Pacific agriculture and food value chains
- Innovative modalities and practices that would enhance the contribution of all relevant stakeholders in supporting agricultural development, better nutrition and inclusive economic growth in the Indo-Pacific region







## List of abbreviations

ACIAR	Australian Centre for International Agricultural Research Centre
ADB	Asian Development Bank
ANCP	Australian NGO Co-operation Program
AUD	Australian Dollar
BMI	Body Mass Index
CSIRO	Commonwealth Scientific and Industrial Research Organisation
DAC	OECD Development Assistance Committee
DAWR	Department of Water and Resources
DFAT	Department of Foreign Affairs and Trade
DFID	UK Department for International Development
DoH	Department of Health
EU	European Union
FAO	Food and Agriculture Organization
IFPRI	International Food Policy Research Institute
JSCFADT	Joint Standing Committee on Foreign Affairs, Defence and Trade
MAF	Timor-Leste Ministry of Agriculture and Fisheries
GAIN	Global Alliance on Improved Nutrition

MDGs	Millennium Development Goals
ODA	Official Development Assistance
NCDs	Non-communicable diseases
NGO	Non-government organisation
ODE	Office of Development Effectiveness
OECD	Organization for Economic Co-operation and Development
PICs	Pacific Island Countries
PIF	Pacific Island Forum
PM&C	Department of Prime Minister and Cabinet
PNG	Papua New Guinea
SDGs	Sustainable Development Goals
SMEs	Small and Medium Enterprises
SPC	Secretariat of the Pacific Community
SUN	Scaling Up Nutrition Movement
TB	Tuberculosis
UK	United Kingdom
UN	United Nations
UNICEF	United Nations Children's Fund
US	United States
USAID	United States Agency for International Development
USD	United States Dollar
WHO	World Health Organization



## Glossary<sup>3</sup>

**Body Mass Index (BMI):** The ratio is obtained by dividing the weight in kilograms by the square of the height in metres.

**Food fortification:** The addition of one (or more) essential nutrient(s) to a food whether or not it is normally contained in the food, for the purpose of preventing or correcting a deficiency of one or more nutrients in the population or specific population groups.

**Macronutrients:** The proteins, carbohydrates and fats that are available to be used for energy. They are measured in grams.

**Malnutrition:** An abnormal physiological condition caused by inadequate, unbalanced or excessive consumption of macronutrients and/or micronutrients. Malnutrition includes undernutrition and overnutrition as well as micronutrient deficiencies.

**Micronutrients:** Vitamins, minerals and certain other substances that are required by the body in small amounts. They are measured in milligrams or micrograms.

**Micronutrient deficiency:** Lack of vitamins, minerals and/or trace elements required in small amounts which are essential for the proper functioning, growth and metabolism of a living organism.

**Overnourishment:** Food intake that is continuously in excess of dietary energy requirements.

**Overnutrition:** A result of excessive food intake relative to dietary nutrient requirements.

**Overweight and obesity:** Body weight that is above normal for height as a result of an excessive accumulation of fat. It is usually a manifestation of

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3 Food and Agriculture Organization (FAO), 'FAO Term Portal' <[www.fao.org/faoterm/en/](http://www.fao.org/faoterm/en/)> viewed 15 April 2016.

overnourishment. Overweight is defined as a BMI of more than 25 but less than 30 and obesity as a BMI of 30 or more.

**Stunting:** Low height for age, reflecting a past episode or episodes of sustained undernutrition.

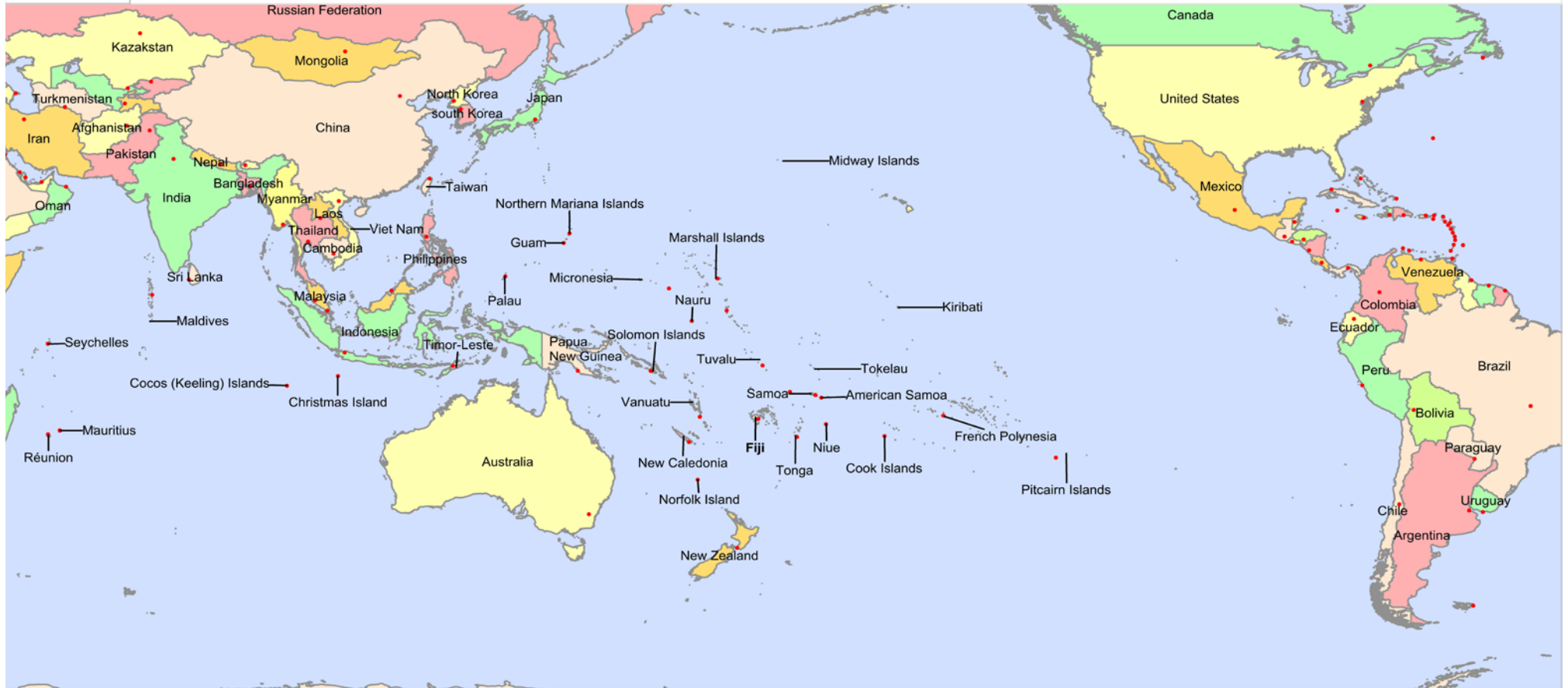
**Undernourishment:** A condition, lasting for at least one year, of inability to acquire enough food, defined as a level of food intake insufficient to meet dietary energy requirements. For the purposes of this report, hunger was defined as being synonymous with chronic undernourishment.

**Undernutrition:** The outcome of undernourishment, and/or poor absorption and/or poor biological use of nutrients consumed as a result of repeated infectious disease. It includes being underweight for one's age, too short for one's age (stunted), dangerously thin for one's height (wasted) and deficient in vitamins and minerals (micronutrient malnutrition).

**Underweight:** Low weight for age in children, and BMI of less than 18.5 in adults, reflecting a current condition resulting from inadequate food intake, past episodes of undernutrition or poor health conditions.

**Wasting:** Low weight for height, generally the result of weight loss associated with a recent period of starvation or disease.

# INDO - PACIFIC REGION



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# List of recommendations

## 5 Future directions for nutrition security

### Recommendation 1

The Committee recommends that the Australian Government:

- develop a stronger regional policy and funding focus under Australia's Official Development Assistance program on both nutrition-specific and nutrition-sensitive activities; and
- consider announcing Australia's new Indo-Pacific nutrition policy and funding focus at the forthcoming Nutrition for Growth Summit, to be held in Rio de Janeiro in the second half of 2016.

### Recommendation 2

The Committee recommends that the Australian Government:

- continue to support and scale up aid innovations aimed at improving nutrition outcomes, including through the Department of Foreign Affairs and Trade's innovationXchange;
- give priority support to innovative aid partnerships and approaches that leverage private sector finance and expertise in support of improved nutrition outcomes; and
- focus the above efforts, in particular, on finding solutions that help address the 'double burden' of malnutrition and obesity in the Pacific region.

### Recommendation 3

The Committee recommends that the Australian Government commit to strengthening existing whole-of-government co-ordination on nutrition, including through:

- designating a central Australian Government 'DFAT point of contact' for all of Australia's international engagement on nutrition (including through Australia's aid program); and
- developing an intersectional strategy (e.g. engaging education, agriculture, health, women's empowerment, climate change, and credit support) to guide all of Australia's international policy and program engagement on nutrition, including both nutrition-specific and nutrition-sensitive investments under the Australian aid program.

### Recommendation 4

The Committee recommends that the Australian Government consider taking a leadership role in co-ordinating an effective donor response to the specific challenge posed by the health 'double burden' in the Pacific region, including through:

- developing strategies to combat malnutrition – both undernutrition and overnutrition – a high priority for the Minister for Foreign Affairs and the Minister for International Development and the Pacific, in particular through regional fora such as the Pacific Islands Forum;
- lobbying strongly for Pacific Island countries to join the Scaling Up Nutrition Movement, to help ensure that the region's 'double burden' becomes a priority in its forward agenda;
- commissioning a major 'stocktake' of nutrition interventions that are currently being pursued by lead aid donors and relevant international organisations in the Pacific region, with a view to assessing how future co-ordination and collaboration on nutrition issues between these key players could be improved and expanded;
- supporting innovative and effective public health education campaigns in Pacific Island countries including creative engagement of local media, to promote healthy dietary choices; and
- strengthening the evidence base to inform future policymaking by:
  - ⇒ driving regional efforts to improve the availability and use of reliable and timely data on relevant nutrition indicators;
  - ⇒ working to strengthen nutrition data collection and analytical capacity among partner countries in the region; and



⇒ encouraging and supporting researchers across a range of disciplines to focus more on nutrition issues in the Pacific region.

