

## National Nutrition Strategy 2012-2021

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Yes

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2012

**Type of policy:**

Comprehensive national nutrition policy, strategy or plan

## National Nutrition Strategy 2012-2021

### Goals

**Goals, objectives or targets related to nutrition:**

- The overall purpose of this strategy is to define a framework through which available technical, human, and financial resources may be mobilized in order to ensure the health and nutrition status of all Iraqi population is significantly improved.
- The overall goal of the nutrition strategy for Iraq is to improve the nutritional status of Iraqi people throughout the life cycle from 2012 to 2021.
- **Objectives**
- **National Polices/ strategies/ legislations reviewed and updated.**
- **Nutrition professional education specialty established in schools and universities in 2016**
- **Prevalence of wasting and stunting reduced among children under five years of age.**
- **Prevalence of overweight and obesity reduced among all age groups.**
- **Nutritional health promotion and counseling provided to people at community level.**
- **Prevalence of micronutrient deficiencies reduced.**
- **Safe food availability assured for all age groups at any time.**
- **Adequate food available, accessible and utilized for all age groups at any time**
- **Monitoring, evaluation and surveillance plan and response developed and adopted.**

### Strategies

**Strategies and activities related to nutrition:**

*Objective (1): To increase Political commitment and inter-sectoral collaboration, and in line with the National Developmental Strategy.*

1. Establishing inter-sectoral coordination and collaboration mechanism at all levels.
2. Advocating political commitment to national nutrition programs.
3. Adequate budget for national nutrition programs available by 2012.
4. Adopting the recommendations of the regional nutrition strategy and the Infant and maternal nutrition resolution number World

*Objective (2): Policies/strategies/legislations reviewed and implemented.*

1. Strengthening technical and managerial capacities for nutrition programs staff at all levels
2. Reviewing the national food and nutrition related policies, laws, legislations, regulations and guidelines
3. Reviewing, Updating and implementing national food specifications to meet the international food safety standards of the Codex Alimentarius
4. Endorsing and implementing the international code for marketing breast milk substitutes
5. Advocating for nutrition friendly schools

*Objective (3): Nutrition professional education specialty established in schools and universities*

1. Establishing high level committee to identify gaps in nutrition curriculum
2. Reviewing and updating the nutrition curriculum

*Objective (4): To reduce the prevalence of wasting and stunting in children under five years of age.*

1. Promoting and supporting appropriate infant and young child feeding practices at health facilities and community levels
2. Strengthening and expanding the Baby Friendly Hospitals Initiatives (BFHI) and Primary Health Care Centres Initiatives.
3. Ensuring proper growth monitoring and nutritional assessment for under 5 years children in PHCCs and applying WHO Anthro program at the centres.
4. Conducting research/ studies and surveys to assess the nutritional status of children and women in the reproductive age.
5. Strengthening and expanding the Nutritional units at PHCCs and Nutrition Rehabilitation Centers services at hospitals.
6. Ensuring appropriate maternal nutritional health services throughout the life cycle.

*Objective (5): To reduce the prevalence of overweight and obesity among all age groups.*

1. Developing and implementing of national food-based dietary and physical activity guidelines
2. Encouraging schools to adopt healthy diet and physical activities in line with the national DPAS
3. Advocating for nutrition friendly school, promoting education in nutrition and promoting healthy option in canteens.
4. Engaging civil society organization and Private Sector by adopting the setting approach at school, workplace and the community.
5. Integrating DPAS into the functioning primary care health services

*Objective (6): Nutritional health promotion and counselling provided to people at community level.*

1. Establishing baseline data on overweight and obesity among population
2. Conducting KAP studies on dietary habits and healthy life style
3. Capacity building of health staff and social workers on nutritional counseling.
4. Developing and distributing IEC materials.
5. Capacity building of health staff on nutritional counselling for inpatient and outpatient

*Objective (7): To reduce the prevalence of micronutrients deficiencies.*

1. Promoting consumption of micronutrient rich foods for all age groups.
2. Scaling up fortification of basic foods with additional micronutrients.
3. Strengthening de-worming school children programs.
4. Strengthening micronutrients supplementation programs for targeted groups.
5. Raising community awareness on micronutrients.
6. Establishing national data base on micronutrients consumption patterns and micronutrients deficiency status.
7. Reviewing and developing guidelines / regulations for micronutrients marketing and advertising.

*Objective (8): Safe food availability assured for all age groups at any time.*

1. Reviewing food safety laws, regulations and legislations
2. building institutional capacities
3. Providing education to improve the use of safe food and promote hygienic practices

*Objective (9): Adequate food available, accessible and utilized for all age groups at any time.*

1. Reviewing/reforming the contents of the national food subsidy programs (PDS).
2. Distributing food basket to vulnerable groups
3. Scaling up school feeding program
4. Strengthening and improving the nutritional response to different kinds of emergency situations.

*Objective (10): Monitoring, evaluation and surveillance plan and response developed and adopted.*

1. Regular reviewing and reporting on the progress of implementing the national nutrition strategy plan of action
2. Strengthening and expanding the nutritional surveillance system
3. Conducting nutritional related researches, surveys and studies

## M&E Indicators

### M&E Indicators related to nutrition:

1. Political commitment and inter-sectoral collaboration increased in line with the National Developmental Strategy.

#### Indicators:

- National Nutrition Strategy and plan of action endorsed, adopted by the Government by 2012.
- National plan of action budgeted by the Government by 2013.

### 2. National Policies/ strategies/ legislations reviewed and updated.

#### Indicators:

- Number of Existing policies, strategies, laws and legislations reviewed and new policies, laws and legislations adopted in line with the national nutrition strategy by 2021.
- Number of international nutrition related treaties and conventions? reviewed and endorsed by Government

### 3. Nutrition professional education specialty established in schools and universities in 2016

- Number of nutritionist graduated

### 4. - Prevalence of wasting and stunting reduced among children under five years of age.

#### Indicators:

- Prevalence of stunting among children under five years of age reduced from 21.4% to less than 10% by 2021.
- Prevalence of low birth weight reduced from 14.8% to less than 7% by 2016.
- Prevalence of underweight among children under five years of age reduced (nationally) and in high risk districts, from 7.6% to less than 5% by 2015.
- Prevalence of wasting among children under 5 years of age reduced nationally and in high risk districts from 4.8% to less than 3% by 2016.
- Percentage of exclusive breast feeding increased from 25.1% to 40% by 2016.
- Percentage of timely complementary feeding increased from 51% to 65% by 2016.

### 5. Prevalence of overweight and obesity reduced among all age groups.

#### Indicators:

Prevalence of overweight and obesity reduced among:

- children under 5 years of age from 13.4% to less than 10% by 2021
- school age group from 26% to less than 15% by 2021
- adolescent by 30% of baseline data by 2021
- adult (25 years and above) reduced from 66% to less than 50% by 2021

### 6. Nutritional health promotion and counseling provided to people at community level.

#### Indicators:

- Number of Nutritional counseling guidelines developed and distributed including those for people with special needs
- Number of IEC materials developed and distributed including for people with special needs.

### 7. Prevalence of micronutrient deficiencies reduced.

#### Indicators:

- Prevalence of anemia reduced among:
  1. women in reproductive age from 35% to less than 20% by 2021
  2. children under-fives years age from 26% to less than 20% by 2021
  3. school age children by 30% of baseline data by 2021

- Prevalence of Vitamin A deficiency reduced among:

1. Preschool children from 13% to less than 10% by 2016
2. women in reproductive age reduced by 50% of baseline data by 2021

- Prevalence of Iodine Deficiency Disorders among women in reproductive age and school age children 50% from the baseline by 2021.
- Neural tube defects reduced by 50% of baseline data by 2021.
- Vitamin D deficiency among women in reproductive age and children under five years of age reduced by 50% of baseline data by 2021.

## **8. Safe food availability assured for all age groups at any time.**

*Indicators:*

- Reduce incidence of food born illnesses by 50% (baseline from CDC) by 2021.

## **9. Adequate food available, accessible and utilized for all age groups at any time**

- Contingency preparedness and response plan on nutrition and food security reviewed annually by 2012.
- National school feeding program developed by 2013.

## **10. Monitoring, evaluation and surveillance plan and response developed and adopted.**

*Indicators:*

- Nutritional surveillance system operationalized and expanded at all levels by 2016.
- Regular report on the national nutrition strategy progress at all level
- Number of Nutritional related researches, surveys, and studies conducted.


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### **URL link:**

<http://www.phd.iq/>

### **File upload:**

 IRQ 2012 Nutrition Strategy\_ar.pdf

 IRQ 2012 Nutrition Strategy.pdf

### **Reference:**

WHO 2nd Global Nutrition Policy Review 2016-2017

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### **Policy topics:**

- Low birth weight
- Stunting in children 0-5 yrs
- Wasting in children 0-5 years
- Underweight in children 0-5 years
- Anaemia in pregnant women
- Anaemia in women 15-49 yrs
- Iodine deficiency disorders
- Vitamin A deficiency
- Overweight in children 0-5 yrs

- Overweight in adolescents
- Overweight in school children
- Growth monitoring and promotion
- Baby-friendly Hospital Initiative (BFHI)
- International Code of Marketing of Breast-milk Substitutes
- Capacity building for the Code
- Maternity protection
- Complementary feeding promotion/counselling
- School-based health and nutrition programmes
- Nutrition in the school curriculum
- Provision of school meals / School feeding programme
- Dietary guidelines
- Food-based dietary guidelines (FBDG)
- Media campaigns on healthy diets and nutrition
- Nutrition counselling on healthy diets
- Micronutrient supplementation
- Staple foods
- Food distribution/supplementation for prevention of acute malnutrition
- Food fortification regulations

## Partners in policy implementation

- Government
  - Health
  - Other
  - Details: more  
This document was developed in partnership between the Ministry of Health (MoH), led by the Nutrition Research Institute (NRI) and other line Ministries with the support of the World Health Organization (WHO), United Nations Children's Fund (UNICEF) and other agencies involved in the nutrition sector.
- UN agencies
  - United Nations Children's Fund (UNICEF)
  - World Health Organization (WHO)
  - Details: more  
United Nations Children's Fund (UNICEF), World Health Organization (WHO),
- Research / Academia
  - Details: more  
Research/academia: Nutrition Research Institute

### Links

[1] [https://extranet.who.int/nutrition/gina/sites/default/files/IRQ%202012%20Nutrition%20Strategy\\_ar.pdf](https://extranet.who.int/nutrition/gina/sites/default/files/IRQ%202012%20Nutrition%20Strategy_ar.pdf)

[2] <https://extranet.who.int/nutrition/gina/sites/default/files/IRQ%202012%20Nutrition%20Strategy.pdf>

