

MINISTRY OF HEALTH PUBLIC HEALTH INSTITUTION OF TURKEY

NUTRITION PROGRAMS OF TURKEY

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Malnutrition

Malnutrition refers to deficiencies, excesses or imbalances intake of energy and/or nutrients.

Overweight

Obesity

Diet-related noncommunicable diseases Undernutrition

Wasting

Stunting

Micronutrient deficiences, insufficiences

MALNUTRITION



Sustainable Development Goals





ADDRESSING
THE CAUSES
AND
CONSEQUENCES
OF ALL FORMS
OF
MALNUTRITION

GLOBAL NUTRITION TARGETS 2025 To improve maternal, infant and young child nutrition



40% REDUCTION IN THE NUMBER OF CHILDREN UNDER-5 WHO ARE STUNTED



50% REDUCTION OF ANAEMIA IN WOMEN OF REPRODUCTIVE AGE



30% REDUCTION IN LOW BIRTH WEIGHT



NO INCREASE IN CHILDHOOD OVERWEIGHT



INCREASE THE RATE OF EXCLUSIVE BREASTFEEDING IN THE FIRST 6 MONTHS UP TO AT LEAST 50%



REDUCE AND MAINTAIN CHILDHOOD WASTING TO LESS THAN 5%



Malnutrition is Pervasive and Increasing

- Malnutrition affects all 193 countries
- Malnutrition affects 1 in 3 people
 will rise
 to 1 in 2 people if current trends continue
 - 800 million are hungry, 2 billion have micronutrient deficiency, 1.9 billion are overweight or obese
 - Overweight/obesity rates are rising in every country
- Undernutrition rates decreasing too slowly



156 MILLION

Stunting
 rates are
 dropping but
 156 million
 children
 under 5
 around the
 world were
 still affected

42 MILLION

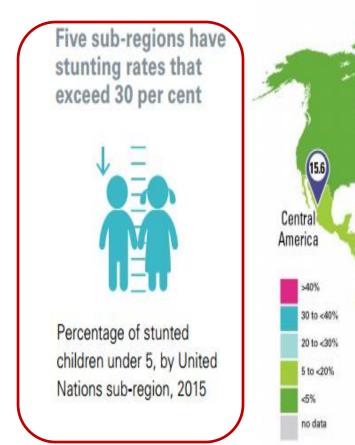
- There were
 42 million
 overweight
 children in
 the world
- An increase of about 11 million over the past 15 years

50 MILLION

Wasting
 continued to
 threaten the
 lives of 50
 million
 children
 under 5
 globally



Sub-regional Overview of Stunting







Sub-regional Overview of Overweight

In three sub-regions more than 10 per cent of children under 5 are overweight



Percentage of overweight children under 5, by United Nations sub-region, 2015





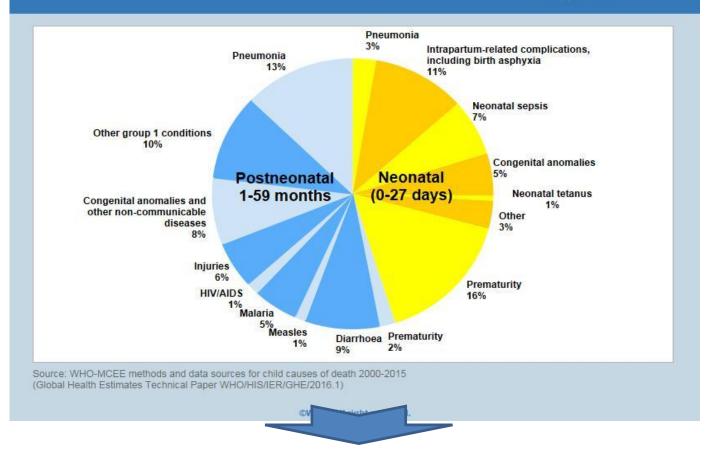
Sub-regional Overview of Wasting





Causes of deaths among children under 5 years, 2015





MALNUTRITION IS %45 OF ALL UNDER 5 DEATHS



Ministry of Health of Turkey



Vision:

A Turkey where healthy lifestyles are embraced and everyone can easily exercise their right to health

Mission:

To maximise the protection of individual and community health with a human-centred approach and to offer timely, appropriate and effective solutions to health problems



Strategic Goal 1:

To protect the individual and the community from health risks and foster healthy life styles

Strategic Goal 2:

To provide accessible, appropriate, effective, and efficient health services to individuals and the community

Strategic Goal 3:

To respond to the health needs and expectations of individuals based on a human-centred and holistic approach



Strategic Goal 4:

To continue to develop the health system as a means to contributing to the economic and social development of Turkey and to global health



Nutritional Objectives (1)

- To contribute to inter-sectoral coordination and cooperation to improve food safety and nutritional quality,
- To ensure inter-sectoral cooperation to improve healthy nutrition,
- To organise training events and campaigns to increase the awareness of the importance of exclusive breastfeeding in the first 6 months of life and of supplemental breastfeeding between 6 months-2 years of age,
- To improve and implement breastfeeding programs in order to prevent acute nutrition disorders,



Nutritional Objectives (2)

- To improve and sustain vitamin and mineral supplementation programs for infants,
- To improve the programs implemented to reduce the ratio of children with acute nutrition disorders,
- To sustain the programs supporting healthy nutrition for children aged 6-24 month in addition to breastfeeding in order to prevent chronic nutrition disorders.



Child and Adolescent Health Programs of Public Health Agency

INFANT MORTALITY PREVENTION AND CONTROL PROGRAM

•Infant Mortality Monitoring System

- •Antenatal steroid research
- •High-risk baby followup

NUTRITION PROGRAMS

- Promotion of Breeasfeeding and Baby-Friendly Health Facilities Programs
- •Complementary Feeding Program
- •The Iron-Like Turkey Program
- •Vitamin D Deficiency Prevention and Control Program
- •lodine Deficiency Disorders Elimination Program
- •Child care and Nutrition in Emergencies

DEVELOPING HEALTH PROGRAMS

- •Infant and Child Monitoring Program
- •Healt Protection and Promotion in Scholls Program
- Adolescent Health and Youth Program
- •Child Safety Program

PROGRAMS

- •Neonatal Transport Training
- •Neonatal Resuscitation Program
- •Basic Newborn Care Training
- •Newborn Intensive Care Training
- •Child Intensive Care Training
- •Child Emergency Training

SCREENING PROGRAMS

- Neonatal Screening Program
- Phenylketonuria,(PKU
- Congenital Hypothyroidis(CHT)
- Biotinidase Deficiency (BD)
- Cystic fibrosis (CF)
- Newborm Hearing Screening Program
- Hearing Screening Program in School Age Children
- Visual Screening Program
- Early Diagnosis and Treatment Program of Devolepmental Displasia of Hip
- Hemoglobinopathy Screening Program



Other Public Health Nutrition Programs

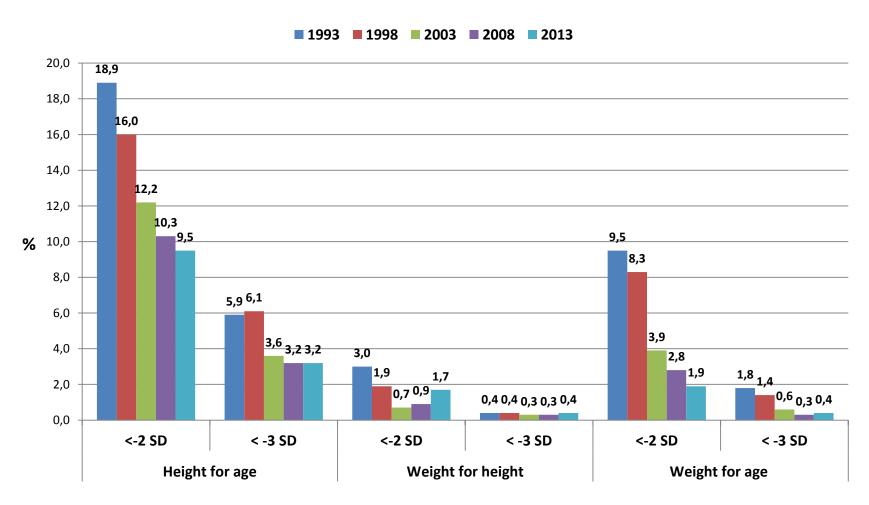
- School-Based nutrition Programs
 - School Milk in pre-schools and primary schools,
 - Nutrition- Friendly Schools Initiative Programs,
- Healthy Nutrition and Active Life Program of Turkey







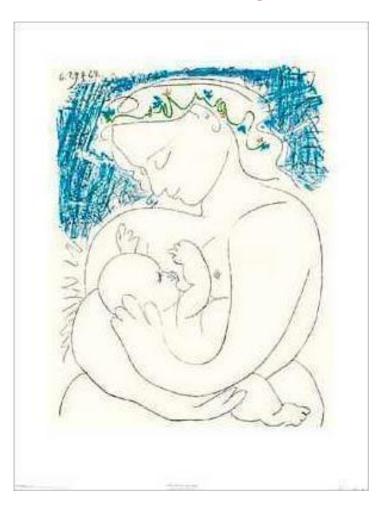
Percentage of children <5 years classified as malnourished according to three anthropometric indices of nutritional status:



Source: Demographic Health Surveys of Turkey 1993-2013



Promotion of Breastfeeding and Baby Friendly Health Facilities Program



Within cooperation with UNICEF, the Programme has been implemented since 1991 with view to ensuring, supporting and expanding breastfeeding.

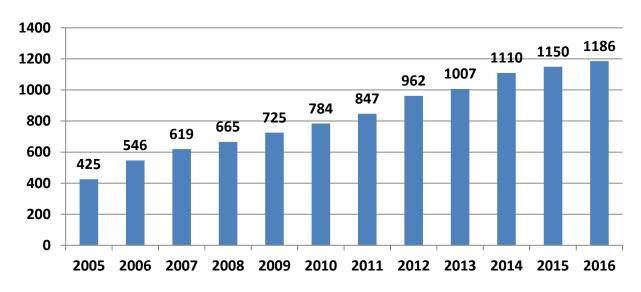


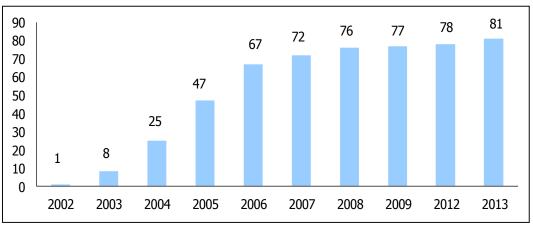
- Baby-Friendly Province Program (2002)
- Baby-Friendly Primary Health Care" on the basis of "Eight steps"
- Golden Baby-Friendly Province (2008)
- Baby-Friendly Neonatal Intensive Care Units (2012)





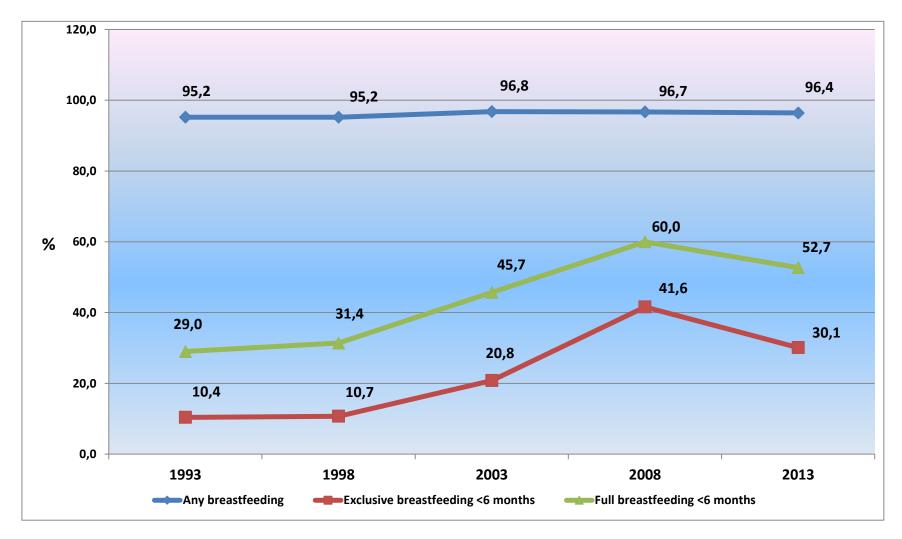
Baby Friendly Hospitals and Provinces







Progress in Breastfeeding Indicators from 1993 to 2013



Source: Demographic Health Surveys of Turkey 1993-2013



Complementary Feeding

- Complementary feeding typically covers the period from 6 to 24 months of age, and is a very vulnerable period. It is the time when malnutrition starts in many infants, contributing significantly to the high prevalence of malnutrition in children under five years of age worldwide.
- It includes nutritional recommendations to families by trained health staff, according to infants age, region and socio-economic status of the family.
- Family physicians and family health staff have been trained in 81 provinces.
- Remote training modules have been prepared.



Micronutrient Support

- Iron supplementation for 4-12 months old infants
 - Program coverage: 99%
 - Anemia prevelance in child: 6,3%
- Vitamine D supplementation for 0-12 months old infants
 - Program coverage: 99%
 - Deficiency of vitamin D: 20% (<15 ng/ml)
- Mandatory salt iodization:
 - Household usage: 85%
 - UIC: 105 μg/dl

"Turkey is as Iron" Program

Years	Iron Support
2004	731.844
2005	849.117
2006	1.058.122
2007	1.063.316
2008	1.333.155
2009	1.240.839
2010	1.175.397
2011	1.202.343
2012	1.033.435
2013	970.732
2014	1.247.470
2015	1.246.236



Goals

- To provide prophylactic iron supplementation for all infants from 4 to 12 months
- At the end of the program to reduce the prevalence of iron deficiency in children to 10%.
- To treat infants who diagnosed with anemia



Prevention of Vitamin D Deficiency and Promotion of Bone Health Program

Years	Vitamin D Support
2005	751.790
2006	1.228.121
2007	1.385.293
2008	1.397.724
2009	1.261.026
2010	1.145.751
2011	1.169.705
2012	1.302.419
2013	1.138.548
2014	1.233.525
2015	1.311.793





Thank you...