

NUTRITION RESEARCHES
IN RESPONSE TO COVID-19
PANDEMIC

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Overview of Presentation

The DOST - FNRI Mandates

Food and Nutrition R&D as COVID-19 Response

Challenges encountered in doing R&D during the pandemic

Call to Action: We all Work Together



THE PREMIER RESEARCH AGENCY OF THE GOVERNMENT IN NUTRITION, FOOD, SCIENCE & TECHNOLGY SERVICES



DOST-FNRI MANDATES



Define the citizenry's nutritional status, with reference particularly to the malnutrition problem, its causes and effects through the conduct of National Nutrition Surveys

Develop and recommend policy options, strategies, programs and projects for implementation by appropriate agencies

Diffuse knowledge and technologies in food and nutrition and provide S&T services to relevant stakeholders



What was the issue?

COVID-19 pandemic has disrupted the major systems for improving health and nutrition across age groups, increasing the risk of hunger and malnutrition 1



Food System



Health System



Social Protection System



Education System

The World Bank. Food security and COVID-19. https://www. worldbank.org/en/topic/agriculture/brief/food-security-andcovid-19





The Rapid Nutrition Assessment Survey (RNAS)



RNAS Timeline for its Implementation in Response to COVID-19 pandemic

Mar. 17, 2020

May 2020

Jul-Sept 2020

Nov-Dec 2020

Dec-29, 2020 Jan. 6, 2021



Philippine government imposed enhanced community quarantines and lockdowns across the entire Luzon islands including the National Capital Region (NCR) and it expanded to other areas.





Interagency Task Force Technical
Working Group (IATF-TWG) released a
comprehensive plan dubbed as "We
Recover as One" to mitigate the impact
of the COVID-19 crisis and allow the
economy to transition to the new
normal, with set of priorities vis-à-vis the
COVID-19 situation



- FNRI- NNC bilateral meetings to explore the plans and preparation, and the possible data collection methods of RNAS.
- Development and review of questionnaires
- Coordination with the national, regional, and provincial DOST offices.
- Coordination with the target Provincial/City Government Units



One month rapid data collection of RNAS



Dec 27: Virtual Presser among IATF Zero Hunger Task Force Jan 6, 2021: Virtual Dissemination Forum among national and local stakeholders



What has been done?



The rapid nutrition assessment survey (RNAS)

- ✓ provided a snapshot of the changes in food security, nutrition services, and maternal and child feeding practices in selected areas with high, medium, and low risk of COVID-19
- ✓ conducted from November 3 to December 3, 2020
- Results may guide policymakers, program implementers, and health care workers in enhancing and intensifying policies, programs, and health promotion strategies including nutrition programs to mitigate the impact of the pandemic.

How were the RNAS areas selected?

Selected a subsample areas of the 2019 DOST-FNRI Expanded National Nutrition Survey (ENNS). Classified provinces or Highly Urbanized Cities (HUCs) in each major island into low-, medium-, and highrisk to COVID-19 infection. Selected one province and/or HUC from each risk category across Luzon, Visayas, and Mindanao. Only households with mobile numbers were included.







Multi-stage sampling technique



How was the RNAS conducted?

- Phone interviews using an existing ENNS electronic data collection system (eDCS) were conducted by trained nutritionists of the DOST-FNRI.
- Six (6) structured and pre-tested questionnaires (5) were developed and used to capture the following changes:
 - Household food security and coping strategies
 - Participation of Filipino Children 0-12 years old to nutrition-specific programs
 - Infant and young child feeding Practices among 0-23 months old children
 - Maternal health practices of pregnant women
 - Knowledge and perception of mothers/caregivers towards their children
 - Approved by the Institutional Ethics Review Committee (FIERC# 2020-013), and by the Philippines Statistics Authority (PSA).







How many areas and households covered?

How many HHs were covered?

5,493 (961%) households were covered from the 5,717 eligible households.

Who were the respondents?

- ✓ Household heads
- ✓ Mothers/caregivers of children 0-12 years old
- ✓ Pregnant women

Areas*	Total Households Covered
High Risk	1,333
1. Parañaque City	302
2.Lapu-Lapu City	757
3. Pateros	274
Moderate Risk	2,413
1. Pangasinan	931
2. Southern Leyte	717
3. Zamboanga City	765
Low Risk	1,971
1. Angeles City	774
2. Guimaras	411
3. South Cotabato	786

^{*}Based on IATF announcement on July 15, 2020 and number of COVID-19 positive cases from the DOH NCOV tracker as of July 16, 2020



How many individuals were covered?

7,240 individuals covered through phone interview, of whom:



792 (10.9%) were children under two (0-23 months old)



1,995 (27.6%) were preschool-age children (2-5.9 years old)



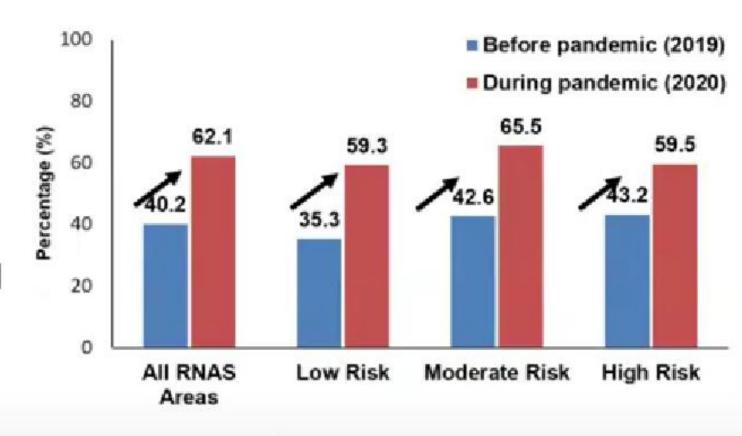
4,305 (59.5%) were school-age children (6-12 years old)



148 (2.0%) were pregnant women

Food insecurity significantly increased during the pandemic.

- 62.1% (6 out of 10) of the surveyed households experienced moderate to severe food insecurity since the start of ECQ in March 16, 2020.
- Moderately to severely food insecure families experienced:
 - eating inadequately
 - oreducing their food intake to less than the usual
 - o not eating at all due to lack of food.



^{*} Based on FIES with recall period of since the community quarantine started in March



The most food-insecure were:



Households with children 0-12 years old (7 out of 10).





Households with pregnant members (8 out of 10).



56.3%

of the households reported having problem accessing food during community quarantine period due to:





buy food



21.6%



19.5%



Limited food stores in the area

10.8%



Elderly (no other members to buy food

5.1%

Top food-coping strategies adapted by food insecure families



66.3%
have borrowed food from family/neighbors/friends

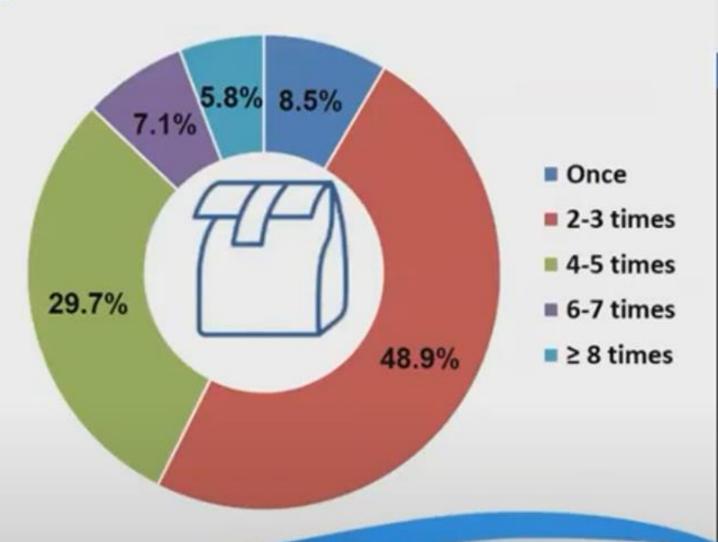


21.1% have reduced amount of intake of adults for children to have more

Food Assistance:

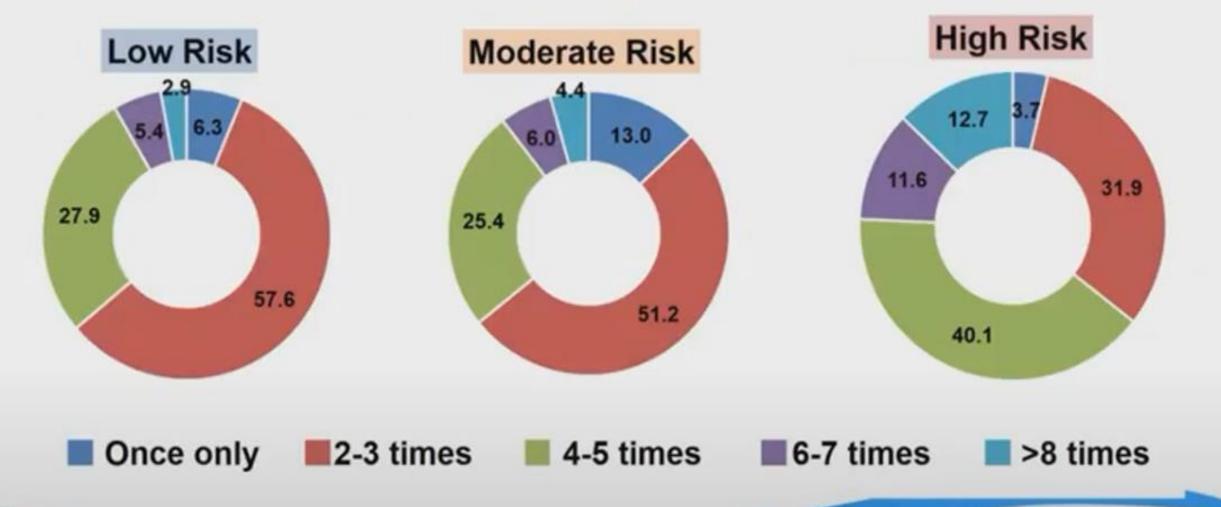
96.6% of the surveyed households received food assistance from LGU or private sector.

- √ 48.9% received 2-3 times
- 42.6% had 4 or more times





Proportion of surveyed households by frequency of food assistance during the pandemic



Most common food items included in the food packs



Rice and cereals 93.2%



Instant Coffee

31.3%



Canned and other dry goods (delatang sardinas, corned beef, 82.6% meat loaf, condiments)



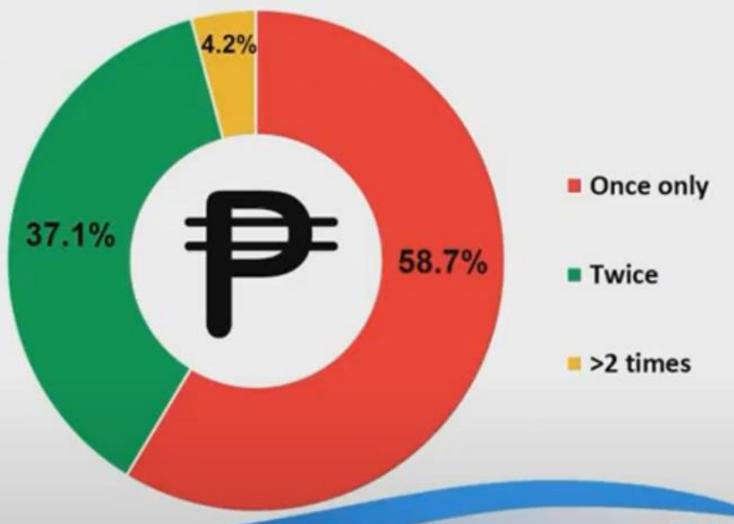
Milk and other dairy products (gatas, yogurt, cheese)

14.0%

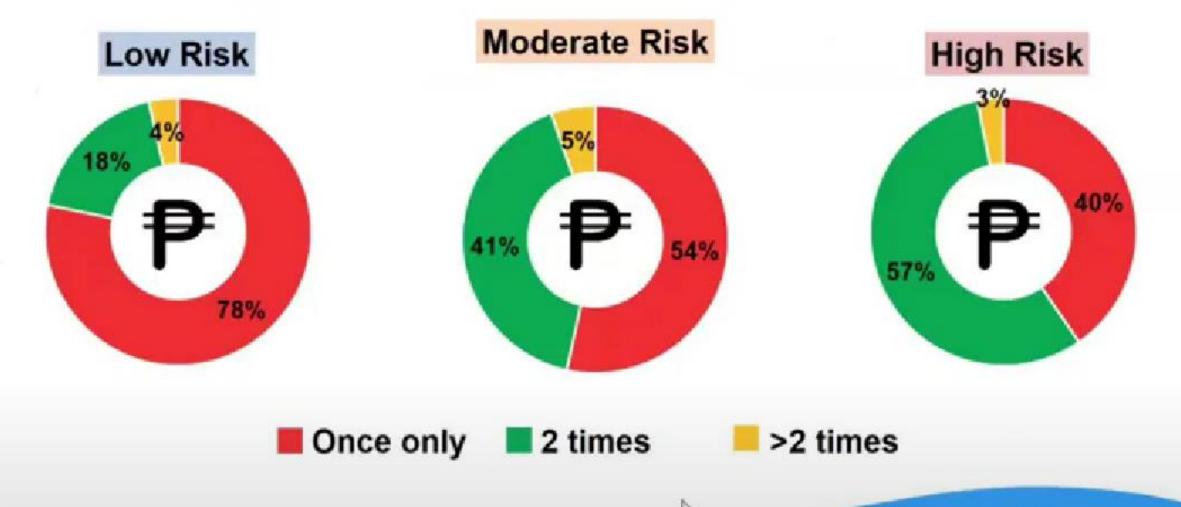


Cash Assistance:

62.9% of the households received cash assistance during the pandemic, of which more than half (58.7%) received once.



Proportion of households by frequency of cash assistance among those who received during the pandemic





The Barangay Health Center was reported to be the most accessible health facility for maternal health services



69.6%

Barangay Health Center



Private Clinic

23.2%



Government Hospital

3.2%



Complementary Feeding Practices



Only 3 out of 10

Filipino children aged 6 to 23 months were able to meet the minimum dietary diversity score (DDS) of at least 4 food groups a day.



9 out of 10

Filipino children aged 6 to 23 months were able to meet the minimum meal frequency:

- -2x for breastfed infants 6-8 months old
 - -3x for breastfed children 9-23 months old
- -4x for non-breastfed children 6-23 mos.old



Only 2 out of 10

Filipino children aged 6 to 23 months

received appropriate complementary
feeding based on minimum acceptable
diet, implying poor quality and quantity
of complementary foods



IN ANOTHER STUDY

Simulation using updated, more conservative assumptions show that poverty [in the NCR] almost doubled (UNICEF, 2020)



A household survey done by UNDP showed that 83% of respondents in NCR and Cebu faced a decrease in income early in the pandemic, with 40% having lost all income



During the COVID-19 pandemic...

Based on the Labor Force Survey (June 2021)

7.7%

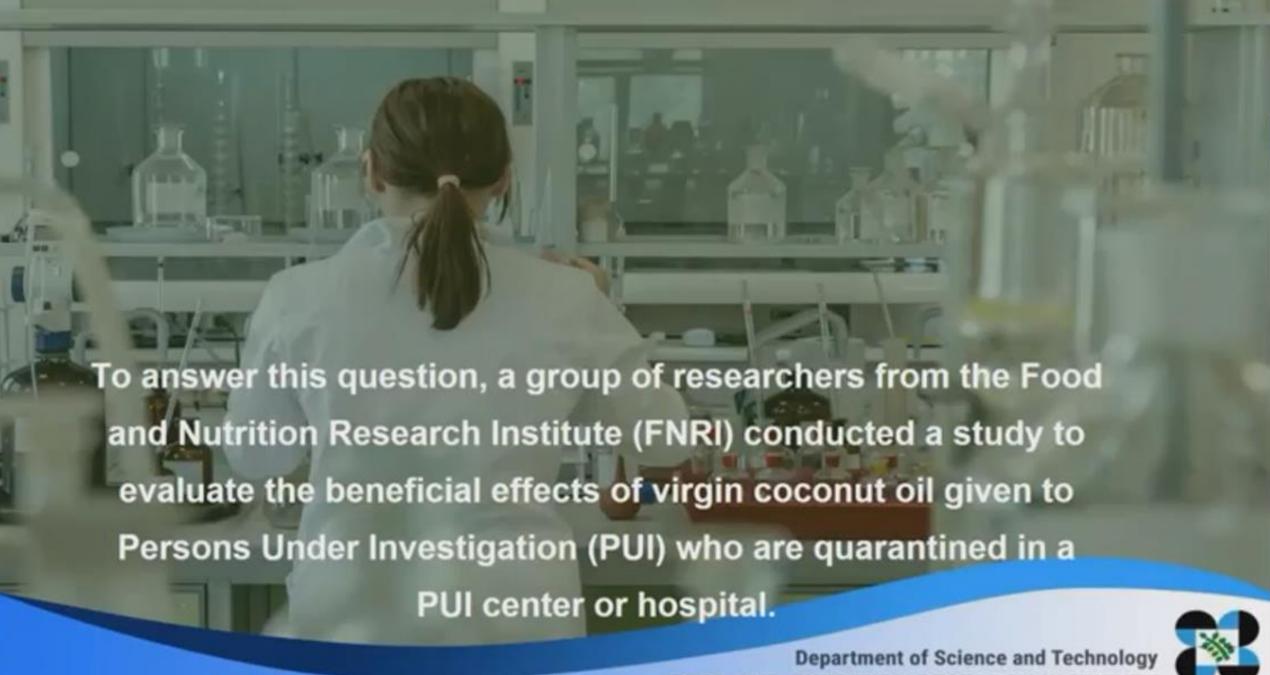
Unemployment rate

14.2%

Underemployment rate











There were 57 suspect and probable COVID-19 patients who participated and underwent the 28-day intervention period. The investigators randomly assigned the volunteers into either the Intervention or VCO Group or the Control Group, in which the VCO Group had 29 cases and the Control Group had 28 cases.











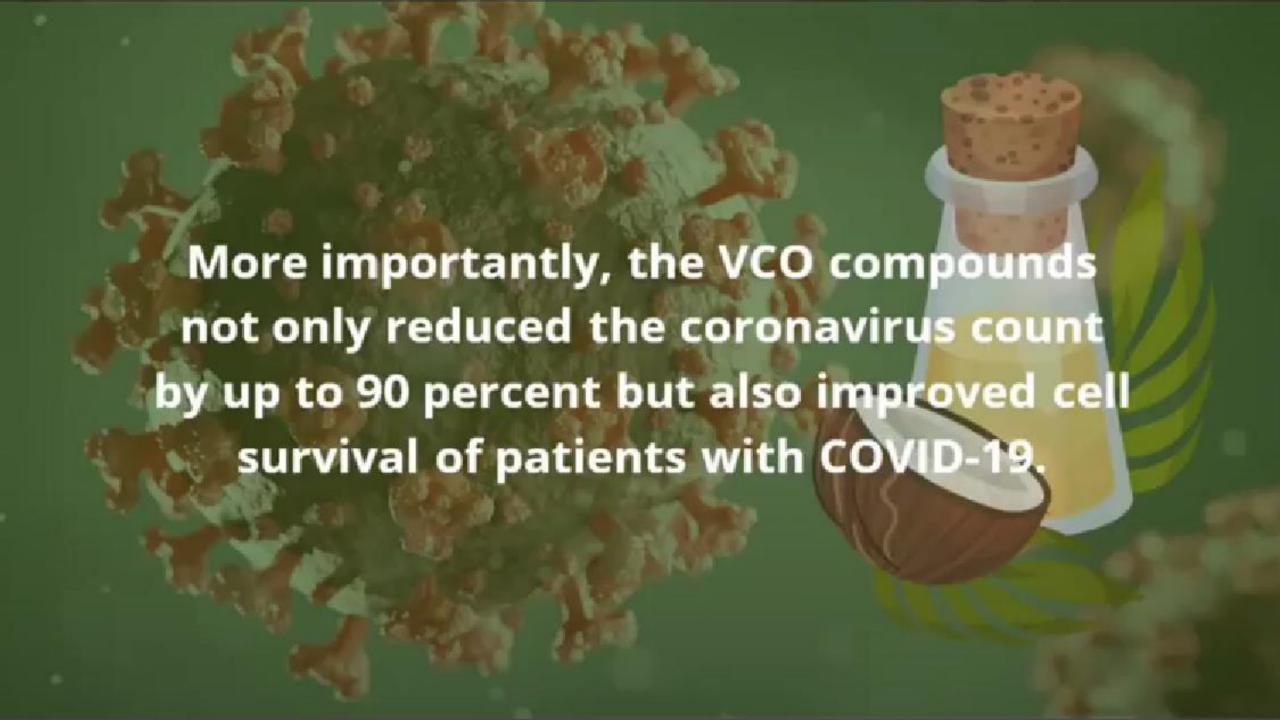
Immediate effects of the VCO intervention were observed among five of the 29 patients in the VCO Group who experienced decreasing signs and symptoms of COVID-19 as early as Day 2, while only 1 patient from the Control Group showed similar improvement.

Moreover, the VCO group experienced no more symptoms at Day 18, while the Control Group exhibited no symptoms only at Day 23.

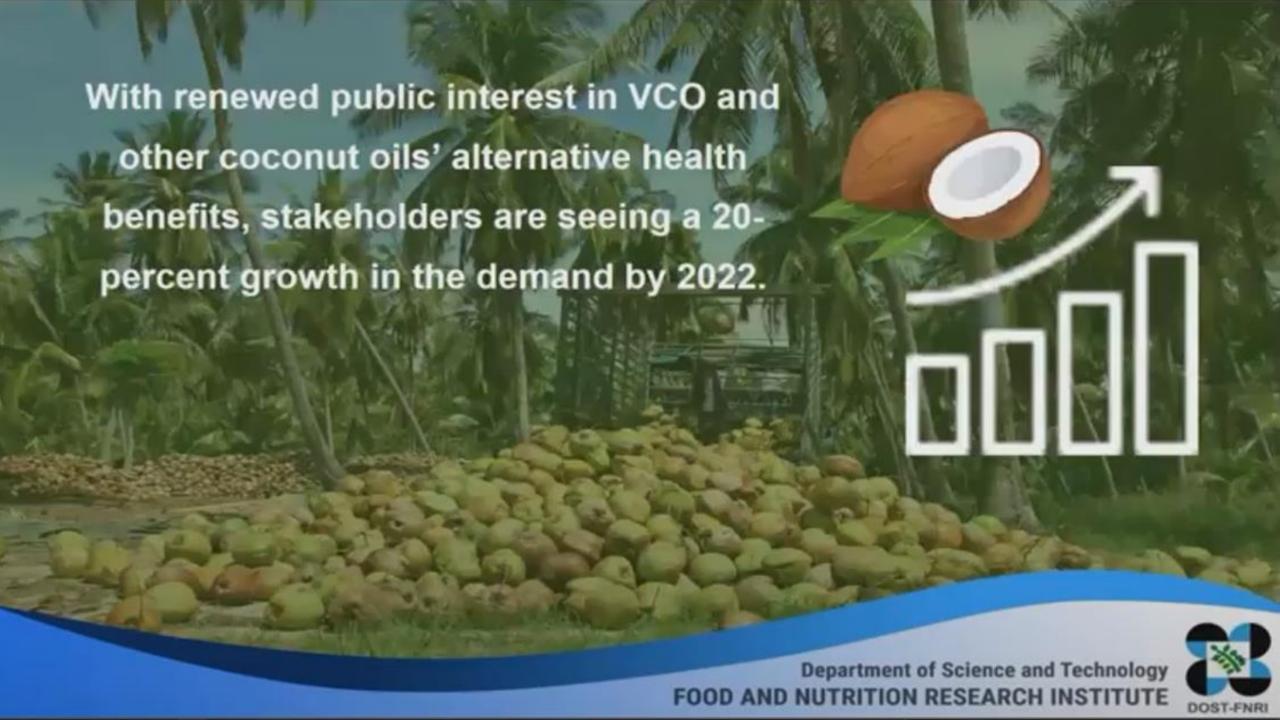


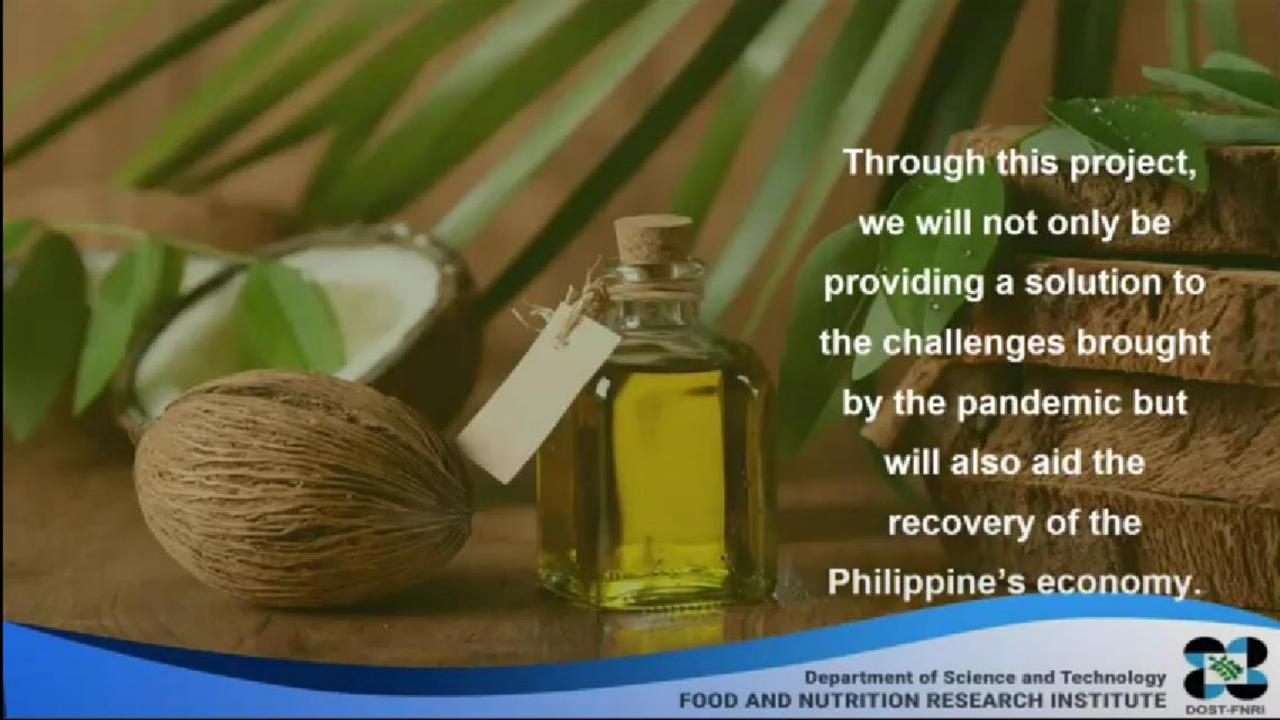




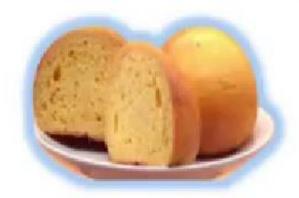


These findings about using VCO for enhancing the immune system of patients can greatly help in our fight against the pandemic. Once the research and development are completed, VCO can be used as an adjunctive therapy that could prevent COVID-19 from becoming severe.





FNRI S&T Products and Tools



Enhanced Nutribun



Complementary Food Products



Nutrition promotion for behavior change



DOST-FNRI developed Recipes

DOST - FNRI Menu Guide Calendar

is an annual publication of the DOST – FNRI that aims to provide useful and practical information to promote proper nutrition and healthy lifestyle

The themes depend on the immediate and pressing issues of vulnerable groups or to promote the consumption of food items.





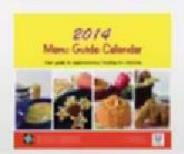
















DOST-FNRI R&D Project

Development of Front-of-Pack Nutrition Label for Processed Foods and Beverages

General Objective

Develop a new front-of-pack (FOP) nutrition label for food and beverage products to promote healthy diet for Filipino children

Research Perspectives

- Food Environment Survey
- Analysis of trans fat content of foods
- Effects of Planetary Diet
- Healthy Lifestyle among Adolescents and Adults (Supporting Adolescent Growth in the Philippines, Happy Aging, etc)
- Glycemic index of different rice varieties

Research Perspectives

Nutrient Profile

- Develop National Nutrient Profile Model for Children's Diets
- ✓ Nutrient Profile Model for Complementary Foods (recommended)



Nutrient profiling is the science of classifying foods based on their nutritional composition and can be a tool to help address all forms of malnutrition.

Research Perspectives

- Develop Diet Optimization Software thru linear programming
 - The DOST-FNRI is currently developing a mathematical optimization software to compute the amounts of locally available foods that must be consumed by an individual or a family that would meet the recommended energy and nutrient intakes (RENI) at the least cost.



Challenges Encountered	Practical Solutions
❖ Risk of exposure to COVID-19 among researchers	Ensured that our office-based phone interviewers followed minimum health protocol at work place; ensured well-planned infrastructure to minimize COVID-19 infection.

Challenges Encountered	Practical Solutions
❖ Limited contacts or no face to face interview	Examined what were the existing information from the ENNS data; Redesigned the study from F2F to phone-interview using the existing phone numbers of the HH



Challenges Encountered * Higher non-response due to difficulty establishing rapport and trust of participants through phone interview * Well-structured introduction/script, training of phone interviewers to equip them proper techniques of phone interview, Assigned supervisors to each group of interviewers to closely monitor/supervise members.

Challenges Encountered	Practical Solutions
 Unintentional exclusion of marginalized groups or low income groups due to: lack of access to digital technologies Residing in remote areas or hard to reach groups without connectivity 	Tapped community health workers/barangay officials as 'mobilisers' who brought technology to the homes of the people who need to be reached.

Challenges Encountered	Practical Solutions
Inadequate technological devices (mobile phones, headphones, recorder, etc)	Allotted bigger amount of funds to communication and ICT materials to enhance access to technology and connectivity.

Challenges Encountered	Practical Solutions
❖ Phone interview can be interrupted due to weak internet connection	Tapped community health workers/barangay officials as 'mobilisers' who brought technology to the homes of the people who need to be reached. Allotted bigger amount of funds to communication and ICT materials to enhance access to technology and connectivity.

Challenges Encountered	Practical Solutions
 ❖Greater ethical challenges in the following: getting written informed consent adequate space or private room to conduct the phone interview 	Recorded verbal consent was considered, this was clearly outlined in the ethical clearance processAllotted adequate space for the office-based interviewers; staggered schedule of work-from home & skeletal work force



TRANSFORMING **OUR PATH TOWARDS A RESILIENT AND** SUSTAINABLE **FOOD AND** NUTRITION SYSTEM







TRANSCENDING
INNOVATIVE
ACTIVITIES INTO
ONE WHICH MAY
BE PERMANENTLY
RESPONSIVE AND
PROACTIVE





ALIGNING OUR EXPERTISE TO PROPEL OUR WORK FURTHER









PRIORITIZING OUR
FOCUS ON THE
MOST
VULNERABLE AND
LEAVING NO ONE
BEHIND



"If we can conquer space, we can conquer childhood hunger."

Buzz Aldrin









