

THE PRIME MINISTER

DECISION No.21/2001/QĐ-TTg OF FEBRUARY 22, 2001 RATIFYING THE NATIONAL STRATEGY ON NUTRITION FOR THE 2001-2010 PERIOD

Pursuant to the Law on Organization of the Government of September 30, 1992;

Pursuant to the Law on Protection of People's Health of June 30, 2000;

At the proposal of the Minister of Health,

DECIDES:

Article 1.- To ratify the national strategy on nutrition for the 2001-2010 period with the following principal contents:

1. Objectives:

a/ Overall objectives:

To ensure that by the year 2010 the people's nutrition shall be markedly improved, family members, first of all children and mothers, shall be rationally reared and cared for, meals of people in all regions shall be more quantitatively adequate and further qualitatively improved, meeting the hygienic safety standards. To restrict the newly arising nutrition-related health problems.

b/ Specific objectives:

- People shall have their knowledge about nutrition elevated and be encouraged to practice a rational nutrition regime.

Targets:

+ The rate of mothers who are knowledgeable about and practice a proper nutrition regime for sick children to increase from 20.2% in 2000 to 40% by 2005 and 60% by 2010.

+ The rate of mothers who totally breast feed their infants within the first four months to rise from 31.1% in 2000 to 45% by 2005 and 60% by 2010.

+ The rate of female youngsters trained in nutrition and provided motherhood knowledge to reach 25% by 2005 and 40% by 2010.

- To reduce the malnutrition rate of children and mothers:

Targets:

+ The weight malnutrition rate according to age among under-5 children in the whole country to drop by 1.5% annually to under 25% by 2005 and under 20% by 2010.

+ The height malnutrition rate according to age among under-5 children in the whole country to drop 1.5% annually.

+ The rate of newborns weighing under 2,500 gram to reduce to 7% by 2005 and 6% by 2010.

+ The rate of prolonged energy deficiency among women of the fertility age in the whole country to drop 1% annually.

+ The rate of over-weight under-5 children to drop to under 5%.

- To basically eliminate the state of vitamin A and Iodine deficiency and to substantially reduce the nutrition-related anemia

Targets:

+ To keep the rate of active corneal xero-ulceration caused by vitamin A deficiency among under-5 children always below that of community health significance.

+ To reduce the vitamin A deficiency of the pre-clinical type: the rate of under-5 children with a low vitamin A content in serum to under 8% by 2005 and under 5% by 2010.

+ To basically eliminate the disorders caused by Iodine deficiency: To reduce by the year 2005 the goiter rate among children of 8-12 years old to under 5%; to stabilize the supply of iodized salt throughout the country to over 90% of family households; to attain the iodine content in urine at 10-20 mcg/dl.

+ To reduce the rate of iron-deficiency anemia among pregnant women in all regions where the program is executed to 30% by 2005 and 25% by 2010.

- To reduce the rate of family households with low input energy levels

Targets:

To reduce the rate of family households with a per-head input energy level of under 1,800 Kcal from 15% in 2000 to 10% by 2005 and to under 5% by 2010.

- To markedly improve the state of food hygiene and safety.

Targets:

+ To reduce by 25% the number of massive food poisoning cases (each case involves more than 30 persons) by 2005 and by 35% by 2010 (as compared with 1999).

+ To reduce by 10% the number of food poisoning cases by 2005 and 30% by 2010 (as compared with 1999).

+ To reduce the rate of micro-organism contamination of street-stall foods and prepared foodstuffs .

2. Major solutions and policies:

a/ Improvement of nutrition and food quality, hygiene and safety:

- Educating and popularizing the nutrition knowledge to the entire population;

- Ensuring the food security at family household level;

- Preventing and combating protein-energy malnutrition among children and mothers;

- Preventing and combating nutritious micro-elements;

- Preventing and combating nutrition-related chronic diseases;

- Integrating nutrition activities into the primary health care;

- Ensuring the food quality, hygiene and safety;

- Monitoring, evaluating and supervising the nutrition work;

- Building up pilot models in order to draw experience in direction.

b/ Policies closely related to nutrition:

- Ensuring the national food security;

- Stepping up the hunger elimination and poverty alleviation;

- Improving infrastructure and essential services for the care for mothers and children.

c/ Policies in support of nutrition:

- Incorporating nutrition criteria in the local socio-economic development plans;

- Perfecting the policies in support of nutrition care;

- Socializing the nutrition work.

d/ Investment for implementation of the strategy:

- Making investment from the State budget;

- Bringing into play the domestic resources and mobilizing the community's sources;

- Intensifying the international cooperation on nutrition...

3. Implementation plan:

a/ Stage 1 (2001-2005):

- To carry out activities focusing on nutrition improvement, attach importance to the education, training and development of human resources, and supplement the policies in support of nutrition.

- To continue executing the target programs.

b/ Stage 2 (2006-2010):

To continue activities of the first stage, institutionalize the State's direction over the nutrition work, to sustain and comprehensively evaluate the strategy's implementation.

Article 2.- The Ministry of Health shall assume the prime responsibility for the strategy's implementation and coordinate with the Ministries of Planning and Investment;

Finance; Agriculture and Rural Development; Education and Training; Justice; Labor, War Invalids and Social Affairs; Trade; Culture and Information; Science, Technology and Environment; the Vietnam Committee for Child Protection and Care, the National Committee for Population and Family Planning, the General Department of Statistics and the concerned bodies in working out plans, organizing and guiding the implementation thereof, inspecting, supervising and summing up the annual implementation of the strategy, then reporting it to the Prime Minister; organizing the preliminary review of the strategy's implementation by 2005 and the overall review thereof by 2010.

The Nutrition Institute shall act as the standing body assisting the Ministry of Health deploy professional and technical activities and organize periodical inspection, supervision and evaluation of the strategy's implementation.

In the course of the strategy's implementation, it is necessary to attach importance to the development of capabilities in parallel with the determination of orientation for investment of resources in order to achieve the highest efficiency and ensure the sustainable development of the strategy.

Article 3.- Annually, basing themselves on the State budget's capabilities and the strategy's implementation tempo, the Ministry of Finance and the Ministry of Planning and Investment shall earmark a funding amount from the State budget (including domestic and overseas sources) to ensure that the strategy's activities are carried out for right objectives and with efficiency.

Article 4.- The ministries, the ministerial-level agencies and the agencies attached to the Government shall, within the ambit of their functions and tasks, have to coordinate with the Ministry of Health in performing tasks and achieving objectives of the national strategy on nutrition for the 2001-2010 period.

Article 5.- This Decision takes effect 15 days after its signing.

Article 6.- The ministers, the heads of the ministerial-level agencies, the heads of the agencies attached to the Government and the presidents of the People's Committees of the provinces and centrally-run cities shall have to implement this Decision.

The Vietnam Women's Union and the concerned agencies shall coordinate with the Ministry of Health in implementing this Decision.

Prime Minister
PHAN VAN KHAI