HEALTHY NUTRITION: THE ROLE OF WOMEN

Report on a WHO Meeting

Murmansk, Russian Federation
14–15 June 2000
EUROPEAN HEALTH21 TARGET 11

HEALTHIER LIVING

By the year 2015, people across society should have adopted healthier patterns of living

(Adopted by the WHO Regional Committee for Europe at its forty-eighth session, Copenhagen, September 1998)

ABSTRACT

Women – by breastfeeding their babies, providing meals for their families and making up the majority of the workforce employed in food processing and manufacturing, public catering, health care and education – have a crucial role in implementing healthy nutrition policies in the Russian Federation. This role is particularly important in both the family and society as a whole. Given the nutrition problems in the Russian Federation, programmes to improve infant health have made remarkable achievements in Murmansk. These achievements indicate the need for comprehensive and integrated food and nutrition policies, with concerted action for implementation by many different sectors. The WHO Regional Office for Europe, with support from the Norwegian Government, organized a workshop on the role of women in implementing food and nutrition policies. It provided the opportunity for representatives of different sectors in the Murmansk region to discuss how the authorities and other organizations could implement nutrition policies and guidelines, using women as the driving force. The workshop participants also discussed an action plan for regional nutrition programmes in the Russian Federation, which was drafted by experts from Moscow and over ten regions, including Murmansk and Arkhangelsk, in the Russian Federation. The participants’ comments were incorporated into the action plan, which was launched at a meeting organized by WHO, with support from the Norwegian Government, in September 2000.

Keywords

NUTRITION POLICY
WOMEN
FAMILY
REGIONAL HEALTH PLANNING
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**Organizers of the meeting**

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Research Institute of Nutrition of the Russian Academy of Medical Sciences

The WHO countrywide integrated noncommunicable disease intervention (CINDI) programme, Russian Federation

City Administration of Murmansk
Municipal Health Establishment of the city of Murmansk
Maternity Home No.3, the Mother and Family Centre

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**Acknowledgements**

This meeting was part of a project to promote the healthy nutrition of women and their families in north west Russia and was generously supported by funds from the Norwegian Government. Reports on previous activities within the project are available.

Grateful thanks are extended to Tatyana Dinekina, Tatyana Kamardina, Igor Glasunov, Alexander Baturin and Marina Popovich who helped to make this Workshop such a success. Thanks are also due to all the experts from Murmansk Regional Committee, especially Dr Kovalo, Director, Regional Health Authorities, Dr Yelena Buraya, Centre for State Sanitary and Epidemiological Surveillance in the Murmansk Region, and Dr Nadezhda Antipina, Regional Centre for Preventive Medicine. Finally, the enthusiasm, initiative and creativity of the participants themselves were much appreciated.
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Fish farming can be carried out to supply fish for the population.

The local market in Murmansk is the main retail outlet for purchasing food as no supermarkets exist yet.

10 hectares of greenhouses supply 10% of tomatoes, cucumbers, peppers and aubergines consumed in the Murmansk Region.
Summary

Women have a special role in healthy nutrition of the population. The woman breastfeeds the newborn baby and prepares meals for members of her family. Women employees in food manufacturing, trade, public catering, health care and education account for the majority. In addition, public health depends upon women’s understanding of healthy nutrition issues. Women, therefore, play a key role in implementing a healthy nutrition policy, both in the family and in society as a whole.

Nutrition indicators within the Russian population, such as breastfeeding, nutrition of children and the adult population, highlight problems. It is also apparent that there is a low level of knowledge about healthy nutrition.

A breastfeeding programme is currently being successfully implemented in Murmansk. In addition, the second maternity home in the Russian Federation to be awarded the title of baby-friendly hospital is located in Murmansk. This success provides incentive for further action in the field of healthy nutrition, but it also calls for concerted action by more sectors of society.

Thus a workshop entitled Healthy Nutrition of Women and their Families was held in Murmansk in September 1999. Representatives of various sectors in Murmansk were provided with important information on nutrition. It is expected that this information will be translated into policies and guidelines which can be implemented by the authorities.

Often, the general public perceive recommendations for healthy eating as not being economically feasible. Most of the time this is incorrect. The economic aspects of healthy nutrition should be studied more because they are vital for the development of a sustainable healthy nutrition policy.

Participants in the meeting discussed the guidebook Healthy nutrition: action plan for regional programme development in the Russian Federation. The editors will incorporate the outcome of the Murmansk workshop in the regional action plan. The document was to be completed by the end of July 2000 and discussed at a conference to be held from 19 to 21 September 2000 in Arkhangelsk.

Food and nutrition action plan for Europe

The WHO Regional Office for Europe has developed a final draft of the The impact of food and nutrition on public health: the case for a food and nutrition action plan for the European Region of WHO, 2000–2005. This document suggests models for action in the WHO European Region to promote public health through healthy nutrition. The document was to be submitted to the ministers of health of the Region when they meet at the WHO Regional Committee for Europe in September 2000.

Detailed information will be gathered throughout 2000–2005 and a report will be prepared on the steps to be taken in the field of food and nutrition in the various countries of Europe. In 2005, a conference of health ministers will be held at which they will discuss the achievements made.

Some of the key points of this document are as follows.

• If public health is to be promoted, this cannot be achieved solely through the health sector, which mostly deals with the treatment of diseases. Human behaviour and activities are
influenced by many spheres of life and society, so sectors such as agriculture and food distribution need to be involved as well as the way people eat. The role of the health sector is to initiate a dialogue between these sectors, to devise ways of how they can promote public health and to ensure that appropriate information on healthy nutrition is disseminated.

• National (regional) food and nutrition councils need to be established. Such an intersectoral mechanism can bring together all the sectors which play a vital role in nutrition, involving the business sector, NGOs and citizens’ organizations, all of which should work towards the development of democracy. The Russian Federation is changing to a market-oriented economy where demand shapes supply. The demands of the public must dictate that healthy food is produced – a manufacturer cannot stay in business if nobody buys his products.

• The healthy food pyramid suggests the principles on which nutrition should be based.

**The role of the woman in healthy nutrition**

The role of the woman in healthy nutrition includes feeding the newborn, preparing meals for members of her family, and her extensive professional involvement in food manufacturing, trade, public catering, health care and education. According to the State Sanitary and Epidemiological Surveillance Service, women account for between 70–90% of employees in these industries and professions. A similar situation exists in the management structures of these sectors. In the Russian Federation, women have traditionally been responsible for buying food and preparing meals, so their competence in matters of healthy nutrition will largely determine the health of families and, accordingly, of society. Given this, one could safely state that it is the woman who has the key role in society in implementing a healthy nutrition policy, both in her own family and in society as a whole.

Women’s health status as well as their social status have a great impact on the health of their children and therefore of the future generation.

There is a correlation between women’s level of education and babies’ birth weight: the higher the level of education, the greater the birth weight. It is well known that low birth-weight babies suffer from anaemia and experience retardation of their growth and development. Eventually, this determines the intellectual and physical potential of society. If the mother herself has a low body mass, this will result in the birth of a baby with a low body mass, which is significant for the long-term health of society.

Information regarding healthy nutrition during pregnancy and breastfeeding newborn babies and infants in the first year of life will allow not only the health of the woman, but also that of the child, to be protected against infectious diseases during the first year of life and noncommunicable disease in adult life.

The role of the woman in implementing a healthy nutrition policy in the family is important as, being aware of the basic principles of healthy eating and implementing them, the woman can ensure the implementation of a healthy nutrition policy in her family. Given the role of women in sectors relating to the manufacture and distribution of foods in the Russian Federation’s national economy, she is also capable of implementing a healthy nutrition policy in Russian society.
Social action to promote the role of women in a healthy nutrition strategy

The social role of women is discussed in the previous section. From this, three main social functions of women can be identified:

1. **women as a target group for information**: women as part of the general public can be targeted with social marketing campaigns;

2. **women as agents for change**: given the role of women in families and their influence on family members (on the foetus during pregnancy, on the children and men), women can be a medium through which influence is exerted on different subgroups of the population;

3. **women as initiators of change**: in terms of both their numbers and influence on society, women hold leading positions in a number of spheres, e.g. in public health, education, trade and children’s preschool institutions.

The potential women have to implement a healthy nutrition programme remains virtually unused. This is due mainly to lack of knowledge, availability of and access to healthy foods and economic difficulties faced by families.

In view of the important role of women, strategies required to achieve this multi-faceted role could be summarized under the following headings.

**Public education strategy**

If they are given the correct information, women can educate their children, husbands and relatives. The following channels could be used to implement this strategy:

- the mass media - especially women’s magazines and TV programmes on cooking
- dietary guidelines and recommendations by doctors and teachers
- the retail trade
- public catering
- NGOs (especially women’s organizations)
- the church.

**A strategy for professional healthy nutrition training**

Women act as professionals in the health, education, trade and public catering sectors. In their professional capacities they could be involved in the following:

- providing training at the graduate and postgraduate levels
- developing guidelines and manuals
- providing recommendations for patients and students
- changing the public catering sector
- influencing policy-makers by advocating policy change.

**A strategy for involving the general public**

The general public can be involved through:

- NGOs
- professional associations.
On the basis of these strategies, some practical steps are as follows:

- educating women about healthy lifestyles through the mass media (especially women’s magazines), including the basic principles of providing healthy nutrition for their families;
- educating those in institutions for preschool and schoolchildren about healthy nutrition, taking due regard of the age of the children;
- teaching college and university students about special healthy lifestyle programmes, which include healthy nutrition issues;
- modifying the training programmes of food industry specialists, including public catering, trade and others whose work is related to the nutrition of the population;
- developing special programmes for educating women and their families as to how to amend inappropriate dietary habits;
- teaching practical skills and the basic principles of healthy nutrition within the systems of general education and vocational training, home economics lessons and housekeeping, but also within the food industry, public catering and retail trade;
- training women specialists who are employed within the food industry, retail trade, public catering and health and education sectors, etc. under special programmes at enterprises that manufacture and market healthy foods;
- developing and approving, in accordance with established procedures, rules for manufacturing healthy foods, including the production of ready-made dishes;
- implementing a system of official recognition at food industry enterprises, public catering and retail trade, whereby “healthy foods” certificates would be issued; and
- writing and publishing special literature on healthy nutrition within the family, reflecting such issues as growing foods, processes for producing healthy foods, breastfeeding and the economic aspects of healthy nutrition.

Data on the nutrition of women and children in the Russian Federation

Studies in the Russian Federation have shown a low rate of breastfeeding, too early introduction of complementary foods and formula feeding and improper meals in schools and preschool institutions.

Families help to shape the dietary habits of children. Such habits lead to various risk factors and diseases occurring throughout life. Deficiencies of calcium, iron, vitamin B1, folic acid and iodine are witnessed in pregnant women. At the end of pregnancy, differences in the haemoglobin levels can be observed between women with low and high incomes.

Data are available on nutrition in low-income families. A study undertaken in collaboration with the State Committee for Statistics (Goskomstat) showed the following observations:

- meat consumption by children depends on family income; about 50% of children from low-income families did not eat meat on the day they were surveyed, compared with only 10% from well-off families;
- nearly 60% of children from low-income families did not have fruit or juice on the day of the survey compared with children from better-off families;
• income did not appear to affect the consumption of milk products;
• children reduce their consumption of milk products with age;
• the intake of energy as fat is 25.5% in low-income families compared with 31% in better-off families;
• in the Ivanovo oblast, 24% of children under 6 years of age and 20% of women of childbearing age had a low haemoglobin level; a project to fortify bread with iron and vitamins has been implemented in the oblast, and women employed at the bakery had a 10–12% lower prevalence of anaemia than other women.

Some examples of nutrition programmes for women and children

Arkhangelsk

See also previous reports on activities under this project.
Fifty women were surveyed in Arkhangelsk, of whom 30% assessed their health as good. Sixty percent of them characterized healthy nutrition correctly: restricted intake of salt and fat, plenty of vegetables and fruit. Only 10% of women reported discussing nutrition with their children, and they talked mostly about food, not nutrients. The principal criteria used by women in their choice of food is the family budget, followed by the quality of the food.

Low rates of exclusive breastfeeding of newborns have been observed. Only 28% of babies were breastfed for 6 months or longer, 38% were breastfed for 3–5 months and 34% were fed artificially.

In recent years, the variety of staple foods available at preschool children’s institutions has deteriorated considerably. The variety of meat, fish, milk and dairy products, cereals, vegetables and fruit has decreased. The percentage of children having hot meals in schools is unsatisfactory. According to a survey, only 18% of boys and 28% of girls had breakfast in their school every day. The energy value of the school breakfast, which consists of tea and a roll, only supplied 5–7% of the children’s daily energy requirement.

Murmansk

The breastfeeding project in Murmansk is being implemented successfully (Table 1). The second maternity home in the Russian Federation to be awarded the baby-friendly hospital title is in Murmansk. This is a good start for further action in the field of healthy nutrition and calls for concerted action by other sectors.

<table>
<thead>
<tr>
<th>Table 1. Nutrition of young children in Murmansk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breastfeeding</td>
</tr>
<tr>
<td>---------------</td>
</tr>
<tr>
<td>Maternity home</td>
</tr>
<tr>
<td>3 months</td>
</tr>
<tr>
<td>1 year</td>
</tr>
</tbody>
</table>
A training of trainers workshop entitled Healthy Nutrition of Women and their Families was held in Murmansk in September 1999 (report available). Participants, including obstetricians, paediatricians, primary health care doctors and hygienists, received important scientific information on nutrition. Implementation of this information should be the next step in Murmansk.

The diets of children at preschool institutions lack fresh vegetables and fruit. The principles of healthy eating are not applied when the menus are planned. There is a shortage of trained personnel and the purchase of food and raw materials is decentralized so that there is no control of standards.

Only 30% of schoolchildren have daily meals in school canteens. As with preschools, the principles of healthy nutrition are not applied when menus are planned, and the food is unpalatable and cold. There is no lunch break. Students eat buns, candies, potato chips, or bring sandwiches from home. Again, there is a lack of trained personnel and the purchase of food and raw materials is decentralized.

**Electrostal**

In Electrostal, the Municipal Integrated Programme of Measures to Promote Reproductive Health of the Population of the City and Ensure Safe Maternity for 2000–2001 is being implemented. This was approved by a resolution of the Head of the City Administration (No. 389/8 of 21 April 2000). The programme was developed on the basis of the state programme “Children of the Moscow Region” (No. 12/98 of 27 July 1998) and the municipal strategic plan “Public Health Promotion. Prevention of Cardiovascular and Other Non-Communicable Diseases”. The programme was developed by the Department of Social Welfare taking into account proposals by the Department of Education and Health. It is being implemented through the interaction between women’s consultations and the Division for Family Affairs, Maternity and Child Care at the Municipal Department of Social Welfare.

Where a family’s income is less than 1200 roubles a month, the pregnant woman is provided with 420 roubles’ worth of food through a special shop. The variety of food is selected in accordance with Ministry of Health recommendations.

The city is now addressing the issue of free supplies of iron compounds for anaemic pregnant women and free contraceptives for women of childbearing age from low-income families.

An important component of all prevention programmes is teaching healthy nutrition to the general public. Lectures and practical classes are given to health professionals, city administration officials and school teachers as part of the “Health Promotion at the Work Place” programme. Questioning of participants of the programme showed that 20% of municipal employees expressed an interest in being taught the principles of healthy nutrition, the overwhelming majority of them women – the principal organizers of nutrition of the family.

Training is conducted by qualified teachers whose knowledge corresponds to international healthy nutrition guidelines. They use training modules and teaching materials developed at the Training Centre of the State Research Centre for Preventive Medicine of the Ministry of Health of the Russian Federation, with technical support provided by the European Union TACIS project.
The economics of healthy eating in the family

To a great extent, the family budget determines the possibility of implementing recommendations for healthy nutrition. The general public often perceive that nutritional recommendations are not economically feasible, although this is not necessarily correct. The economic issues of healthy nutrition have seldom been studied in the Russian Federation, although they are extremely important for policy development.

Approximately 70% of the population of the Russian Federation grow their own food, which helps people in difficult economic situations. It may not be a long-term strategy, but in the short term it is very vital. It is essential to continue teaching schoolchildren how to cultivate and preserve food.

As part of the reforms, an approach to determine the consumer’s minimum level of foods and non-food commodities has been worked out in the Russia Federation. Since 1989, a set of foods (“the food basket”) has been developed, based on WHO recommendations and standards proposed by the Institute of Nutrition, Moscow. The minimum sets of foods show that, considering their relatively low cost, these can meet the requirements for healthy nutrition (Table 2).

<table>
<thead>
<tr>
<th>Food</th>
<th>Kg per year</th>
<th>Rubles per kilogram</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bread and bakery products</td>
<td>119</td>
<td>5.6</td>
<td>8</td>
</tr>
<tr>
<td>Potatoes</td>
<td>90</td>
<td>4.5</td>
<td>5</td>
</tr>
<tr>
<td>Vegetables (cabbage)</td>
<td>97</td>
<td>10</td>
<td>12</td>
</tr>
<tr>
<td>Fruit (apples)</td>
<td>14</td>
<td>23</td>
<td>20</td>
</tr>
<tr>
<td>Sugar</td>
<td>19</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>Meat products (beef)</td>
<td>23</td>
<td>43</td>
<td>55</td>
</tr>
<tr>
<td>Fish (pollack)</td>
<td>15</td>
<td>12</td>
<td>50</td>
</tr>
<tr>
<td>Milk</td>
<td>200</td>
<td>5.5</td>
<td>7</td>
</tr>
<tr>
<td>Eggs</td>
<td>90</td>
<td>10</td>
<td>11</td>
</tr>
<tr>
<td>Vegetable oil</td>
<td>11</td>
<td>19</td>
<td>23</td>
</tr>
<tr>
<td>Others (salt)</td>
<td>3</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Cost, rubles per month + 30%</td>
<td></td>
<td></td>
<td>483</td>
</tr>
<tr>
<td>Other costs</td>
<td></td>
<td>30%</td>
<td>622</td>
</tr>
</tbody>
</table>

The principles underlying the calculation of the food basket include:

• choosing simple (but not the cheapest) foods
• the cooking process, and
• replacing animal foods with plant foods.

The energy content of this basket is 2700 kcal for men, 2100–2200 kcal for women, 1500 kcal for children 0–6 years of age and 2400 kcal for children aged 7–15 years.

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1 Draft urban food and nutrition action plan for the WHO European Region, October 1999.
This basket should not be viewed as dietary guidelines. It is a model to show that enough food to supply nutrient requirements can be obtained at relatively low cost. The food standard is compared with what is actually consumed by the family, including food stocks. Food consumption is influenced by the composition of the family. It is important to teach the whole population how to optimize the cost of nutrition and still promote health.

Public awareness of healthy nutrition issues, i.e. the need to consume vegetables, fruit and low-fat products, will increase the demand for these goods, leading to their profitable production in a market-oriented economy.

A good example of this is in Finland where, following an awareness-raising campaign among the general public, there was an increase in the demand for products such as low-fat margarines and more vegetables, fruit and berries.

**Discussion of the book Healthy nutrition: action plan for regional programme development in the Russian Federation**

**General comments**

The Russian Academy of Medical Sciences Institute of Nutrition suggested that the title should be changed from *Regional policy of healthy nutrition of the population of the Russian Federation*. A national concept of nutrition policy in Federation has now been developed and approved. The present book could be referred to as guidelines for nutrition education of the general population. Participants discussed this proposal. The main disagreement concerning the provisional title of the book focused on the word “policy”. Although this word adds weight to the status of the book, it was felt that it was perceived with ambiguity in the Russia Federation and society’s interpretation of the word must be taken into account. In this case, “policy” means agreement on action which needs to be taken.

Dr A.K. Baturin, on behalf of the Institute of Nutrition, proposed that an official document endorsed by the Ministry of Health be issued, to contain a concise version of the provisions of the current book for the development of a regional policy of healthy nutrition.

Discussions regarding the title continued between the leading institutions, i.e. the State Research Centre for Preventive Medicine and the Institute of Nutrition. It has since been decided that the document should have the above title.

Participants felt that it would be desirable to incorporate the life cycle concept into the document (Fig. 1).

A number of current health problems relate to old incorrect dietary guidelines that continue to exist in the Russian Federation today. It is important to state this in the document. Recommendations for complementary feeding should be included as an annex.
**Comments on individual chapters**

- Section 5.2 should contain more data on iodine deficiency, anaemia and overweight as well as on low-income families.
- Section 5.3 should mention the importance of studying the needs of manufacturers and the market in the region.
- It is necessary to be more specific about how the family budget allows dietary guidelines to be followed. The budget is the key factor determining food consumption. An example of the food basket calculation should be given.
- Section 6.4 on breastfeeding should include a list of baby-friendly hospitals in the Russian Federation.
- Representatives of Murmansk will prepare materials concerning the possibility of changing public catering and incentives for procuring foods for school meals, to be added to section 6.9.
- All the comments will be reviewed by the editorial group and incorporated into the Guidebook.
- All members of the working group were invited to provide examples of nutrition programmes available in their regions. The Guidebook would be amended by the end of July 2000 and the next draft sent to all members of the working group and participants in the Arkhangelsk Conference to be held on 19–20 September 2000, when it would be discussed by policy-makers from Murmansk and Arkhangelsk.
Annex I

PROGRAMME

Wednesday, 14 June

Chairpersons: A. Robertson, A. Baturin

10.00–10.20 Opening
Welcoming addresses by the City Administration, Professor Igor S. Glasunov, Head, Department of Policy Development of Disease Prevention & Health Promotion, National Centre of Preventive Medicine, Moscow

10.20–11.00 The First Food and Nutrition Action Plan for Europe, 2000–2005: the role of the woman and the family. A. Robertson, Acting Regional Adviser Nutrition Programme, Food and Nutrition Policy unit, WHO Regional Office for Europe

11.00–11.20 A strategy of social action to strengthen and promote the role of the woman in healthy nutrition. Dr T. Kamardina, Senior research worker, Department of Policy and Strategy Development in Disease Prevention and Health Promotion, National Centre of Preventive Medicine, Moscow

11.50–12.10 Nutrition of women and children in the Russian Federation. Dr Alexander K. Baturin, Deputy Director, Institute of Nutrition, Academy of Medical Sciences, Moscow

12.10–13.30 Presentations by the regions participating in the Regional Policy for Healthy Nutrition of the Population in The Russian Federation project on the role of the woman and the family in healthy nutrition.

15.00–17.30 Group work. Issues for discussion: nutrition of young and school-age children – assessment of the current problems, recommendations for resolving them.

Thursday 15 June

Chairpersons: I. Glasunov, M. Shraga

09.30–11.00 Group work (continued)

11.30–13.00 Presentation and discussion of results of the group work. Reflection in the guidebook of the role of the women and the family.

14.00–17.00 Discussion of the guidebook Regional policy of healthy nutrition of the population in the Russian Federation:

– Recommendations by the WHO Regional Office for Europe concerning the contents of the guidebook. A. Robertson.
– General comments and recommendations concerning the guidebook.
– Discussion of the guidebook chapter by chapter.
– A further action plan to promote the guidebook at the national and regional levels.

17.00–17.00 Closure
Annex 2

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