Clinical brief

NUTRITION-FRIENDLY SCHOOLS INITIATIVE (NFSI): Another brainstorming strategy.

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besity and other nutrition-related diseases are increasingly significant causes of disability and premature death worldwide. Not only are overweight and obesity increasing worldwide at an alarming rate, but both developed and developing countries, including low- and middle-income countries, are seriously affected. Furthermore, there has been a rapid rise in the numbers of children affected by excess body weight, both in developed countries and in countries in economic transition. In some countries, the epidemic of overweight and obesity among children occurs alongside continuing problems of undernutrition and various micronutrient deficiencies (especially iron, vitamin A, iodine and zinc), creating a 'double burden' of nutrition-related ill health in the population, including children. While undernutrition continues to be a major problem in many developing countries, the problem of overweight and obesity have reached epidemic proportions globally, and both developed and developing countries are seriously affected. While it kills in early life, it also leads to a high risk of disease and death later in life.

These issues are often perceived to be separate. However, in reality both are often rooted in poverty and co-exist in communities, and even in the same households, in most countries. The double burden of nutrition-related ill-health has common causes, such as inadequate foetal, infant and young child nutrition followed by exposure to unhealthy dietary and physical activity patterns. Nutrition-related health problems in children are increasingly significant causes of disability and premature deaths worldwide.

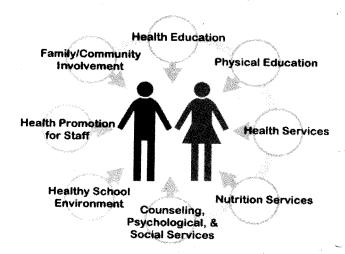
Therefore, based on the principle that effectively addressing the increasing global public health problem of the double burden of nutrition-related ill-health requires common policy options, the Nutrition-Friendly Schools Initiative, has been developed as a follow-up to the WHO Expert Meeting on Childhood Obesity (Kobe, Japan, 20-24 June 2005), to formulate and

implement integrated intervention programmes to improve the nutritional status of school-age children and adolescents. This targets the school setting, bringing together on-going efforts and work of all concerned agencies and partners.

The main aim of the NFSI is to provide a framework for designing integrated school-based intervention programmes which address the double burden of nutrition-related ill-health, building on and interconnecting the ongoing work of various agencies and partners. These include the UN agencies joint Focusing Resources on Effective School Health (FRESH) Initiative, Essential Package (UNICEF/WFP), Child-Friendly Schools (UNICEF), Health Promoting Schools (WHO), School Food and Nutrition Education programmes (FAO) to mention just a few. It is worth noting that the NFSI applies the concept and principles of the Baby-friendly Hospital Initiative (BFHI).

Improving the nutritional status of school-aged children is an effective investment for the future generation. Preschools and schools offer many opportunities to promote healthy dietary and physical activity patterns for children, and are also a potential access point for engaging parents and community members in preventing child malnutrition in all its forms (i.e. undernutrition, micronutrient deficiencies, and obesity and other nutrition-related chronic diseases). School settings also offer many opportunities to promote healthy diet and physical activity habits for children. They act as access points for engaging parents and community members in the prevention of diseases associated with poor child nutrition.

Healthy nutrition improves child well-being and learning ability, leading to better academic performance. The universality of the school setting for gaining access to children makes it highly relevant to global efforts to combat the increasing public health problems of the double burden of nutrition-related ill-health.



The NFSI will encourage schools to make active efforts to improve the nutritional status of children and adolescents and increase their physical activity levels by meeting the following minimum criteria:

- develop a written nutrition-friendly school policy identifying objectives and setting timelines and milestones:
- develop an action plan identifying roles and responsibilities, and methods for monitoring and reporting against the objectives;
- ensure awareness and capacity building of the school community (teachers, school staff, parents, schoolchildren, local community);
- ensure curriculum development and modification regarding nutrition and physical activity education;
- provide a supportive school environment (healthy foods and opportunities for physical activity);
- provide school nutrition and health services.

A unique feature of the NFSI is the focus on the wider school community to help create a supportive environment conducive to improving health and nutrition. Local stake holders include for example: farmers, the media, retailers, local health services, local authorities, sports centers, and catering services.

The agreed objectives of the NFSI are to:

- 1. Provide a framework for designing school-based intervention programmes which address the doubleburden of nutrition-related ill health;
- 2. Serve as a stimulating mechanism for inter-connecting the various on-going; school-based intervention programmes addressing malnutrition in all its forms.

The NFSI pilot phase started in 2006-2007 and involved selected schools in European countries including Croatia, Denmark, Georgia and Latvia. At present it is still at pilot phases in several European countries. It is only after these pilot phases must have been completed, evaluated and put in guidelines, that WHO will decide to introduce the Initiative in developing countries especially Africa

Suggested For Further Reading:

- 1. Nutrition Friendly Schools: Improving the health and nutrition of school-age children and adolescents. Available from: http://www.euro.who.int
- WHO. Report of the brainstorming meeting on the development of a framework on the Nutrition-Friendly Schools Initiative, 27-28 February 2006 Montreux, Switzerland
- 3. Anonymous. Nutrition-Friendly Schools Initiative (NFSI). Public Health Nutr 9(5): 658-60.
- 4. WHO. Nutrition-Friendly Schools Initiative (NFSI). Available from: http://www.pronutrition.org/archive/ 200611/msg00014.php
- WHO. Nutrition-Friendly Schools Initiative (NFSI). Available from: http://www.who.int/nutrition/topics/ nut school aged/en/index.html
- Anonymous. WHO Nutrition Friendly Schools Initiative. Available from: http://www.dur.ac.uk/ school.health/orb/research/whonfsi