International Life Sciences Institute Japan Center for Health Promotion

# ILSI Japan CHP Newsletter

March 2012 Number 15

#### **Contents**

- 1 Project PAN
- 2 Project SWAN
- 3 Project IDEA

# Project PAN



# Introducing "TAKE10!® for the Elderly" to the Vietnamese people



Responding to interest from the Vietnam Public Health Association (VPHA) in the "TAKE10!® Program for the Elderly", developed by ILSI Japan CHP, we held a meeting in Hanoi on December 16, 2011 to consider the needs for and viability of such a program in Vietnam. Participants included representatives from the Ministry of Health, the National Institute of Nutrition, the VPHA and the Hanoi School of Public Health as well as Mr.

Togami and Ms. Kimura from ILSI Japan CHP.

Following presentations by the VPHA about their activities and ILSI Japan CHP to introduce "TAKE10!® for Elderly", there was a discussion session. It was decided that ILSI Japan CHP will cooperate on developing a Vietnamese version of TAKE10!®. Prior to the session, on December 15th, we conducted a field visit to a rural area in Thai Binh and held discussions with the personnel and volunteers operating in the region. They responded with enthusiasm to the prospect of employing TAKE10!® at their locations.

Although Vietnam has only just entered an era of societal aging, it is predicted that Vietnamese society will age even more rapidly than Japanese society. Therefore, they are considering measures to take early action, which include drawing on Japanese experiences. Since Vietnam has unique



customs and culture, TAKE10!® will need to be modified to suit Vietnamese needs. Therefore, ILSI Japan CHP will

assist the VPHA in developing a Vietnamese version of TAKE10!® and will begin by translating the Japanese educational materials into Vietnamese.

# What's Project PAN (Physical Activity and Nutrition)?

To promote healthier aging, Project PAN seeks to prevent lifestyle-related diseases including obesity among middle-aged people and keep the elderly out of being bedridden. Project PAN develops science-evidenced programs to promote physical exercise and to improve nutritional status of people through changing their lifestyles.

ILŚI Japan CHP is pursuing two programs named "TAKE10!®" and "LiSM10!®". LiSM10!®

ILSI Japan CHP developed "LiSM10!®" (Lifestyle Modification) that supports improvements of risk factors of lifestyle-related diseases of employees in **worksites**. This program focuses on health promotion for physical activity and dieting after medical check-ups in worksites.

"LiSM10!®" is consists of 1) Individual objective setting and recording implementation. 2) Individual and periodical counseling by professionals to support individual program for 6 months, and 3) Support programs from worksites and families of individuals.

#### TAKE10!® for the elderly

Aiming to support "Healthier longevity" among the elderly and to reduce costs of the national health care program, ILSI Japan CHP developed TAKE10!® for the elderly. The program is featured by effective and unique combination of appropriate physical activity and proper dieting habits, which is different from conventional programs for preventing lifestyle-related diseases of adults.



# TAKE10!® Leaders Debut in Nishiki-cho, Iwakuni City

We have conducted training for TAKE10!® leaders in Nishiki-cho, Iwakuni City since 2010 under the auspices of Iwakuni City Council of Social Welfare. In July 2011, the second meeting for new TAKE10! ® leaders was held and included presentations. The Nishiki Branch of Iwakuni City Council of

Social Welfare has offered a welfare service for 26 years called "Fureai Home Delivering Meal Service", in

which volunteers cook and deliver boxed lunches to elderly who live alone. This service was combined with the TAKE10!® program, during which the importance of eating a variety of foods was explained and group exercises were conducted at community centers. This activity has the added benefit of encouraging elderly people who seldom get out of the house, to walk to the community center and participate in the activities. It is hoped that TAKE10!® will become a regular part of the community.



## Senboku Newtown Project in Osaka



Since last Autumn, we have been cooperating with Osaka City University to offer TAKE10!® sessions for community members of Makizukadai at Senboku Newtown, Sakai City, Osaka. Ms. Kimura, ILSI Japan CHP took part in these sessions as a lecturer last October and December.

With the aim of regenerating the community so that people can live more healthy and comfortable lives, a "Senboku *Hottokenai* Network" was organized to utilize community human and material resources. This activity makes use of the TAKE10!® program. Ideas for creating modern communities which provide health care services via tablet computers in each household are also being considered.

#### TAKE10! ® Up To Now

An intervention study was conducted for 1400 elderly population in Nangai village, Akita Prefecture from July 2002 for one year. The study proved that TAKE10!® for the elderly can effectively be introduced to local communities and can improve regular physical exercise practices and dieting habits, maintain muscle strength and improve physiological functions.

The result of the study was reported at the Annual meeting of Japanese Society of Public Health in November 2004. Three national newspapers and eight local newspapers covered the study. More than 8,000 inquiries have been received, including inquiries from local government offices and organizations, and more than 20,000 copies of the booklets have been sold. Many lecture sessions by ILSI Japan CHP have been conducted.

The "Sumida TAKE10!®" program was started by Sumida Ward Government of Tokyo in October 2005. The program was conducted at six sites and included lecture sessions on the program and physical exercise practices.

# **Project SWAN**



## **SWAN2** Vietnam: IEC Implemented in Communes

Project SWAN2 – A project to improve the nutritional status of residents and water supply by improving the capabilities of local authorities in Vietnam – has been effectively implemented in 16 communes.

Specifically, the Information, Education, Communication (IEC) Program has started in the communes where work to modify Water Treatment Facilities (WTFs) has been completed since July 2011. In this IEC program, various activities are being implemented using a participatory approach; household visits using posters, drawing contests on water and sanitation at primary schools, announcements by loudspeakers and cooking classes. In addition, training on effective communication has been provided to health workers in charge of IEC activities. It is expected that these IEC activities will enhance the local residents' health status and knowledge of clean water and nutrition. These activities are now being conducted in all 16 communes.

In order to evaluate these IEC activities, the 2<sup>nd</sup> KAP (Knowledge, Attitude and Practice) survey will be conducted.

With regard to the technical program, we plan to strengthen stable basic operations of WTFs and



proper record keeping by monitoring and feedback to Water Management Union.

Through these IEC and technical programs, we hope to assist



local communities to eventually operate project activities independently.

#### What's Project SWAN (Safe Water

#### and Nutrition)?

WHO has reported that 1.1 billion people do not have access to safe drinking water, in many developing countries the intake of unsafe water and unhygienic environments cause diarrhea and infectious diseases among children. This interferes with the intake necessary nutrients, resulting malnutrition. Even if water treatment facilities exist, it is often found that these facilities are not properly designed and that proper treatment is not conducted, including the use of chemicals to remove contaminants, resulting in the failure to meet WHO microbiological and chemical standards.

Project SWAN aims to establish sustainable water supply and health management models in rural and suburban areas through a participatory approach with inhabitants by enhancing knowledge of drinking water, nutrition, food hygiene and sanitation at the household level, optimizing the operation of water treatment facilities to meet Vietnamese standards, establishing effective management systems to sustain safe water supplies and promoting health communication by community-based participatory approaches.

It is expected that these models will be applicable to and can be expanded to other rural and suburban areas in Vietnam.

## **SWAN Indonesia: A Running Start**

Utilizing the accumulated knowledge and methods developed in SWAN Vietnam, we are planning to implement a SWAN project in Indonesia. With cooperation of ILSI SEA Region, preparation for this project is currently underway.

#### **Achievements of Project SWAN to Date**

With an emphasis on rural areas in developing countries in Asia, where public water works are lacking, ILSI Japan CHP has since 2001 been investigating the quality of drinking water and the needs of local residents toward safe water supplies, food safety and hygienic environment. Through experiments we have confirmed that the water quality can be improved to meet the Vietnamese standards for drinking water by optimizing the operation of existing water treatment facilities.

Based on the preliminary investigations, a proposal titled "Participatory approach for improving safe water supply, nutrition and health environment" was proposed and approved by JICA (Japanese International Cooperation Agency) as a 3-year grassroots technical assistance project. In November 2005, the project was started in three communities (Hanoi-Tam Hiep· Hanoi-Dai Mo· Nam Dinh-Quang Trung) in northern Vietnam where 2,500 households are supplied from local water treatment facilities. The Water Management Union composed of a technical group and an IEC group has been working to generate a synergistic effect to improve the water supply and health management system. We have confirmed that the water quality has been improvement in the three communities following the WTF renovation. Project SWAN was completed with great success in November 2008.

## **Project IDEA**

## **Large-Scale Market Trail Completed in the Philippines**

A province-wide market trial of iron-fortified rice was successfully completed in Zambales Province in October 2011. The rice premix (rice and iron compound) was produced and blended with ordinary rice to produce the fortified rice near Manila and the rice was marketed in the province for one year. The trial is under evaluation and a complete report is due in April. A strategic plan for implementing a fortified rice program on a nationwide basis was developed by FNRI and government agencies with support from ILSI.



### **Efficacy Study on Fortified Rice under Evaluation in** Vietnam.

As reported in the last newsletter, the study showed that regular intake of the iron fortified rice is efficacious in improving iron deficiency anemia. In the study, the impact of iron fortification of rice on the bioavailability of zinc, selenium and vitamin A was also evaluated. The results will be reported in April.

## Survey on Feasibility of Fortification of Rice with Iron and Lysine

A review meeting was held in July in Bangarole which included members from ILSI India and scientists who specialize in this area. It was agreed that double fortification of iron and lysine is effective in improving nutrition and that rice would be a good vehicle for fortification in southern states. It was decided to pursue an efficacy study utilizing a school lunch program (Mid-Day-Meal) in Karnataka. For this purpose a rice premix will be developed, which meets Indian cooking practices.

**Achievements of Project IDEA to Date** 

In the Philippines, ILSI CHP has worked with FNRI on the stability and acceptability of several alternatives for the fortification of rice with iron. The overall evaluation indicated that extruded rice with ferrous sulfate and micronized ferric pyrophosphate are the most stable and have the most acceptable taste and color. An efficacy study was conducted for 6 months in 2004 by means of an intervention program using primary school pupils 6-8 years old in Metro Manila. The intervention program demonstrated that both of fortification alternatives significantly improved anemia prevalence. A market trial started in April 2008 and confirmed the effectiveness in Orion Municipality.

In Cambodia, fish sauce fortified with NaFeEDTA was introduced in Kampot in March 2007 and Siem Reap in August. ILSI Japan CHP is working with RACHA to promote social marketing programs, to establish quality monitoring of the market and to establish a surveillance system for monitoring IDA. The effectiveness of the fortification was confirmed. Akzo Nobel is supporting the

project by donating NaFeEDTA.

A literature search on complementary feeding resulted in the report "Towards improved infant and young child nutrition in Asia through appropriate complementary feeding" which can be used as a basis for the research and

development of complementary feeding.
In Vietnam, in collaboration with National Institute of Nutrition (NIN), ILSI CHP has pursued iron fortification (NaFeEDTA) of fish sauce. A series of studies verified that regular consumption of iron-fortified fish sauce significantly reduced the prevalence of anemia. Iron-fortified fish sauce was launched in 2006 based on the scientific outcomes of the research and development. The plan calls for 10 large production plants to produce fortified fish sauce by 2009. With financial support from GAIN, the national launch is scheduled in 5 years, which will include programs for production/distribution, quality assurance, communication of nutrition and health and monitoring/surveillance. ILSI Japan CHP will continue to provide professional support to ensure a successful national launch.

In China, the Iron Fortified Soy Sauce Program has been launched since 2004 as the national policy to prevent anemia by ILSI Focal Point in China

and CDC China.

#### What's Project IDEA( Iron **Deficiency Elimination Action)?**

The difficulty in maintaining a variety of food sources results in malnutrition and micronutrient deficiencies in the developing countries. Iron deficiency anemia, one of the most prevalent threats to public health, impairs brain development, immune functioning, and learning ability in infants and children. It can also be a major cause of death among pregnant women, and dramatically reduces productivity among working adults, which in turn hinders the struggle against poverty. The UN ACC/SCN (the United Nations Administrative Committee on Coordination/ Sub-Committee on Nutrition) reported that 3.5 billion people suffer from iron deficiency anemia, and that it has been more difficult to overcome this than other micronutrient deficiencies.

Project IDEA works to reduce iron deficiency anemia (IDA) in developing countries by adding iron commonly-eaten and commerciallyproduced foods such as condiments and staples, based on the dietary patterns unique to each country.

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