

Sustainable Highland Development: Health cares and nutrition

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*Presentation at the International Conference ..
On Sustainable Highland Development: The
Royal Project Model.*

Royal Park Rajapruek, Chaing Mai

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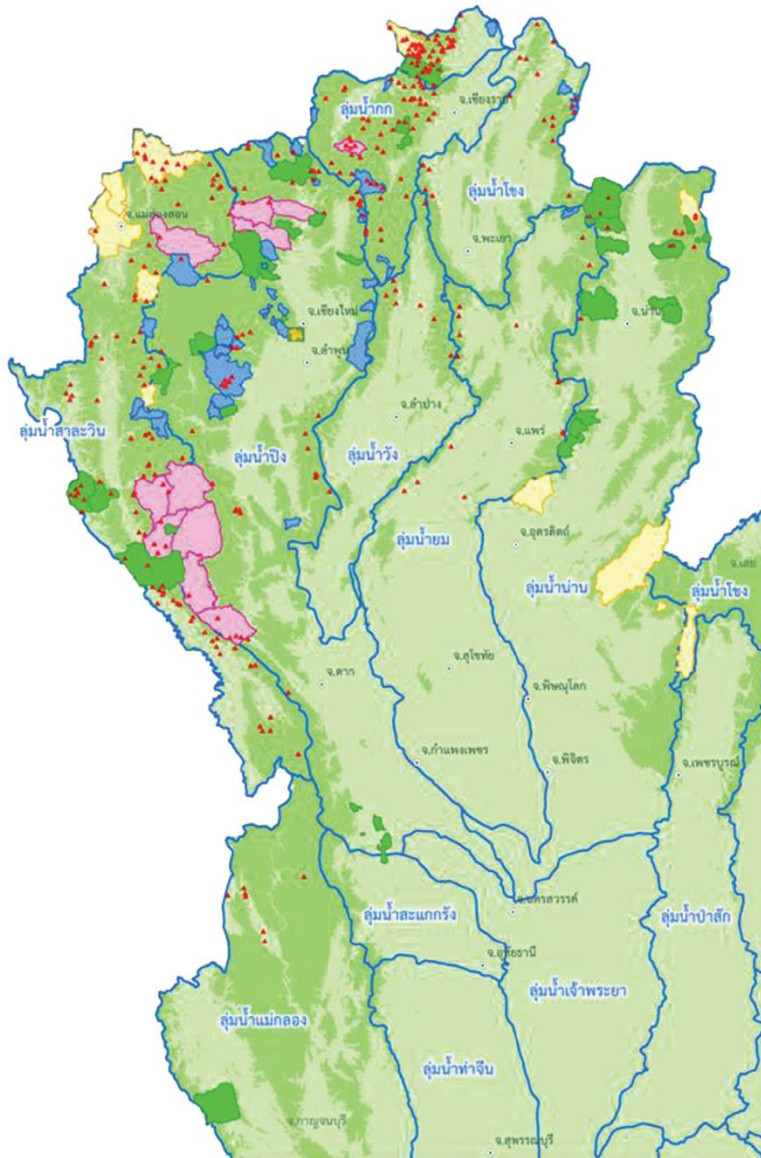
Presentation Outline

- The Royal Highland Development Project
- Alleviation of food insecurity and under-nutrition in Thailand
- Sustainable health and nutrition cares
- Conclusion

The Royal Project Foundation

- 1969 H.M. the King Rama 9 initiated the Royal Project during his visit to an opium growing village in Doi Pui
- 1972, The UN/Thai Program for Drug Abuse Control was begun.
- Subsequently, research and development supported by the USDA to the Royal Project and Kasetsart University
- 1992, the royal project changed its name to the Royal Project Foundation (RPF) and became a public organization for the people's benefit permanently.

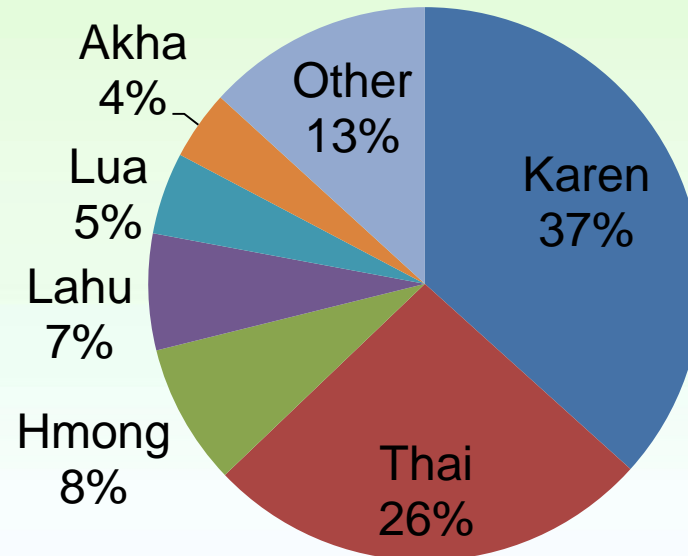
Thai Highlands



Areas:

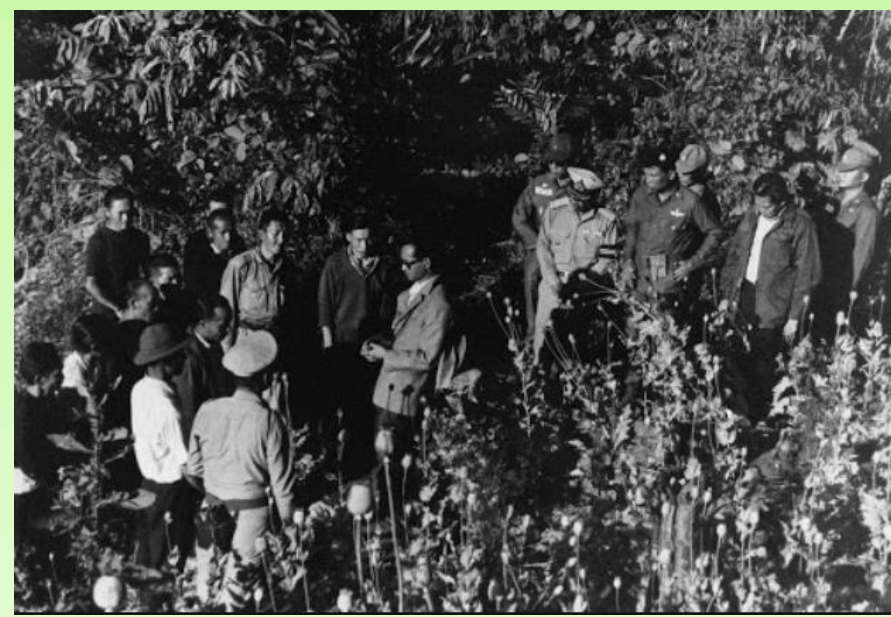
- 67.22 million rai (= 10.76 million hectares)
- 4,148 villages in 20 provinces area in northern and western part (Chaing Mai: 34.1%, Mae Hong Son: 13.69%, Chaing Rai: 13.40%)

Hill-tribe population: 233,826 households
(740,494 people)



Main problems of highland in Northern Thailand during the sixty .

- Poverty
- Opium poppy cultivation
- Deforestation: Slash and burn cultivation
- Lack of basic services & infrastructures



Opium field in the past



Peaches research



Royal coffee project



Source: the Royal Project Foundation **Slash and burn cultivation on highland**

H.M the Late King Rama 9 and Highland Development Project since 1969



The Royal project Foundation



The Royal project: food processing/factory



Doi Kham: Gift set online order

The Royal Project Foundation

The goals of the Royal Project Foundation are:

- To help hill tribes achieve a better life
- To prevent the destruction of natural resources
- To stop opium growing
- To care for make best use of the soil in each area
- To increase the amount of alternative agriculture for the benefit of Thailand's economy

There are 38 development centers spread across five provinces in northern Thailand

Strategies and actions of the Royal project



Benefits

- To 288 villages 168,445 people living in the highland through its 38 development centers in 5 Northern provinces; Chiang Mai, Lampung, Chiang Rai, Phayao, and Mae Hong Son.
- The expansion to other highland areas in Chiang Rai, Mae Hong Son, Tak, Nan, Kamphaeng Phet and Kanchanaburi.
- The successful outcomes: raising incomes, improvement quality of life of people and communities, crop replacement, strengthening of people and communities and the restoration of watershed forests in the highlands, scaling up in others areas and technical cooperation with many countries in highland development with Taiwan ROC, Lao PDR, Myanmar and Bhutan.

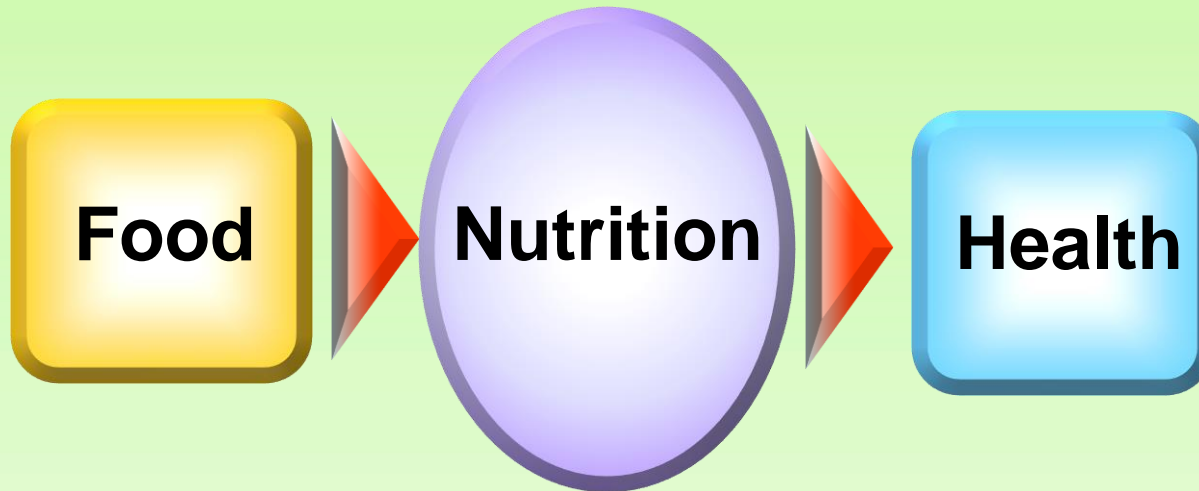
Key success factors of the Royal Project in highland as business model

- The Royal Brand
- Create Shared Values: social issues and business values
- Multi stakeholders for actions and social enterprises. .co-venturing business
- Management principle with active people participation

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- Agriculture/
• Food supply/
• Service



- Promotion
• Prevention
• Treatment
• Rehabilitation

**Nutrition is a link between food and health,
regarding the fulfillment of energy, protein and micronutrient
requirements and non-nutrients from food in human life
course**



Ultimate goals

Good nutrition & Well-being for all

Thailand

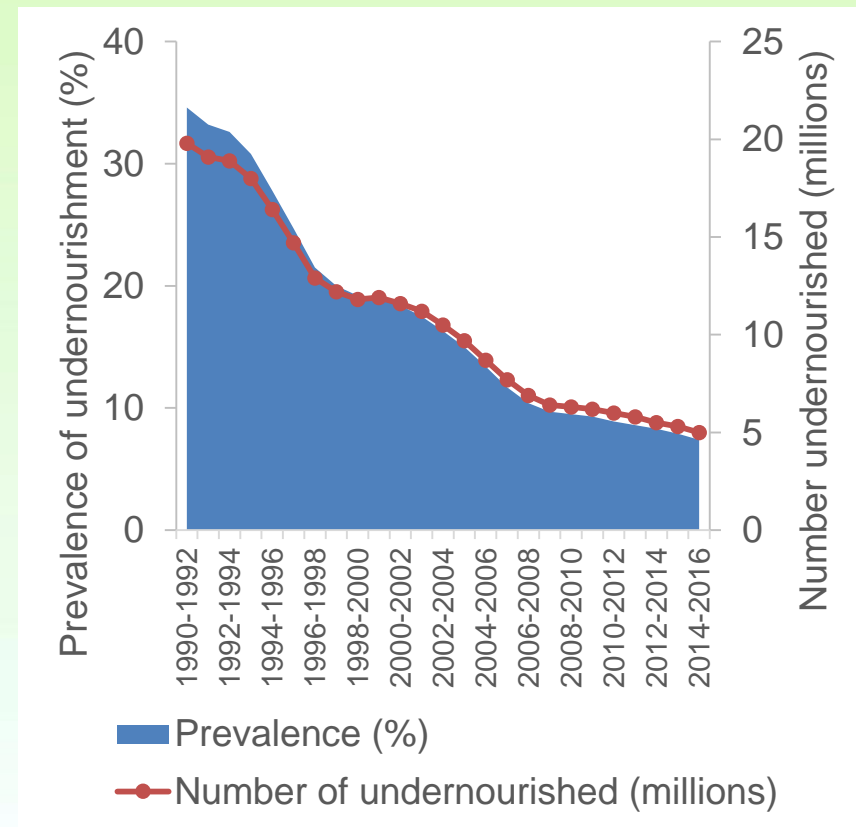


- Population of 68.3 m.
- Area of 514,000 sq. kilometers
- Success in reduction of maternal and child malnutrition since the eighty under the Poverty Alleviation Plan (PAP)
- Currently facing with double burden of malnutrition (DBM), a coexistence of under and over nutrition, and related non-communicable diseases (NCDs)
- Thailand has been a major food exporter
- Mountain areas confine mainly in the Northern Region

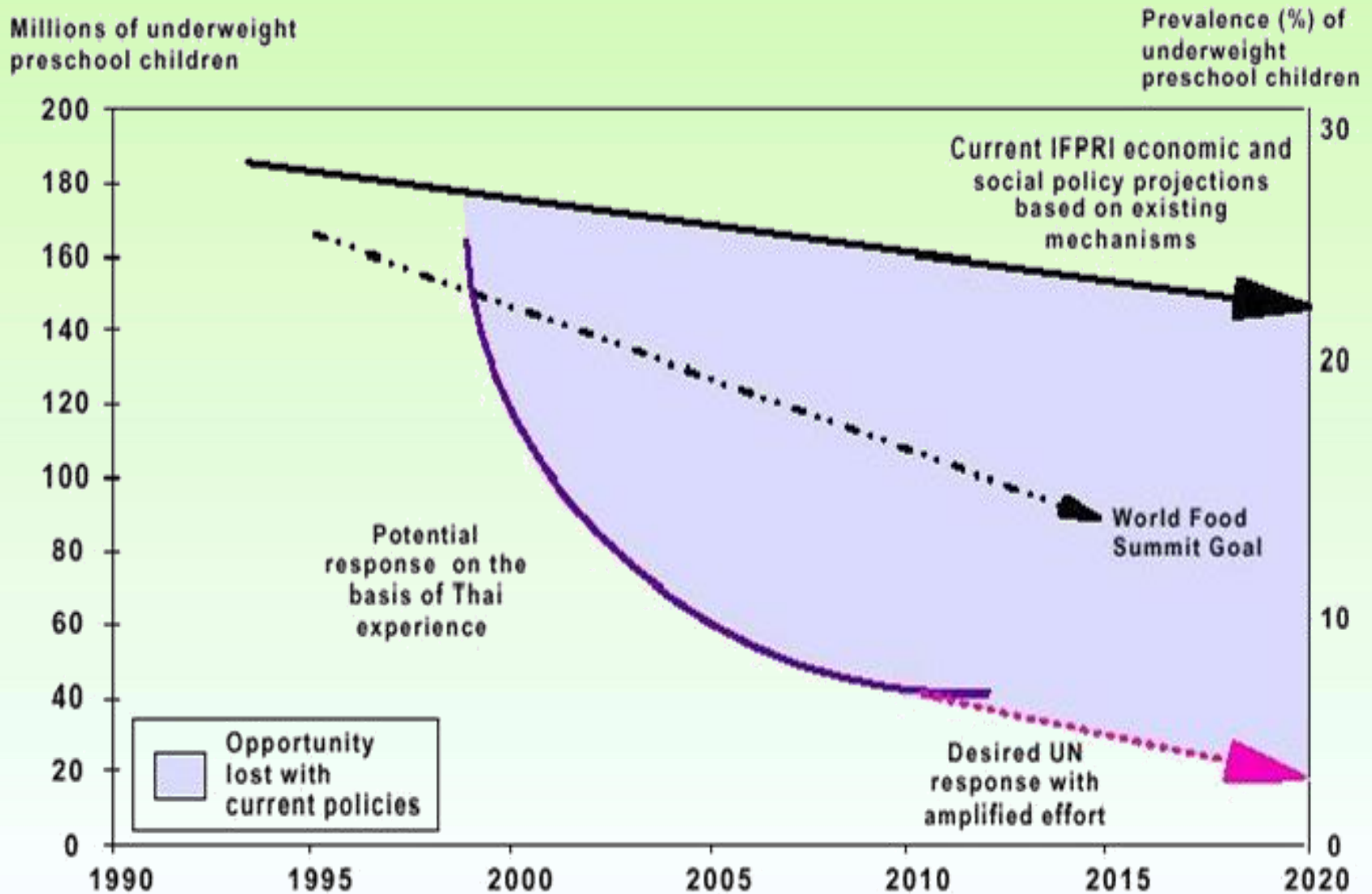
Great progress in reducing hunger in Thailand*

- Hunger fell from 35% to 7% (1990-2015) or reduced by 79%
- Number of hungry people fell from 20 to 5 million in same period or reduced by 75%
- Thailand has achieved MDGs

Undernourishment in Thailand



Elimination of undernutrition: a global deficit and priorities*



National Rural Development Committee



Poverty Alleviation Plan (PAP)

- **Multi-stakeholder Comm.**
- **Nutrition goals and indicators are incorporated to strategies and actions.**
- **Community based approaches**
- **Provision of basic services with mass mobilization: 1 volunteer /10 households**
- **Agri.& food production for subsistence econ., suppl. food for mothers, complementary food for IYC & dairy farm for school children**

Basic Principles of the PAP

1. Priority to **specific areas** with high poverty concentration
2. Develop living standard to **subsistence level** with **minimum basic services** to be **available everywhere** in the specified areas
3. Emphasis on the need of making improvements so that people can gradually do more to take care of themselves
4. Emphasis on **low-cost technology** that people can handle themselves
5. **Maximum community participation**

Community-Based Approaches

- Is an *integrated program* implemented at local level (district level and below)
- *National commitment* with sound nutrition improvement strategies and goals
- *Community actions*: basic services, mass mobilization, mutual efforts/actions to reach all people and to prevent malnutrition

Components of a successful community based program

Minimum Basic Services (Health, Education, Agr. Extension)

Menus (Activities)

- Antenatal Cares (ANC)
- Growth Monitoring and Promotion (GMP)
- Food production
- Food and nutrition education
- Food sanitation & safety
- School lunch and milk program since 1992
- Other activities

Supportive System

- Training
- Funding
- Problem Solving
- Supervision

Interface

(service providers and community leaders)

- Plan/goals
- Implementation
- Monitoring/evaluation

Community Leaders
Family
Individual

→ Facilitators

→ Mobilizers
(1:10 households)

Basic Minimum Needs Goals/Indicators

Success components of community-based program

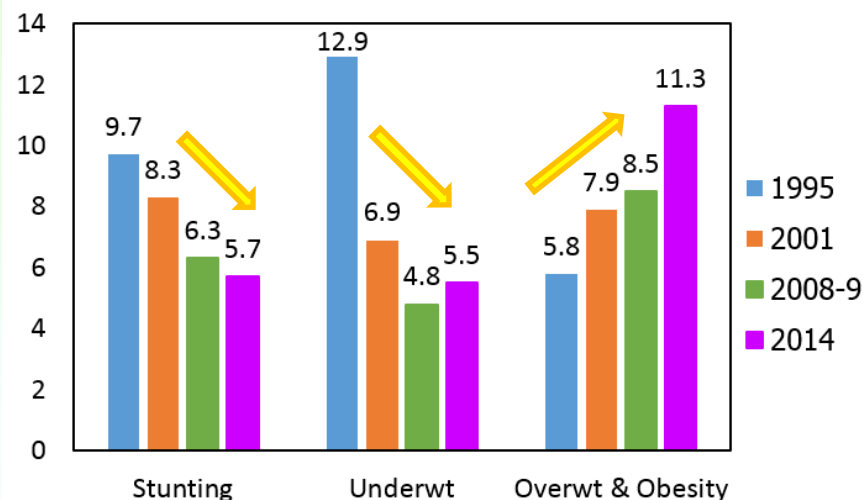
1. Provision of basis services
2. Active community organization/leader engagement
3. Community volunteers of 1:10 households
4. Community goals and indicators for situation analysis, planning, actions and evaluation
5. Community actions including remedial actions

Improvement of maternal & child nutrition, Thailand

	1980	1990	2006
ANC coverage %	35	75	95
Anemia in pregnancy %	50-75	18.8	10
LBW %	16	10	<10
Underweight of under 5 %	51	20	<10

Recent trend of nutritional status of under 5*

* Source: NHES 2; Holistic Development of Thai Children; NFNS 5; NHES 4; and NHES 5



Nutritional status of underfive in upland Chiang Mai*

Groups / Village	Number of children		Stunting (height for age) No. (%)		Underweight (weight for age) No. (%)		Wasting (weight for height) No. (%)	
	Baseline	Endline	Baseline	Endline	Baseline	Endline	Baseline	Endline
Control								
Ban Mae Hae Tai/ Ban Sedosa	28	31	10 (35.7%)	6 (19.4%)	6 (21.4%)	4 (12.9%)	0 (0.0%)	2 (6.5%)
Ban Mued Long	16	16	6 (37.5%)	4 (25.0%)	1 (6.2%)	2 (12.5%)	0 (0.0%)	0 (0.0%)
Ban Pae	29	31	10 (34.5%)	13 (41.9%)	6 (20.7%)	4 (12.9%)	2 (6.9%)	2 (6.5%)
Ban Kong Kai	22	15	2 (9.1%)	1 (6.7%)	0 (0.0%)	0 (0.0%)	2 (9.1%)	0 (0.0%)
Total	95	93	28 (29.5%)	24 (25.8%)	13 (13.7%)	10 (10.8%)	4 (4.2%)	4 (4.3%)
Intervention								
Ban Kok Noi	20	16	1 (5.0%)	1 (6.2%)	2 (10.0%)	2 (12.5%)	1 (5.0%)	0 (0.0%)
Ban Mae Khi Muk Noi	23	21	8 (34.8%)	4 (19.0%)	3 (13.0%)	4 (19.0%)	1 (4.3%)	2 (9.5%)
Ban Ho	28	32	5 (17.9%)	4 (12.5%)	2 (7.1%)	4 (12.5%)	1 (3.6%)	1 (3.1%)
Ban Tung Kae	41	35	19 (46.3%)	11 (31.4%)	11 (26.8%)	9 (25.7%)	1 (2.4%)	2 (5.7%)
Total	112	104	33 (29.5%)	20 (19.2%)	18 (16.1%)	19 (18.3%)	4 (3.6%)	5 (4.8%)

*From IDRC project 2016: Nutrition and food security in upland of Thailand
(One year intervention)

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National Food Committee



Str Framework for Food Mgt (SFFM)

- Multi-stakeholder approaches
- SFFM covers: Food Security, quality & Safety, Education & research, and Management
- Linking of food, nutrition & health implemented at central & community levels for nutrition and p/c of NCDs
- Roles of agriculture and food systems:
 - .Ensuring nutritious and safe food supply i.e fruits & veg; low sugar, fat & sodium food; legume & fishes, milk ...etc
 - .Facilitation of trade and tourism
 - .Caring of environment & sustainable agriculture.

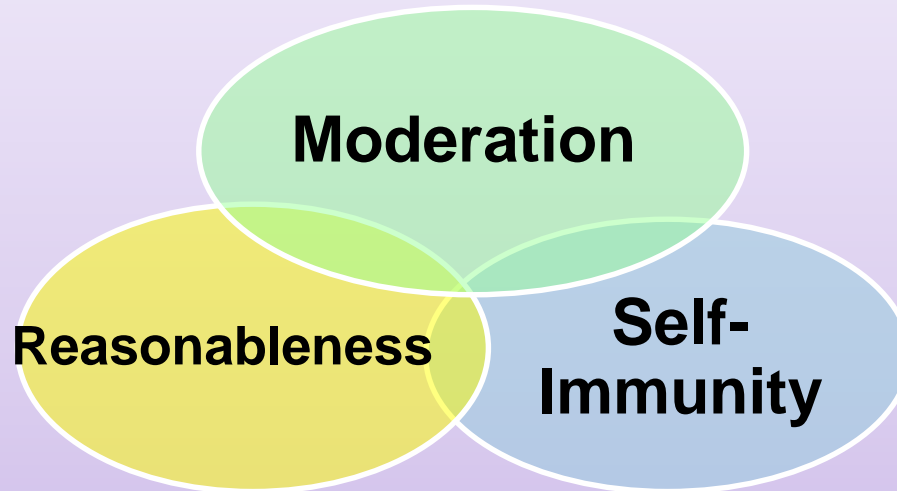


SUSTAINABLE DEVELOPMENT GOALS



King Bhumibol's Sufficiency Economy Philosophy

The Middle Path



Knowledge and wisdom

Ethic and morality

**Lead
to**

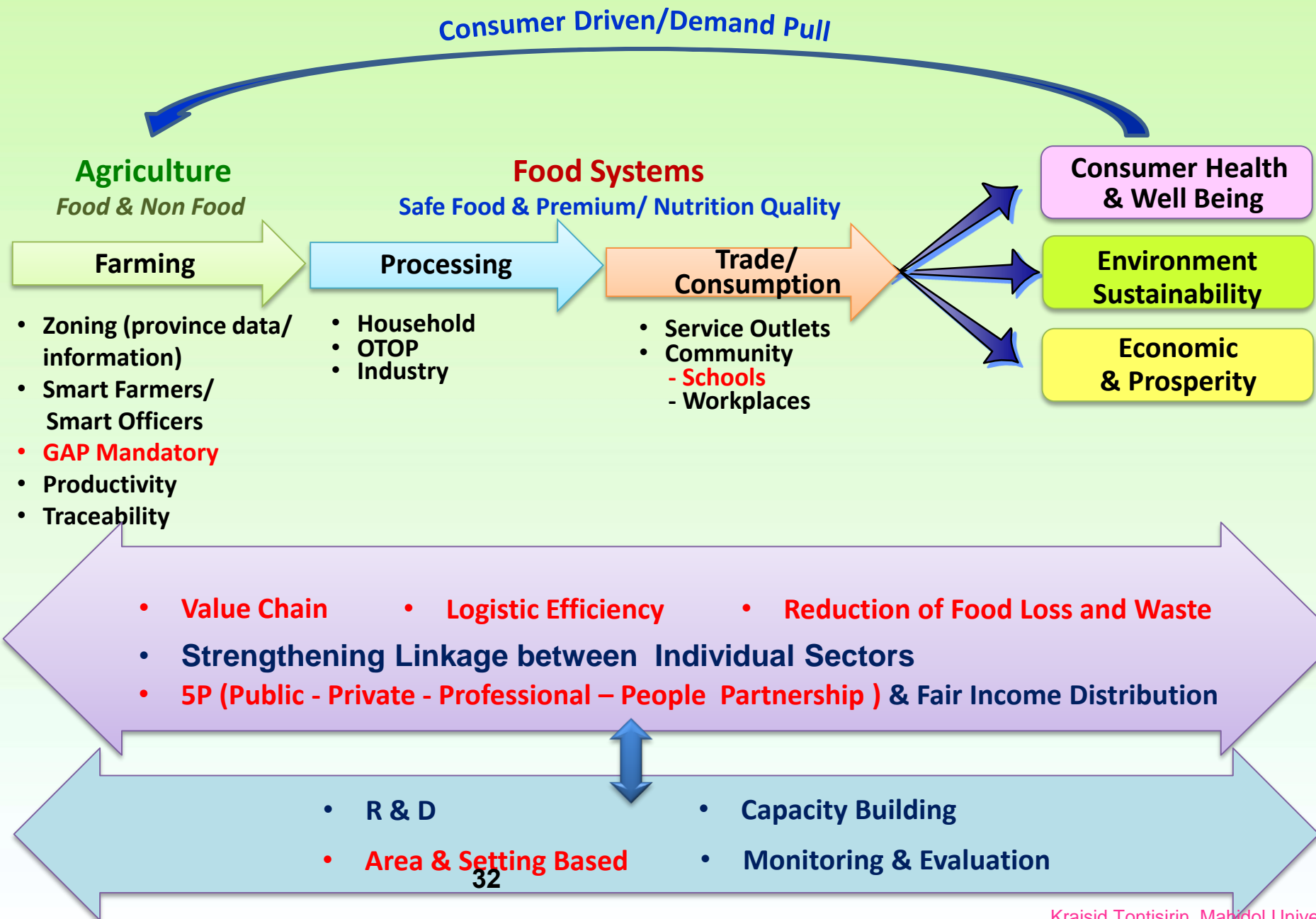
**Life/ Economy/ Social / Environment
Progress in balance, stable and sustainable way**

Vision



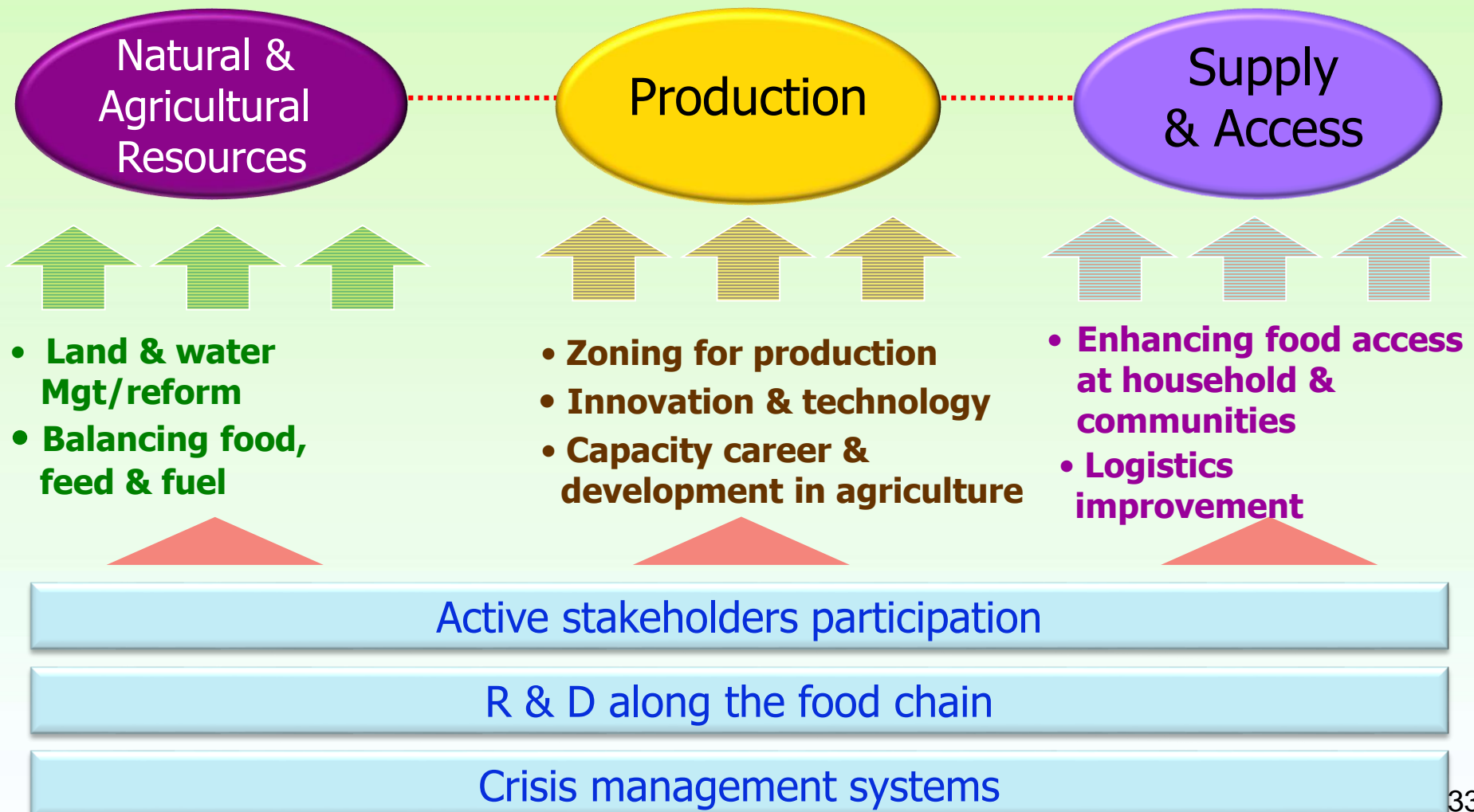
“Thailand ensures food and nutrition security, and is a sustainable source of nutritious and safe food with premium quality for Thai and the world”

Holistic Approach for Food Management in Thailand



Theme 1 : Food Security

Principle : Ensuring a sustainable food security and effective management of food production resources by active stakeholders participation



New theory for land uses in agriculture*



Land is divided
in 4 areas

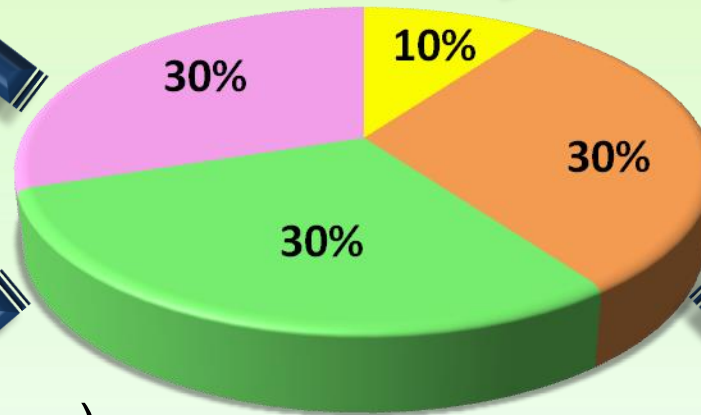


● Vegetables/Fruits

● House & gardens
with animal foods

● Rice field
(and paddy field fishery)

● Water reservoir
and aquaculture



*From King Bhumibol's Sufficiency Economy and land use aiming for household food security

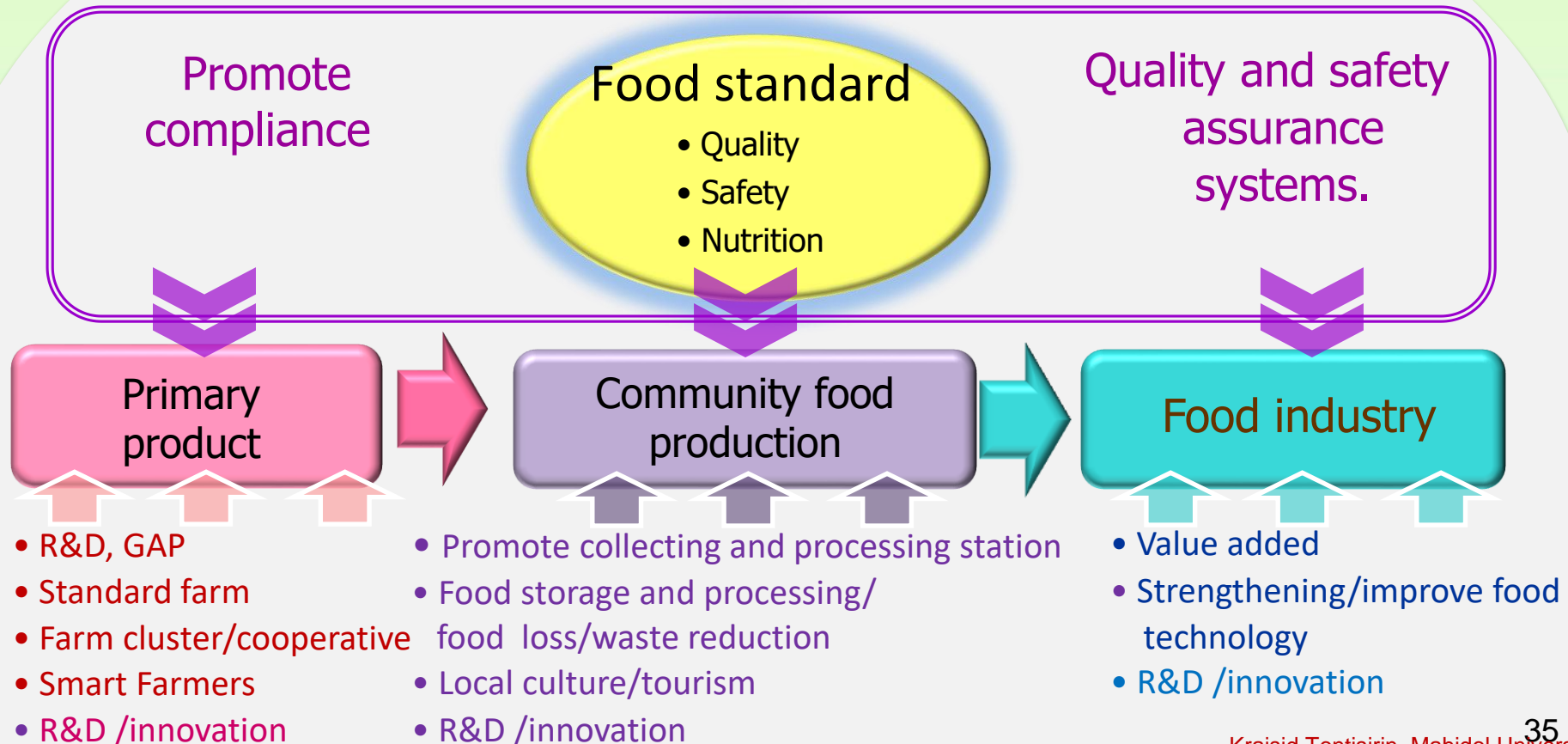
Source: <http://www.kasetporpeang.com>



Theme 2 : Food Quality and Safety

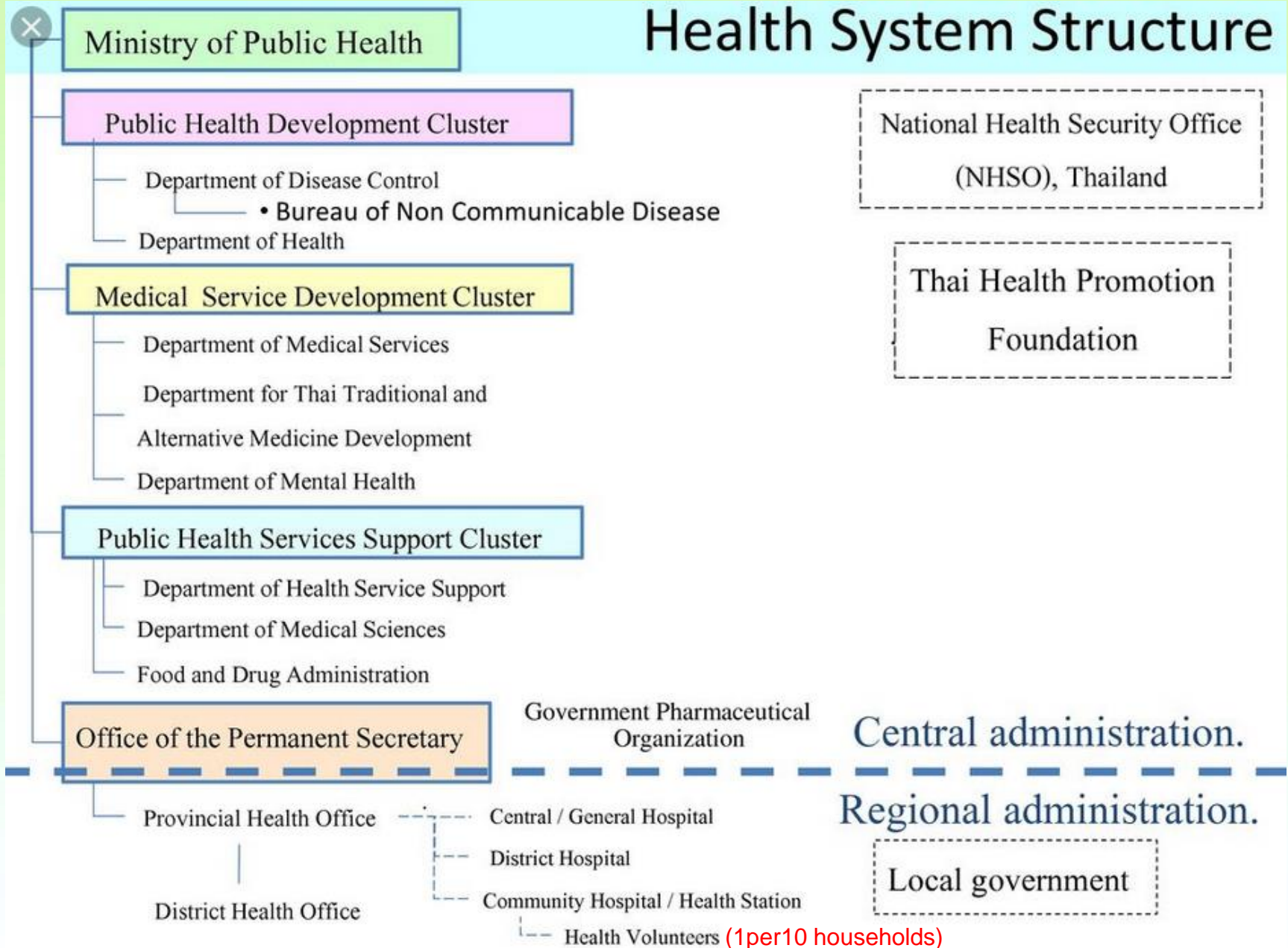
Principle : Ensuring high quality and safe food to protect consumer health and to facilitate domestic/international trade

Trade & market promotion
Consumer protection and create fairness

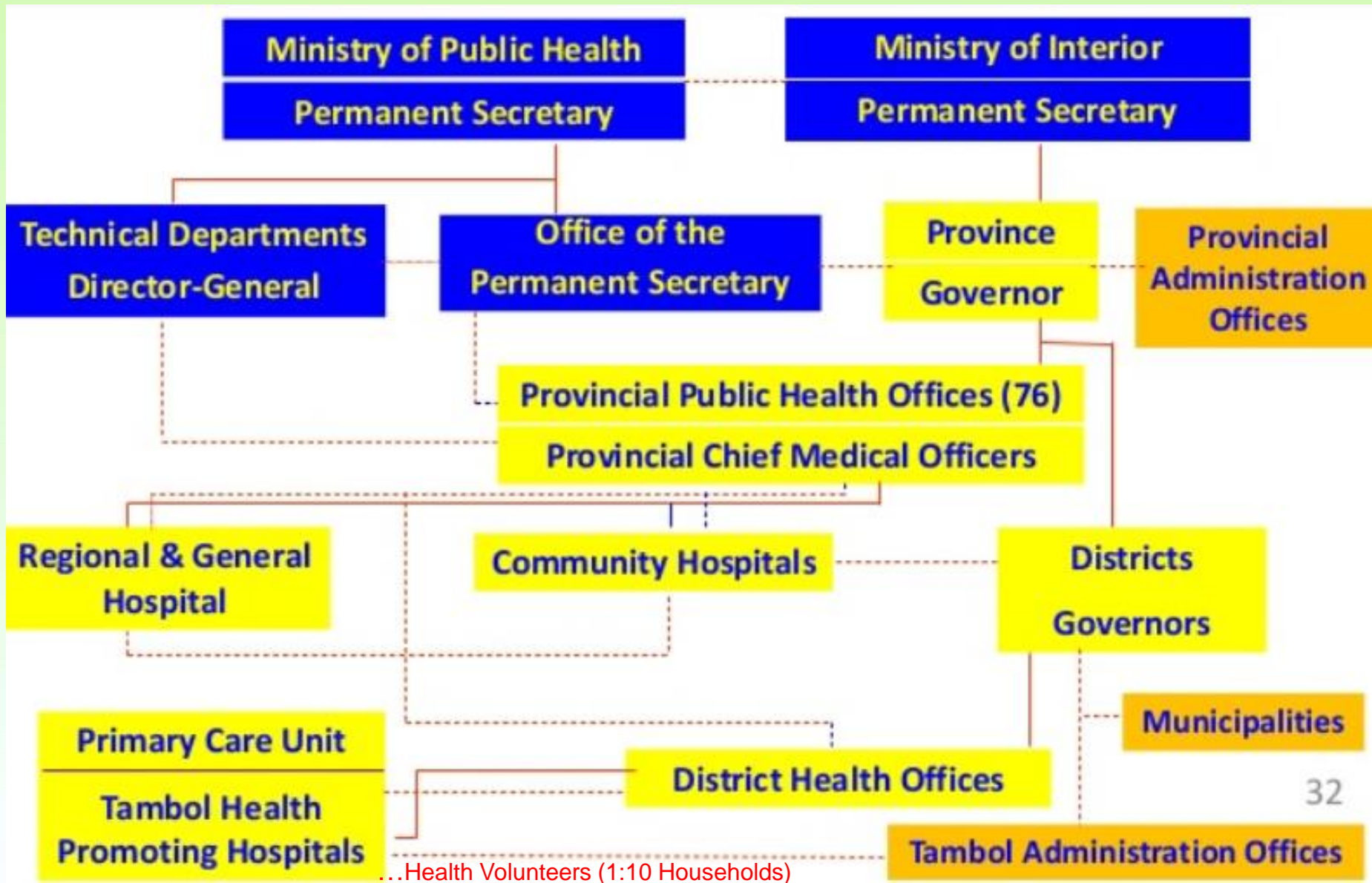


Organizational structure of MOPH Thailand

Health System Structure



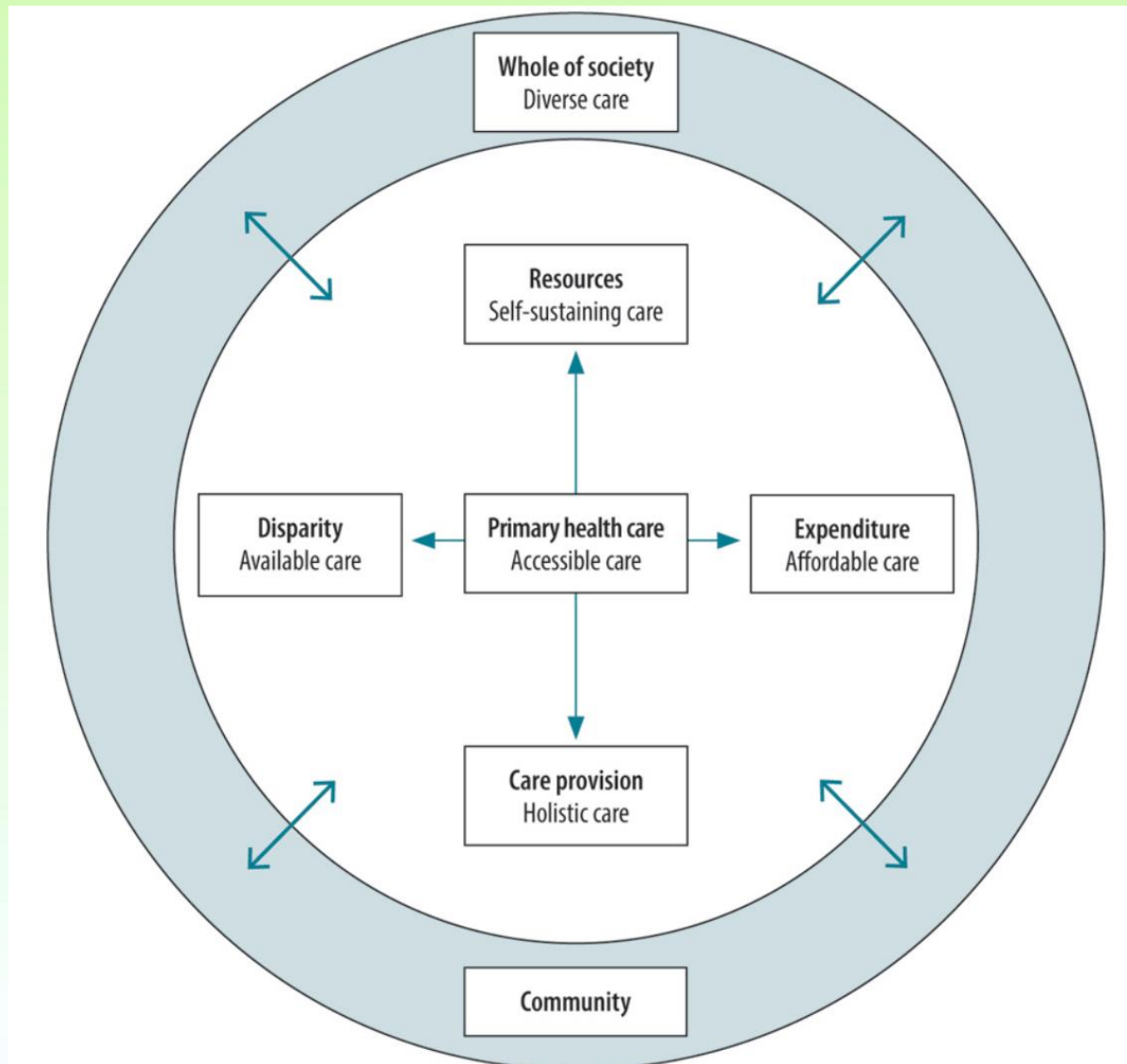
Provincial Health Administration Thailand



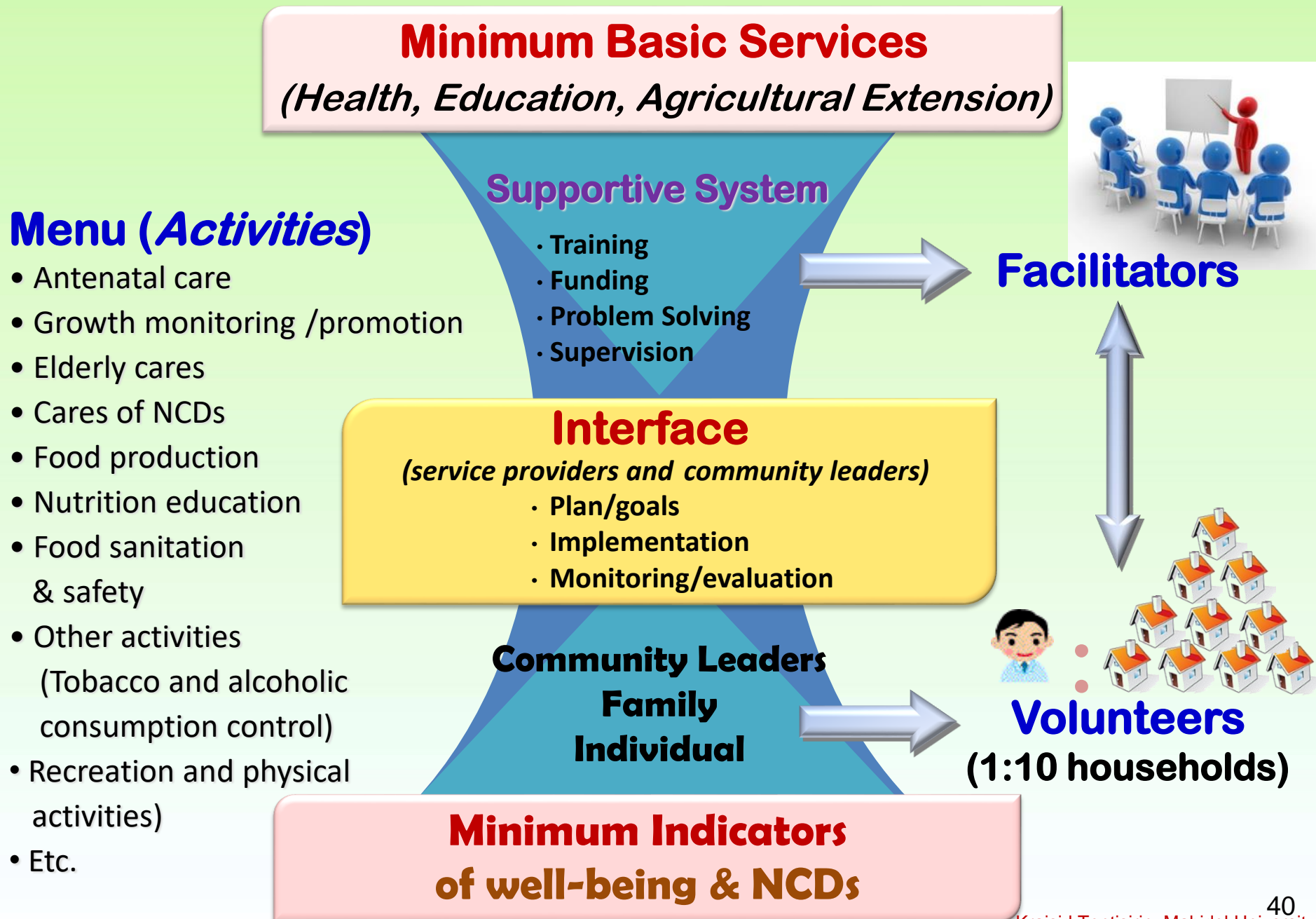
Universal Healthcare Coverage (UHC)

- Thailand has implemented UHC since 2002 and continued to be strengthened with quality cares.
- Enhanced role for primary care...
Affordable, available, holistic, self-sustaining and diverse cares.
- UHC sustainability as a basis for SDG achievement.

The potential of primary care for achieving sustainability of Thailand's universal health coverage policy*

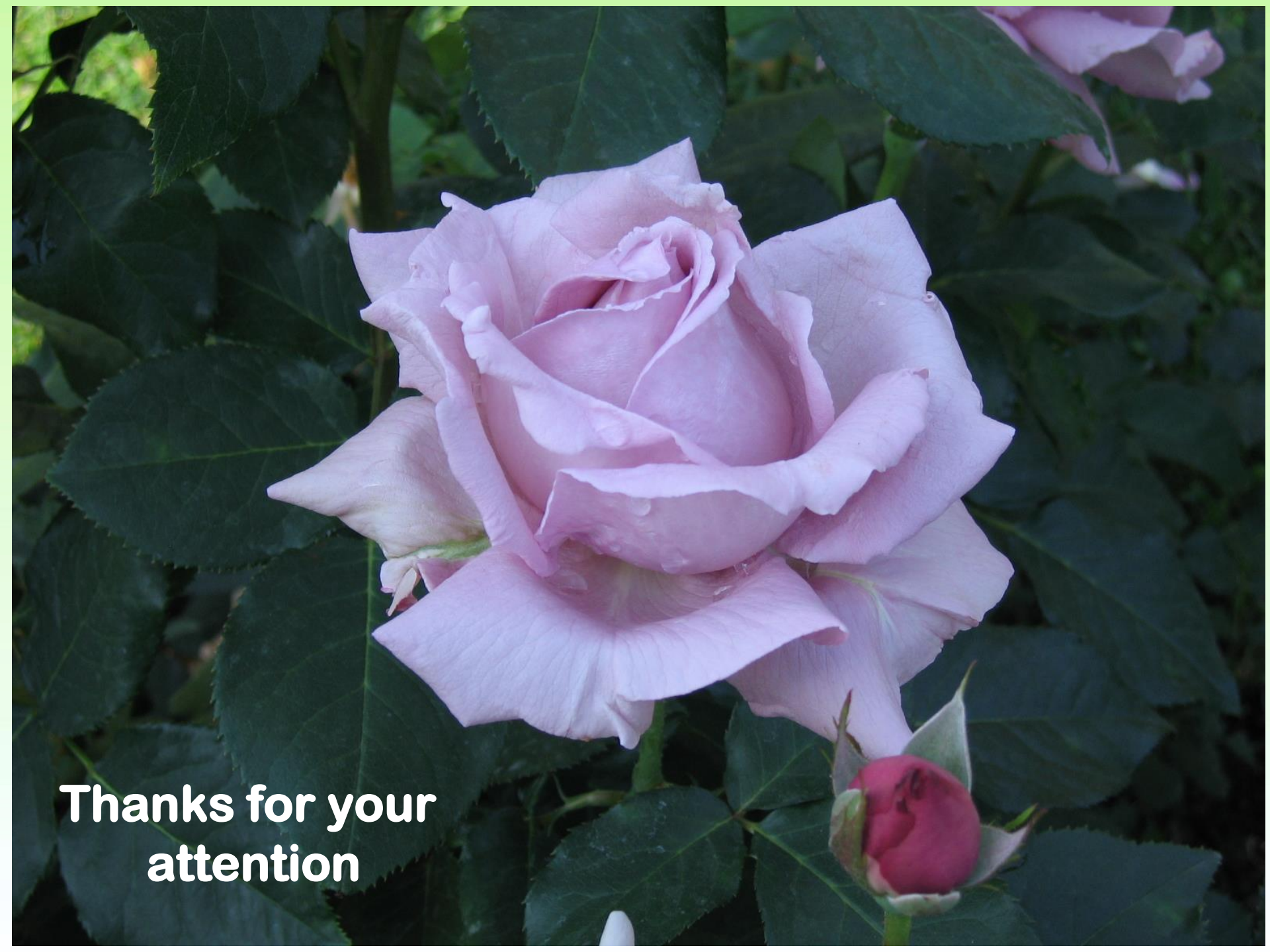


Community Based Program for Health Promotion



Conclusion

- The Royal Project of the King Rama 9 has provided lessons and approaches that improving quality of life and environment in highland could be achieved and scaled up to other areas.
- Achieving food security, good nutrition and health required specific goals and indicators along with multi-strategic and multi-stakeholder approaches at multi-levels.
- UHC Policy, Food management Strategy and Community actions include provision of basic services, active community participation, community volunteers (1:10 HH), remedial actions to alleviate food insecurity and malnutrition.



**Thanks for your
attention**