



Move More, Eat Right

Creating Settings for Healthier Behaviors: Diet and Physical Activity

Health Promotion Bureau
Department of Health



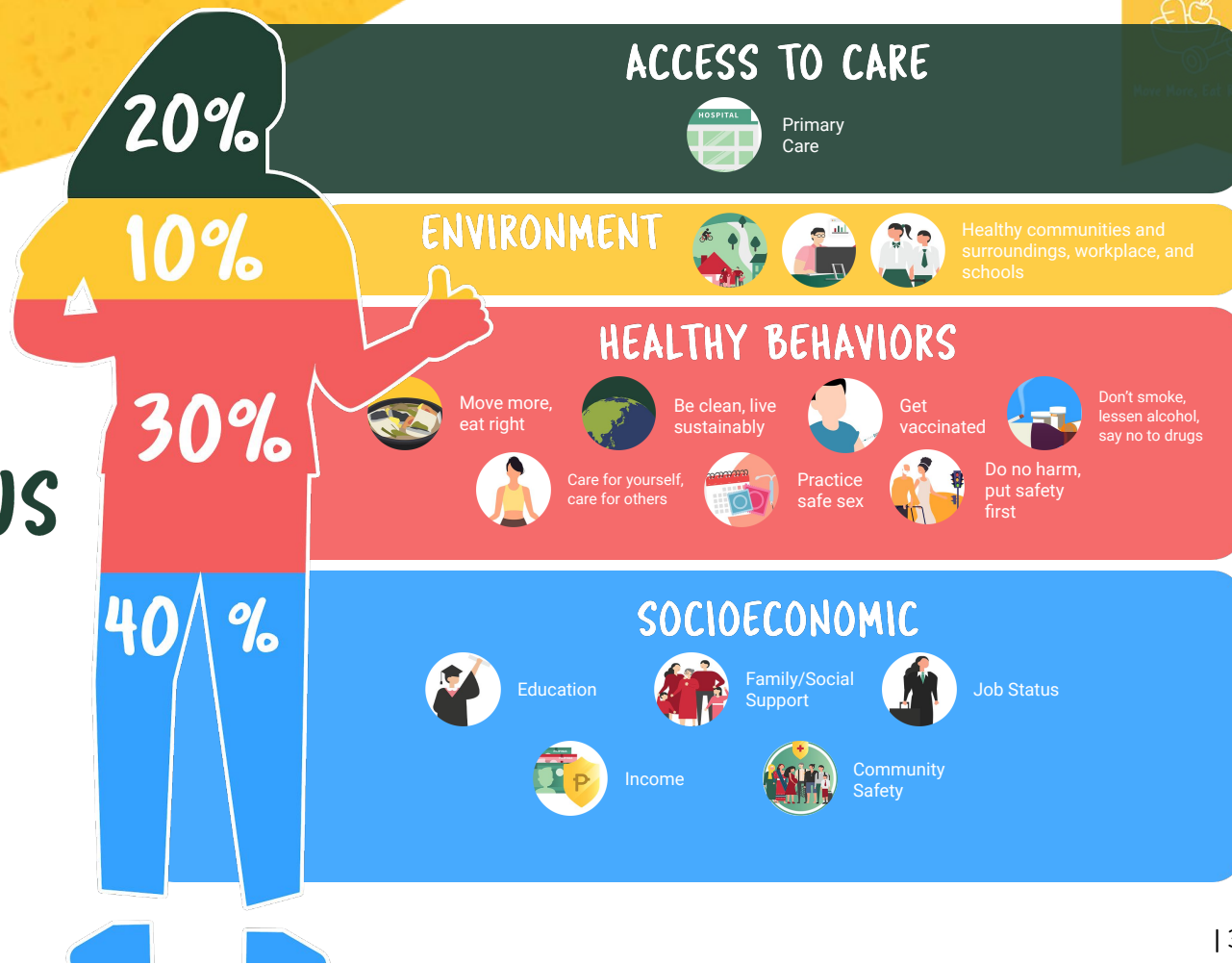
Healthy
Pilipinas



UNIVERSAL HEALTH CARE
KALUSUGAN AT KALINGA PARA SA LAHAT

Better health outcomes
Financial risk protection
Responsiveness

WHAT MAKES US HEALTHY





Health Promotion Framework Strategy (HPFS)

By 2040, all Filipinos are competent, motivated, and supported to live a healthy lifestyle, as well as literate on health issues, health rights, and the health system. In addition, all individuals, communities, and organizations share in the responsibility for promoting health and upholding health as a human right.



1. Health is seen as a **shared responsibility of all Filipinos**. All sectors are aware of their impact on health and their role in promoting health.
2. **Every aspect of a Filipino's life is healthy and health promoting**. Environments where Filipinos live, study, or work must make the healthy choice not only possible, but the easy and obvious choice.
3. Filipinos, especially the youth, are empowered to be literate on health issues, to understand and act on their health rights, and to navigate the health system.



7 PRIORITY AREAS

1

Diet and Exercise

Enabling improved nutrition and increased physical activity

2

Environmental Health

Minimizing environmental and climate impacts on health

3

Vaccines

Reducing deaths and disabilities from vaccine-preventable diseases



4

Substance Use

Preventing tobacco, illicit drug use & binge drinking

5

Mental Health

Increasing psychosocial and mental well-being

6

Sexual and Reproductive Health

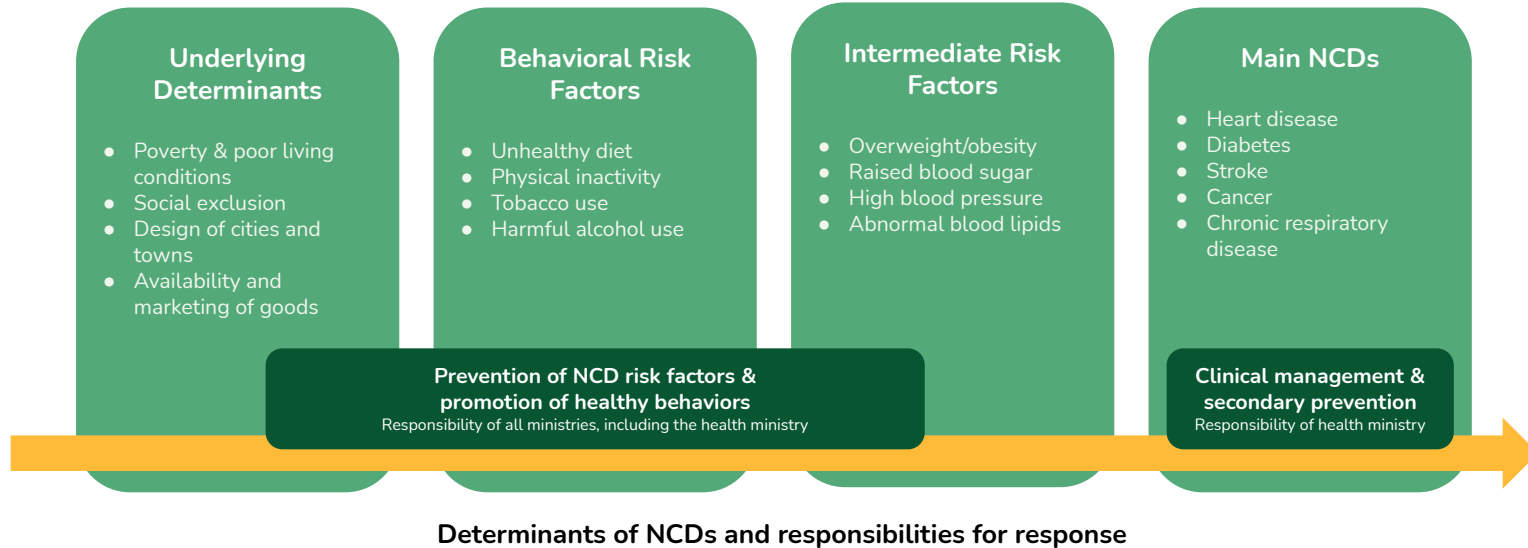
Promoting positive sexual and reproductive behavior

7

Safety and Inclusivity

Fostering safe and inclusive communities

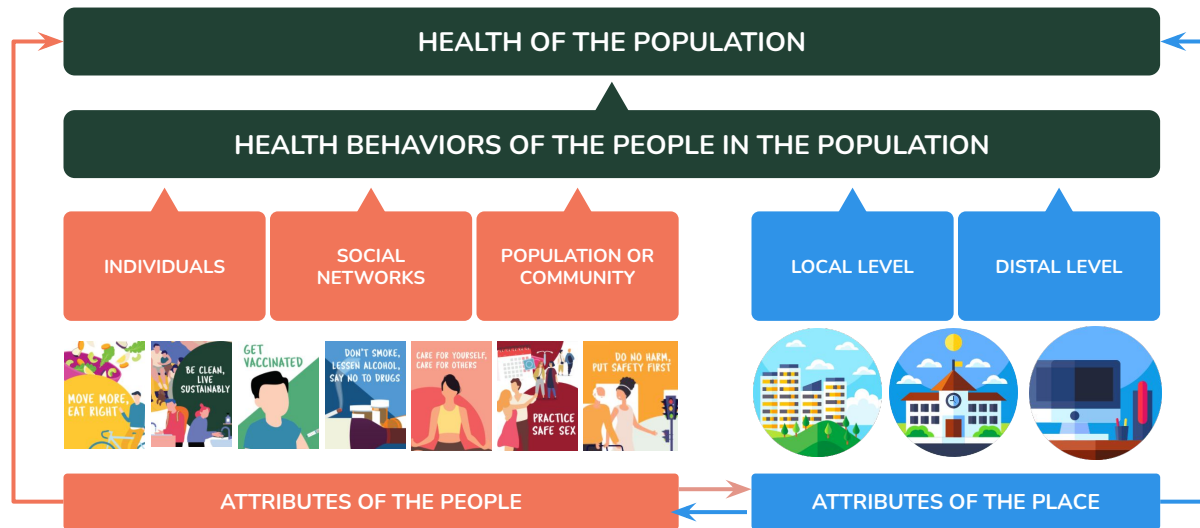
Health promotion is part of the spectrum of interventions to reduce risk factors for NCDs and cardiovascular disease.



SOURCE: [Prevention & Control of NCDs in the Philippines: The Case for Investment](#) (WHO & UNDP 2019)



By addressing underlying determinants, we can change behaviors.



People and Places framework
Maibach, E.W., Abrams, L.C. & Marosits, M.
BMC Public Health

SOURCE: Health Promotion Framework Strategy (DOH HPB 2020)



Healthy Settings



Healthy Communities

Healthy Cities, Healthy Villages,
Healthy Municipalities, Healthy
Markets, Healthy Homes



Healthy Schools

Health-Promoting Schools, Universities,
and Institutions



Healthy Workplaces

Healthy Workplaces, Healthy Hospitals

National-level Policy

DRINKS USING SUGAR AND ARTIFICIAL SWEETENERS	DRINKS USING HIGH FRUCTOSE CORN SYRUP
 <p data-bbox="222 687 434 737">P6 per liter</p>	 <p data-bbox="550 687 792 737">P12 per liter</p>



Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY

JUN 18 2021

ADMINISTRATIVE ORDER
No. 2021 - 0034

SUBJECT: National Policy on the Elimination of Industrially-Produced Trans-Fatty Acids for the Prevention and Control of Non-Communicable Diseases

I. RATIONALE

Globally, approximately 540,000 deaths each year can be attributed to the high intake of industrially-produced Trans-Fatty Acids (TFAs). In the Philippines, about 3,000 people each year suffer from premature mortality related to high consumption of TFAs according to the World Health Organization's Non-Communicable Disease Report in 2017. Studies have consistently suggested that there is no safe level of TFA consumption and that TFA intake has no known health benefit. Due to its effect on the body's Low Density Lipoprotein (LDL), high intake of TFAs increases the risk of developing coronary heart disease and other non-communicable diseases.

The WHO recommends limiting consumption of all forms of TFA to less than 1% of total energy intake. An exposure assessment reported that children under 6 years old are at most risk for exceeding the WHO recommendations, with high-level consumers exceeding the upper limit by 150% (DOST - Food and Nutrition Research Institute, 2018). Despite the availability of such exposure assessments, there is still a lack of a more rigorous monitoring and evaluation system to further assess the impact of TFA intake among Filipinos.

With neighboring countries implementing bans on Partially-Hydrogenated Oils and setting mandatory limits on TFA content in food, the Philippines is vulnerable to dumping of TFA-rich food products in the absence of similar regulations. As such, eliminating industrially-produced TFA from the food system is the most effective and consistent means to address this dietary risk factor to reduce and prevent non-communicable diseases (NCDs), and reduce the economic burden of NCDs.

In view of the foregoing, and guided by the World Health Organization's REPLACE action package to eliminate industrially-produced trans-fatty acids, the Department of Health issues this national policy to eliminate industrially-produced trans-fatty acids for the prevention and control of non-communicable diseases.

II. OBJECTIVES

This Order aims to provide a policy framework to eliminate industrially-produced TFA in the Philippines food supply by 2023. Specifically, it aims to provide guidance to reduce TFA intake among Filipinos to less than 1% of the recommended total energy intake through the following strategies:

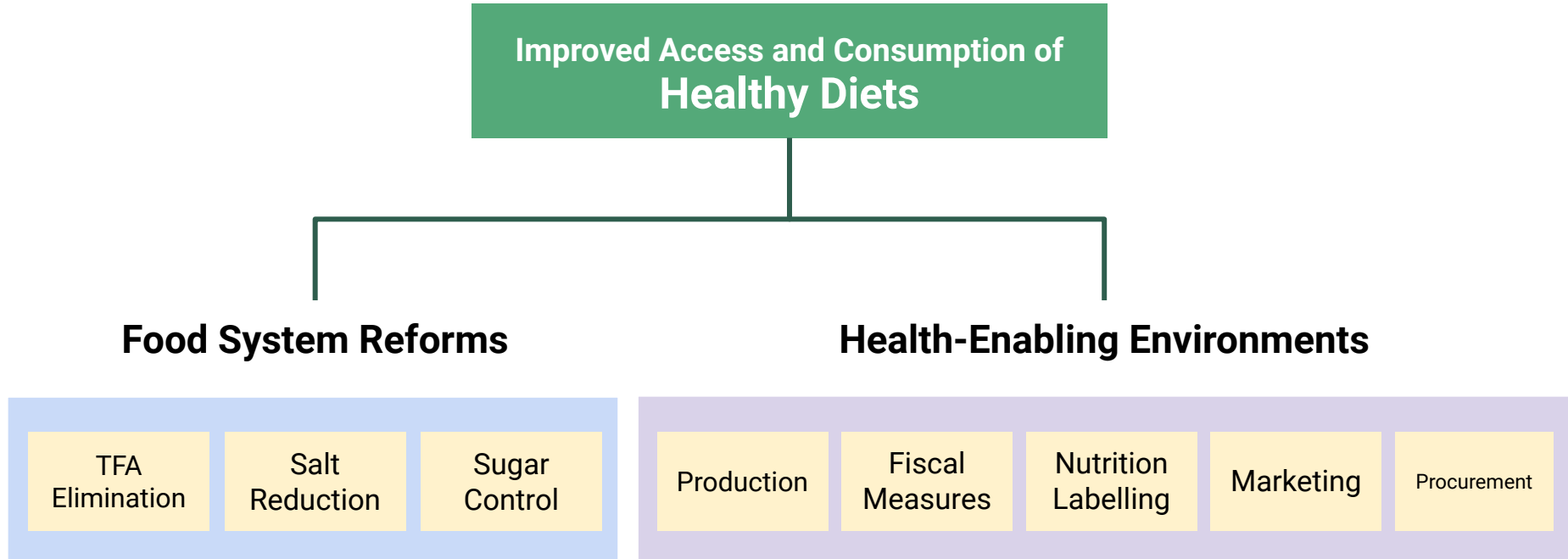
1. Regulating pre-packaged food products containing TFA
2. Enabling the replacement of TFA with alternative oils, fats, and oilseeds
3. Increasing awareness of the negative impacts of TFA to the public

Building 1, San Lazaro Compound Road Avenue, 5th Floor, 1003 Manila • Tungk Law 661-7800 local 1158, 1111, 1112-1113
Direct Line: 8711-9502, 8711-9503 Fax: 8743-1827 • UPL: <http://www.doh.gov.ph> e-mail: Rtdoq@doh.gov.ph

Tax Reform for Acceleration and Inclusion

Elimination of Industrially-Produced Trans-Fatty Acids

Promoting Healthy Diets





All-in-one guides for LGUs Health Promotion Playbook

Download the Playbooks at bit.ly/HPB_2021Playbooks



Why the Playbooks?



- The DOH acknowledges the critical role of **local leadership** in the implementation of COVID-19 and other health promotion interventions.
- Moving forward to the New Normal, there is a need to architect health- supportive environments to boost the
 - **implementation of the minimum public health standards**
 - **physical, mental, and emotional wellbeing of Filipinos**
- Towards this end, the DOH is expected to help capacitate local governments, and provide technical assistance as necessary.

What's in the Playbook?



Evidence Brief



Template Policy



Implementation Checklist



Basic Resource Requirements



Capacity-Building Requirements



Communication Plan



Monitoring & Evaluation

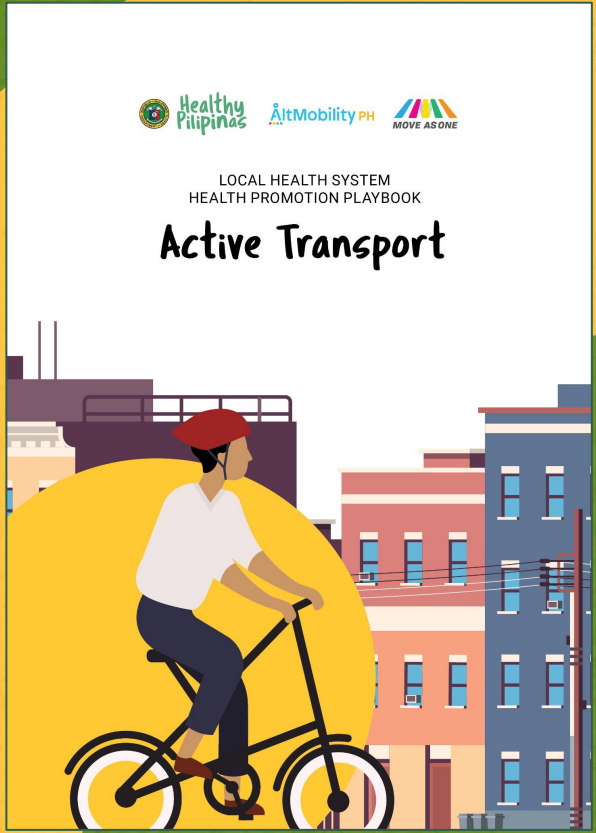


Frequently Asked Questions

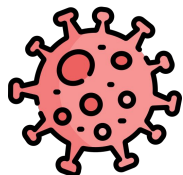


Moving People, Not Cars

Active Transport in the New Normal



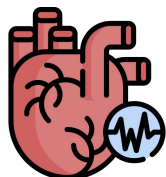
Switching to active transport has a **host of benefits to health and more.**



Physical distancing and good ventilation ensure lower chances of COVID-19 transmission.



Improved air quality results in gains in life years for everyone



There is a reduced risk of acquiring the NCDs most common among Filipinos.



The beneficial effects of physical activity from cycling outweigh potential risks and negative effects from injury or inhalation of pollutants.



Increased physical activity leads to healthier bodies and better mental health.

SOURCE: [DOH HPB Health Promotion Playbook on Active Transport](#) (2020)



Switching to active transport has a host of benefits to health and more.



P87,597/km
from jeepney fare



P89,225/km
from Gasoline fuel

Based on a **four-hour count of bikers in four major cities in Metro Manila**, money savings were estimated to reach up to **P89,225.00 per km**, enough to feed **219 Filipinos for a month**.



equivalent to
2,136.51 kgs
of rice



enough to feed
219 Filipinos
for a month

Other benefits:

- **Accessibility** - Active transport is a viable transport mode for almost 90 percent of the population without private cars.
- **Savings** - Cyclists don't have to maintain private vehicles or pay transport costs; employers have healthier and more productive employees.
- **Community Desirability** - Land value goes up as communities become more bike-friendly; customers are likelier to return to bike-friendly stores more often.

SOURCE: Metro Manila Counts ([Institute for Climate and Sustainable Cities 2021](#))



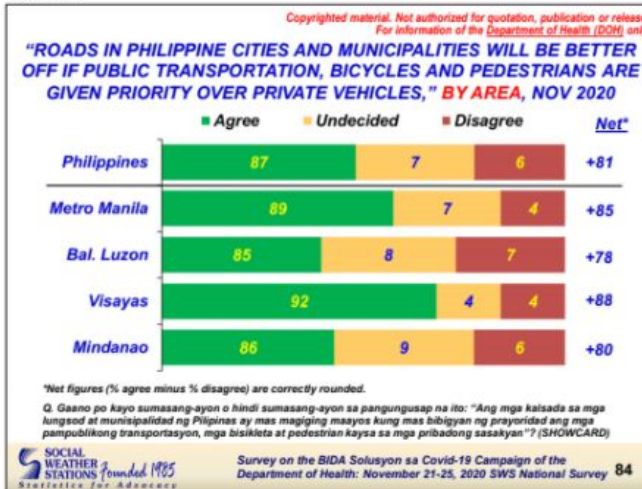
There is **demand** for active transport reform.

Net agreement for both statements below is **very strong** in **all areas and across socio-demographic groups.**

Chart 21



Chart 25



SOURCE: Social Weather Stations, as commissioned by DOH (2020)

Evidence Brief



Almost **90% of Filipinos are commuters**, relying on public or active transport for mobility. Road systems need to be re-designed to be safer, more inclusive, more efficient, and more just.



Bicycle infrastructure can **increase the number of cyclists by about 300%**. The availability of cycling facilities increases bicycle commuting.



The positive effects of active transport on health, road safety, the environment, business, the efficiency of transport, and more are well-established, and these **benefits outweigh risks**.

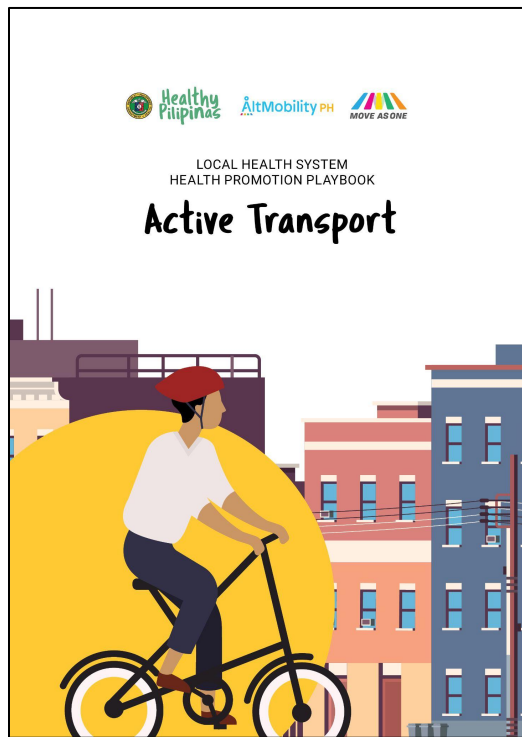
Recommendations

Re-design road systems to include bicycle lanes and walking paths for cyclists and pedestrians.

Map the locations of hospitals, schools, markets, parks, and transport stations, and establish networks of bicycle routes that connect communities to these essential service destinations.

Provide sufficient cycling facilities in public establishments and incentivize their provision in private establishments.

Active Transport in the New Normal



Cycling, walking, and other forms of active transport are an excellent means of reducing exposure to COVID-19 while promoting physical activity during travel — this module guides LGUs in establishing protected bicycle lanes and walking paths to promote the aforementioned during and after the pandemic.

ACTION AREA	PLAYBOOK CONTENT
Build healthy public policy	Template ordinance for establishing protected bike lanes
Create supportive environments	Infrastructure support
Strengthen community action	Requires cyclist participation
Develop personal skills	Training for implementers and road safety advocacy
Reorient health services	Addressing NCD risk factors through safe and exercise-promoting environments



The Bicycle Lanes Ordinance of 2021

Key features of the policy	What features of the policy can LGUs modify?
<ul style="list-style-type: none">● Active Mobility Committee● Bicycle lane networks and pedestrian walkways● Enforcement and penalties● Monitoring	<ul style="list-style-type: none">● Auxiliary programs, projects, and activities (Ex. Dev't of bicycle sharing program; provision of bicycle facilities in public areas; distribution of free bicycles to target groups; other training and awareness activities)



Implementation Checklist

1 Engage stakeholders (Active Mobility Comm., local partners)

2 Develop Bicycle Lanes Master Plan (Review transport plans, mapping key establishments, etc.)

3 Finalize M&E plan (key indicators, data sources, etc.)

4 Finalize and roll out communication, social preparation, demand generation plans

5 Identify human resources needed for road safety (Ex. traffic enforces)

6 Implement pilot bicycle lane; monitor as needed

7 Scale up bicycle infrastructure network across city/municipality

8 Install bicycle facilities in government buildings and public establishments

9 Monitor implementation & improve bicycle infrastructure accordingly



Capacity Building Outline

TIER 2: LGU-SPECIFIC TRAINING

- **Audience:** LGU Implementers, Local Advocates
- **Contributors:** UP NCTS
- **Platform:** Face to face
- **Content:** Development of bicycle lane network and infrastructure

2



3

TIER 3: TRAINING OF TRAINERS

- **Audience:** LGU Implementers, Local Advocates
- **Contributors:** DTV Capacity Building
- **Platform:** Mixed
- **Content:** Development of capacities to teach others to build infrastructure and advocate for active transport

TIER 1: BASIC TRAINING

- **Audience:** LGU Implementers, General Public
- **Contributors:** Move As One, DOTr & DPWH, Dutch Embassy, World Bank
- **Platform:** DOH Academy
- **Content:** Basic information on active transport infrastructure and promotion

1



Basic Resource Requirements

Item	Cost	Units	Total Cost
Traffic barriers One barrier per meter	1,000.00	1000	1,000,000.00
Lane markers (1 km)	50.00	1000	50,000.00
Signages One signage per 5 meters	4,000.00	200	800,000.00
Road pavement improvement (1 km)	1,000.00	1000	1,000,000.00
Total Cost			2,850,000.00

**Lower limit; can cost more depending on prices of local materials*



Monitoring and Evaluation

- M&E will be done through **mapping, aggregated daily monitoring, road incident, and traffic violation reports, ocular visits, and observation.**
- **Tools** included in the Playbook:
 - Template reporting form

Indicators
<ul style="list-style-type: none">● Increase in number of bicycle users● Total length of established bicycle lanes● Decrease in bicycle related road incidents

Monitoring and Evaluation

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 - Template reporting form

Indicators

- Increase in number of bicycle users
- Total length of established bicycle lanes
- Decrease in bicycle related road incidents

Communication Materials



Healthy Pilipinas

Mag-bisikleta ngayong panahon ng COVID-19!

Ugaliing maging aktibo sa pagko-commute.

Ano-ano ang mga health benefits ng pabi-bisikleta?

- Malasaog na katawan. Ang paghi-bisikleta ay isang uri ng aerobic exercise na nagpapalakas ng katawan laban sa iba't ibang uri ng mga sakit sa puso at bago o paghirap.
- Physical distancing. Magpamali ang physical distancing papunta sa trabaho, palengke, o iba pang lugar dahil hindi na katatagan samalalay ng tren, bus, o jeep at makipagabayon sa ibang mga kompyuter.
- Mas pinatibay na mental health. Nakaikotang ang regular na paghi-bisikleta upang mabawasan ang stress, anxiety o pagkabisa, at depression.
- Mas malinis na hangin. Ang mababawang paggamit ng bisikleta sa halip na mga sasakyang de-motor ay naka-katungatung malinis at mapatatas ang kalidad ng hangin sa lansangan.

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Healthy Pilipinas

Safety gears for bicycle users

- Helmet**
 The helmet should be of correct size for the bike user, and fastened using the chin strap. It should have a hard smooth outer shell, capable of absorbing potential impact.
- Reflector vest**
 A light-colored, fluorescent or reflective sash or vest, to help other road users see the cyclist in daylight poor light. The sash or vest must be worn at all times during transit.
- Bike lights**
 Install one or two front headlamps, and one red tail lamp, when cycling at night-time or when there is poor road visibility.
- Brakes**
 Bicycles should be equipped with well-maintained front, rear or front and rear brakes.
- Proper biking attire**
 Use proper attire when cycling, including closed shoes and clothes that do not get tangled in the chain or wheel, or obscure lights and reflectors. Use light-colored clothing to help motorists see cyclists on the road.
- Elbow and knee pads**
 Cyclists are advised to have protective pads for elbows and knees that can absorb or reduce the severity of potential impact.

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Healthy Pilipinas

Health Reminders for Bicycle Users

- Practice physical distancing.** Maintain at least one meter distance on all sides from other cyclists, pedestrians.
- Disinfect your bicycle.** Cyclists are advised to regularly disinfect their bicycles after each use or when coming home.
- Wear face masks.** Wear face masks at all times, including when stopping in traffic or in waiting or parking areas.
- Use hand signals.** Use clear universal hand signals to communicate with motorists, other cyclists and pedestrians.
- Use safety gear.** Wear closed shoes and helmet. Install brakes, and reflectors or lights. If without safety gear, stay on the inner bike lane to avoid collision with motor vehicles.
- Practice respiratory etiquette on the road.** Cover w/ tissue or use elbow when sneezing or coughing. Dispose of used tissue, sneezing or spitting on the street are not allowed.
- Do not smoke.** Smoking is prohibited in public places, including the road. Dispose of cigarette butts on the road is not allowed.
- Avoid biking in the rain.** Cycling in strong rain is not advised. Seek shelter and wait out the rain before resuming, or make sure to use complete safety gear and to bike slowly.

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Communication Materials



Healthy Pilipinas DILG CARES

September 22 is
World Car-Free Day

Move More, Eat Right para sa #HealthyPilipinas!

f DOHHealthyPilipinas @DOHgovph doh.gov.ph 711-1001 / 711-1002

Celebrate
World Car-Free Day
(September 22)

497
Kilometers
ang bagong Bike
Lanes sa bansa!

Go Car-free and padyak
your way around the city!

f DOHHealthyPilipinas @DOHgovph doh.gov.ph 711-1001 / 711-1002

Celebrate
World Car-Free Day

Be safe on the roads,
be safe from the virus!

- Wear a face mask or a face tube while riding
- Practice physical distancing
- Avoid big group rides

Follow the Minimum Public Health Standards while on rest stops!

f DOHHealthyPilipinas @DOHgovph doh.gov.ph 711-1001 / 711-1002

Healthy Pilipinas DILG CARES

Ride Safe, Idol!

Enjoy safe routes when you bike around the Metro
this World Car Free Day!

METRO MANILA

View the other bike lane routes here:
bit.ly/WCFDRoutes

f DOHHealthyPilipinas @DOHgovph doh.gov.ph 711-1001 / 711-1002

Case Study: Municipality of Cordova, Cebu



SOURCE: Municipality of Cordova (2021)

1. The Municipality recently launched a **1.5 km bicycle lane** with the help of a Php 2.85 mn sub-allotment grant from DOH-HPB.
2. Another **19.7 km** of bicycle lanes are planned to be developed between 2021 and 2025.

INDICATOR	BEFORE	AFTER
Established bike lanes	0 km	1.5 km 18,7 km planned
Number of bicycle users	361 users	1,538 users 326% increase
Bicycle-related road crashes	2 (2020)	0 (2021)



Case Study: Metro Naga, Camarines Sur

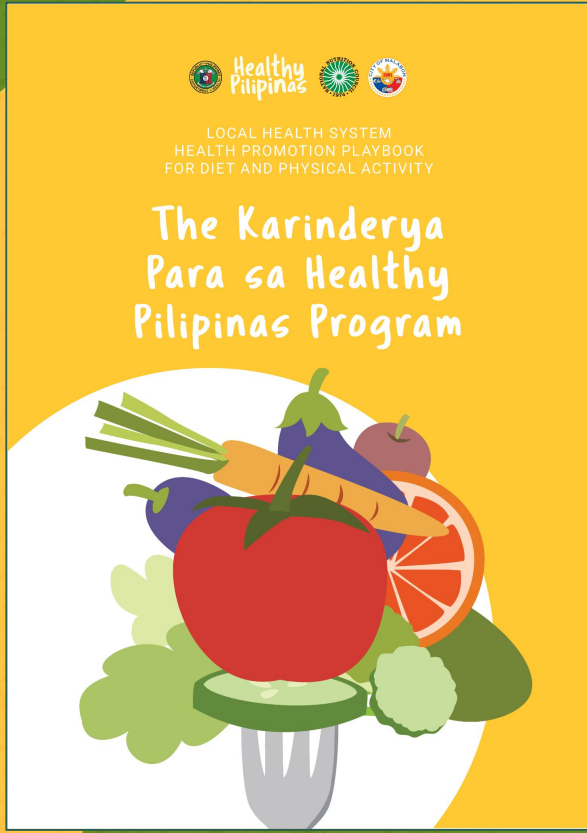
- 1. **Civil society** is actively lobbying for the development of bicycle infrastructure in the city through data.
- 2. The Bicol State College of Applied Sciences and Technology (BISCAST) is monitoring the use of active transport in Naga City.
- 3. Metro Naga also showed more bicycles than private vehicles on its roads **despite the lack of formal bicycle lanes in the city.**

BICYCLE AND PRIVATE VEHICLE COUNTS IN NAGA CITY			
ROUTE	TIME	PRIVATE VEHICLES	BICYCLES
Peñafrancia Ave. N.	6:00 - 7:00	14 vehicles	38 bicycles
Peñafrancia Ave. S.	6:00 - 7:00	11 vehicles	15 bicycles
Bypass Road N.	7:00 - 8:00	31 vehicles	55 bicycles
Bypass Road S.	17:00 - 18:00	28 vehicles	40 bicycles
Milaor Gainza Camaligan E.	7:00 - 8:00	3 vehicles	24 bicycles
Milaor Gainza Camaligan W.	7:00 - 8:00	7 vehicles	12 bicycles

SOURCE: BISCAST - Engr Edmer Flores Transport Eng'g Class (13 Jan 2021)

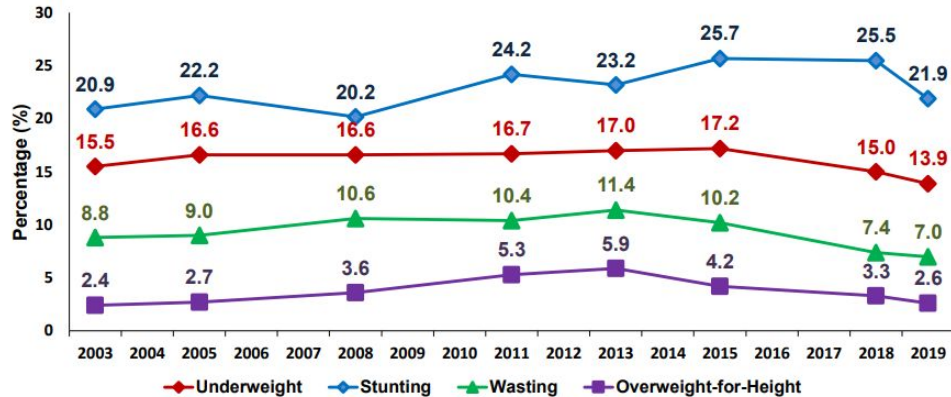
Improving Access to Dietary Supplementation

Karinderya Para sa Healthy Pilipinas



Poor nutrition continues to be a problem in the Philippines.

There are still many children who are stunted or wasted; or who have micronutrient deficiencies. **One in five Filipino children under two are stunted.**



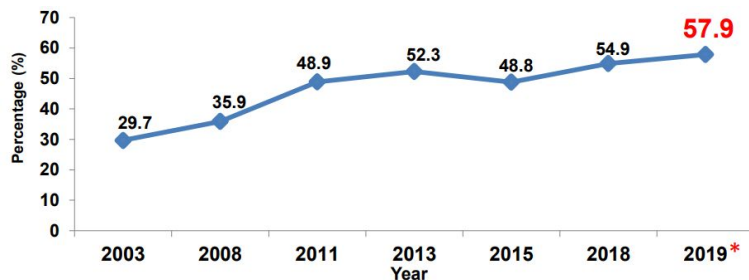
Prevalence of malnutrition among Filipino children 0-23 months old, 2003-2019

SOURCE: [ENNS](#) (2019)

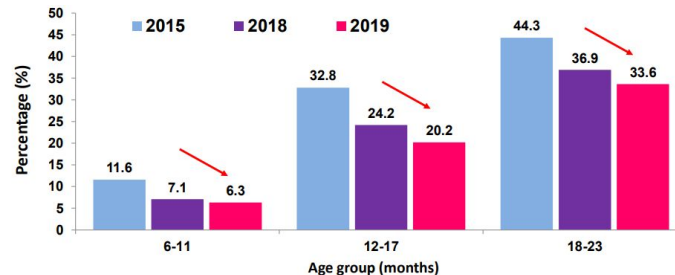


Poor nutrition continues to be a problem in the Philippines.

Poor infant and young child feeding practices contribute significantly to child malnutrition. **Not enough children** are exclusively breastfed, or are reaching the minimum dietary diversity.



Proportion of infants 0-6 months old exclusively breastfed at time of survey: 2003-2019



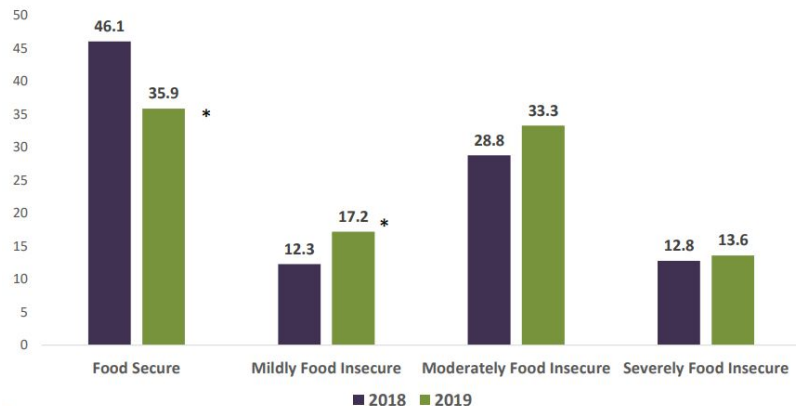
Proportion of Filipino children meeting the minimum dietary diversity by age group: 2015-2019

SOURCE: [ENNS](#) (2019)



Poor nutrition continues to be a problem in the Philippines.

64.1 percent of Filipino households have experienced **food insecurity** according to data from 2019. This was higher than the previous year, and is expected to have risen during the pandemic.



Households by food security status, 2018 vs. 2019

17.2% mildly food insecure
+ 33.3% moderately food insecure
+ 13.6% severely food insecure

64.1% are food insecure

SOURCE: [ENNS](#) (2019)

Case Study: Malabon City



SOURCE: Malabon City NAO (2020)

1. The program is a **120-day dietary supplementation** activity focusing on maternal nutrition and IYCF.
2. It features **task-sharing between the BNS and karinderya owners** for meal preparation & attendance monitoring.
3. The karinderya also becomes the designated **community kitchen** for other health emergencies.
4. The program greatly reduced **budget and food waste** due to logistical advantages.

Stunting: Malabon vs. the Philippines		
	Before	After
Malabon	12.09% (2015)	6.94% (2018)
Country	33.40% (2015)	30.30% (2018)

Evidence Brief



Dietary supplementation can improve the nutritional status of key populations

Children under five, pregnant women, lactating women



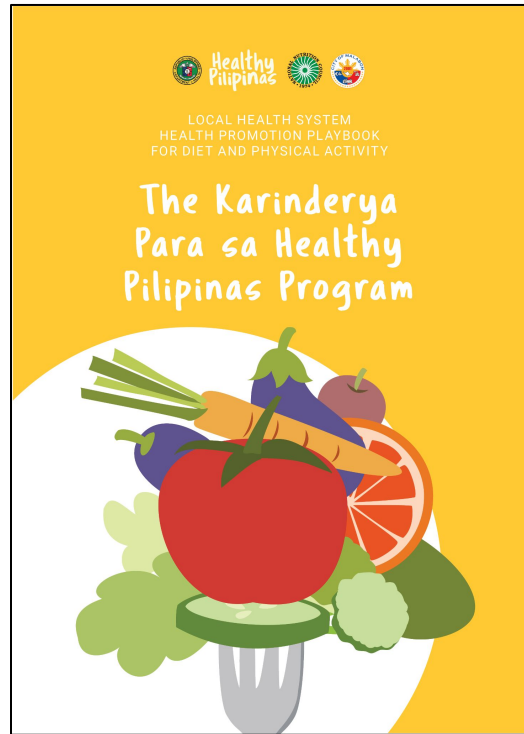
The local karinderya can champion nutrition at the community level

As a familiar food source, it offers a unique opportunity for engaging implementation of dietary supplementation

Recommendations

Engage with and capacitate local karinderya partners for the delivery of community-based dietary supplementation activities.

Karinderya Para sa Healthy Pilipinas



The continuation and success of dietary supplementation are key to addressing undernutrition during the COVID-19 pandemic — this module mobilizes local karinderya in preparing nutritious food for dietary supplementation beneficiaries, allowing Barangay Nutrition Scholars to focus on nutrition counseling and education, providing beneficiaries with a physically, socially, and culturally close source of dietary supplementation, & reducing food and budget waste.

ACTION AREA	PLAYBOOK CONTENT
Build healthy public policy	Template ordinance for institutionalizing karinderyas as nutrition service providers; template service contract
Create supportive environments	Expansion of supplemental feeding services for malnutrition
Strengthen community action	Harness local karinderyas
Develop personal skills	Builds nutrition KAP
Reorient health services	Karinderyas as local hub for healthy food choices



Karinderya Para sa Healthy Pilipinas Project

Key features of the policy	What features of the policy can LGUs modify?
<ul style="list-style-type: none">● Local Nutrition Committee● Engagement with partner karinderyas● Conduct of nutrition counseling, nutrition education, to complement the dietary supplementation● Monitoring and evaluation● Appropriations	<ul style="list-style-type: none">● Engagement with partner <i>karinderyas</i> during disaster relief operations● Auxiliary nutrition-related activities (Ex. Banning junk food, SSB near schools; implementing nutrition standards in <i>karinderyas</i> & street food; institutionalizing the establishment of <i>talipapas</i> in food deserts; mainstreaming supply chains b/w agri workers and karinderyas; creating bicycle lanes and open spaces)

Karinderya Para sa Healthy Pilipinas Project



Memorandum of Agreement:

Key features of the agreement

- Partner Karinderyas designated as community kitchen for 120-days
- Paid per beneficiary fed per day; and payment facilitated in a timely manner
- LGU to capacitate karinderyas on minimum skills and capacities; provide them with a cycle menu and meal recipes
- Karinderya to undergo training; prepare and serve food items and services; ensure the availability of handwashing facilities

ANNEX 2B. Template Service Contract Agreement

SERVICE AGREEMENT

KNOW ALL MEN BY THESE PRESENT:

This Agreement executed and entered into this ____ day of _____, 2021 in [Name of City/Municipality], Philippines by and between:

THE [NAME OF CITY/MUNICIPALITY], with principal office address at [Address of the City/Municipal Office], represented herein by its Local Chief Executive, [NAME OF MAYOR], hereinafter referred to as the LOCAL GOVERNMENT,

- and -

THE KARINDERYA OWNERS AND OPERATORS, represented by the following proprietors including their business addresses, hereinafter referred to as the PARTNER KARINDERYAS;

Proprietor	Name of Karinderya	Karinderya Address
Partner Karinderya 1		
Partner Karinderya 2		
Partner Karinderya 3		

WITNESSETH:

WHEREAS, the Philippine Plan of Action for Nutrition 2017-2022, as an integral part of the Philippine Development Plan 2017-2022, considers and directs its interventions toward improving maternal, infant, and young child nutrition for the realization of the development pillars of Ambisyon 2040: *malasakit* (protective concern), *pagbabago* (transformation), and *kaunlaran* (development);

Implementation Checklist

Role of the Local Health Office or Health Promotion Unit

1. Assist in the implementation of the Karinderya Para sa Healthy Pilipinas project



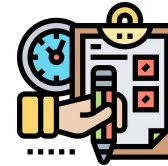
Identify & engage beneficiaries



Plan budget, cycle menu, implementation



Orient & set up Partner Karinderyas



Organize day-to-day operations

2. Oversee the **monitoring and evaluation** of the pilot and/or formal project roll-out

Capacity Building Outline



Module	Topics to be Discussed
Module 1: Introduksyon sa Nutrisyon, Ang Unang 1000 na Araw, at Dietary Supplementation	<ul style="list-style-type: none"> • Ang Philippine Plan of Action for Nutrition • Ang Unang 1000 na Araw • Dietary Supplementation • The Karinderya Para sa Healthy Pilipinas project
Module 2: Basic Concepts on Nutrition	<ul style="list-style-type: none"> • Halaga ng Magandang Nutrisyon • Nutrition and Malnutrition • Ang mga Sustansya at ang kanilang mga Gamit; Mga prinsipyo ng Malusog na Diyeta • Ang kinakailangang Sustansya sa Unang 1000 Araw. Eksklusibong Pagpapasuso at Kumplementaryong Pagpapakain.
Module 3: Food Preparation and Food Safety	<ul style="list-style-type: none"> • Kumplementaryong Pagpapakain o Complementary Feeding • Kaligtasan at Kalinisan ng Pagkain o Food Safety and Sanitation • Water, Sanitation, and Hygiene
Module 4: Nutrition in Emergencies	<ul style="list-style-type: none"> • Nutrisyon at Dietary Supplementation sa gitna ng Sakuna o Kalamidad



Basic Resource Requirements

Item	Unit Cost	No. of Units	No. of Times	Cost
Hot meals (Children under 5 y/o)	26.00	600	120 days	1,872,000.00
Hot meals (Pregnant women)	27.00	130	120 days	421,200.00
Hot meals (Lactating women)	28.00	70	120 days	235,200.00
Compensation (Barangay Nutrition Scholar)	12,000.00	10	4 months	480,000.00
Compensation (Barangay Nutrition Patroller)	3,000.00	10	4 months	120,000.00
Total Cost				3,128,400.00

Sample for 120 day dietary supplementation program, 100,000 population, 10 barangays

Monitoring and Evaluation

- M&E will be done through **regular weight monitoring, operational monitoring, and KAP pre- and post-testing.**
- **Tools** included in the Playbook:
 - Karinderya monitoring sheet
 - Attendance monitoring sheet
 - Weight monitoring sheet
 - KAP survey

Indicators

- Number or percentage of partner karinderya compensated based on agreed-upon timeline
- Beneficiaries' attendance to 120-day dietary supplementation activities
- Number or percentage of beneficiaries with increased weight or improved nutritional status
- Percentage of beneficiaries with improved KAP after graduation OR percentage of beneficiaries with retained nutritional status one year after graduation

Communication Materials



Teach your child to eat well!

Here comes the airplane!
Make meals engaging by sitting down with them while they eat. Turn feeding into games with your child to make mealtimes fun.

Big kid things.
When your child can, allow them to serve and pour themselves. Your child will learn to take and eat only what they can finish.

Sneaky vegetables.
Does your kid hate vegetables? Try hiding them under other foods, or mixing or blending them so kids don't know they're there.

Try lots of new things.
Your child might not be eating because they're used to the same food. Try new snacks introduces them to new flavors and prevents them from being picky.

Baby see, baby do.
The best way to teach your child to eat healthy is to eat healthy yourself. Modeling eating healthy will help your child see new, confident eating healthy too.

Don't hurt me!
Never punish your child with withholding food or forcing them to eat something. Children with bad associations with food may have a more difficult time eating.

The Karinderya Para sa Healthy Pilipinas Program and Your Health

The Karinderya Para sa Healthy Pilipinas Project or the Karinderya Project is one of the programs of [City/Municipality] which enlists the help of local karinderyas to improve the nutritional status of children aged 5 and younger, as well as pregnant and lactating mothers.

THE IMPORTANCE OF NUTRITION

Nutrition is a cornerstone of good health. Here are some of the benefits of eating healthy:

- Your child will grow strong and tall, with less risk for catching illnesses like the flu, or developing diseases like diabetes or heart disease.
- Your child will be sharp and smart, doing well in school, and increasing their chances for success in the future.
- Your child will be friendlier to others, and more social.

JOIN COMMUNITY SUPPORT IN RAISING YOUR CHILD TO BE SMART AND HEALTHY!

- Dietary supplementation will be provided to you or your child in the form of hot meals
- Nutrition counseling or education to help you maintain or improve your child's nutrition will also be provided.

JOIN THE KARINDERYA PARA SA HEALTHY PILIPINAS PROJECT TODAY!

Children under five years old identified as undernourished, as well as nutritionally-at-risk pregnant and lactating mothers should simply go to their assigned karinderyas at 2:00 PM every day to participate in the Karinderya Project.

Your assigned karinderya:

Your assigned BNS:

Become a Partner Karinderya!

The Karinderya Para sa Healthy Pilipinas Project is a program of [City/Municipality] which enlists the help of the local karinderyas to provide nutrition counseling and education and supplemental nutritious hot meals to undernourished children aged 5 and below, pregnant and lactating mothers.

Join us if you meet the following:

- Operating for at least 5 years
- Owner/cook is physically healthy and willing to participate
- Can prepare healthy and nutritious meals
- Can accommodate at least 10 beneficiaries
- Has sufficient funds
- Can commit to the 120-day project

Why join?

- The 120 will gain karinderya will be compensated for every meal served to beneficiaries.
- Priority in receiving business or sanitation permits.
- Access to training sessions on the basics of nutrition, food safety and food preparation.

You only need to submit:

- Information Form
- Copy of sanitation/business permit
- Cedula
- 2x2 photo

Contact your local Barangay Nutrition Scholar (BNS) and become a Partner Karinderya now! (Name of BNS, Contact number)

Want to give back to your community?

Donate to the Karinderya Para sa Healthy Pilipinas Project today!

The Karinderya Para sa Healthy Pilipinas Project is a program of [City/Municipality] which enlists the help of the local karinderyas to provide nutrition counseling and education and supplemental nutritious hot meals to undernourished children aged 5 and below, pregnant and lactating mothers.

Donations of fresh ingredients for beneficiaries' meals and equipment for our Barangay Nutrition Scholars to use are welcome!

The following donations are not allowed: tobacco, alcohol, sugar-sweetened beverages, junk food, fast food, breast milk substitutes, and additive products.

For inquiries or donations, contact the [City/Municipality] Nutrition Action Office:

Point Person: [Insert name of Nutrition Action Officer]
Telephone Number: [Insert telephone number]
Address: [Insert office address]

Nutrition is a cornerstone of good health and physical and social development. By improving the nutritional status of our beneficiaries, we can help children to grow strong, healthy, smart, and friendly.



DOH Health Promotion Playbooks

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Equipping Communities through the Health Promotion Playbook



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