10. Philippines's report

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Being a part of the Asia Young Dietitian Network (AYDN) is both a privilege and an opportunity. Privilege because we got to meet and interact with other Asian dietitians and Opportunity because we got to learn and observe how Dietitians work in their countries. From November 28th to December 1st, Asian Dietitians were invited to Tokyo Japan for the Kick-off meeting of the Asian Young Dietitian Network. Alongside this, we were able to visit Nerima Hikarigaoka Hospital and Funabori Primary School.

Visit to Japanese Hospital (Nerima Hikarigaoka Hospital)

For a Dietitian like me who is not exposed to hospital work, I am impressed with the cleanliness and orderliness of the hospital. The visit is only short but I am amazed by the innovative and advanced technologies that they use in their kitchen. I also observed the vegetables that are grown in the nutrition room which I think is a good practice for every hospital to serve fresh vegetables to the patients. Ordering and preparing meals are different in our country since we do not have freezers and food heaters to hold meals, we prepare food on the same day. Meal supplements are prepared by the dietitian in our country while here they serve ready-to-eat/drink meal supplements. If there is anything that I would like to learn more about and apply in my country is their nutrition care system and data system. I think Asian Dietitians need to understand and teach each other hospital best practices to be able to apply them in their country in that way, we can uplift the respect of other professionals.



Fig 1. Meal dividing room in the hospital

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Visit to elementary school for school lunch (Funabori Elementary School)

Visiting Funabori Elementary School for me is the most memorable one. I know how disciplined the students are in Japan but it was my first time witnessing it. Since our country does not have that many school dietitian and my knowledge of their duties and responsibilities is limited, this is my first time to learn all of it. School dietitian work is not easy because she deals with children and I respect the way she and the school teach the students about nutrition. She assesses, monitors, and keeps all data of all students to see their progress when it comes to their health. Meal planning is also a difficult task for her especially if it needs to cater to a range of dietary requirements and food allergies. Aside from this, I also learned that students are not allowed to bring snacks or lunch. In our country, students either bring their snacks and lunch or buy in school canteens. If our country is open to applying this practice, it means more demand for school dietitians and fewer malnourished children in schools.



Fig 2. Cooking process at the school lunch

Kick-off meeting of AYDN

It was a great honor to represent my country Philippines at the kick-off meeting of the Asian Young Dietitian Network.

The Philippines is an archipelago in Southeast Asia where food culture and cuisine are a fusion of more than a hundred distinct ethnolinguistic groups. These groups' cuisines evolved over the centuries with all nearby countries with varied influences from Chinese, Spanish, and American cuisines that melded to meet local preferences. Rice and root crops are our staple foods. The typical Filipino meal is composed of vegetables, seafood, dairy, meat (pork, poultry, beef), and rice. The blend of flavors is a combination of sweet, sour, and salty taste. Vinegar and soy sauce are some of the common ingredients in dishes like Adobo and tamarind in Sinigang. Filipino cuisine even though it continues to evolve as new techniques, styles of cooking, and ingredients find their way into the country. The Philippines is suffering from a triple burden of malnutrition including stunting and wasting, micronutrient deficiencies, and overweight and obesity (1). The Department of Health (DOH), National Nutrition Council (NNC), FAO, WHO, and UNICEF jointly call upon the Public, civil society organizations, academe, and the private sector to take action to prevent and manage childhood overweight and obesity (1). That being said, overweight and obese children are more likely to stay obese into adulthood and to develop noncommunicable diseases (NCDs) like diabetes and cardiovascular diseases at a younger age (1-2). Factors contributing to the increasing problem of overweight and obesity include poor diets, inadequate nutrition, failing food systems, and limited physical activity (1-2). Prevention is the most feasible option for curbing childhood obesity. Several programs and policies were made and implemented to address overweight and obesity. Nutrition interventions are a key part of obesity management and this is led by dietitians. To become a Registered Nutritionist-Dietitian in the Philippines, one should finish a 4-year Bachelor course in Nutrition and with 1200 hours of on-the-job Dietetics in hospitals, training/internship food service companies, and community health facilities. After which, he/she can take the licensure examination with a 75% passing rate (3). Dietitians in the Philippines can pursue graduate studies and doctorate studies. Renewal of license is every 3 years and to be able to renew, he/she may earn 45 CPD units from webinars or annual conferences and secure a Certificate of Good Standing from AIPO. Filipino RNDS have the privilege to work in the US by taking the Registered Dietitian exam; this is because of the Mutual Reciprocity of 1993 (3). Being a Dietitian is a flexible profession, it can develop a career in various fields,

hospitals, academe, public health, corporate, private practice, etc. It is a fun learning profession even though it carries credibility and responsibility. But not all people are aware of the gravity of our career that we are either not recognized or constantly being compared as less important to other medical professionals. In a way, I still feel respected but still need to think about how to uplift the profession.

Listening to other countries' reports, I learned that when it comes to food culture and cuisines, we have similarities and differences, especially in the taste and presentation of the food. Some of us share the same nutrition issues and learning about their programs and interventions made me think of the possibilities that can be implemented in our country. Being a dietitian is very different in each country and I find Indonesia and Japan a little bit complicated to become a Dietitian but when it comes to on-the-job training both Japan and the Philippines have almost the same hours to complete. I think for advantages and challenges of being a dietitian are almost the same for all of us. We share the same sentiments when it comes to recognition and low salaries from other professionals.

My expectations from the network include connection, opportunities, and collaboration. Somehow Asian Young Dietitians are now connected and building a good relationship would be an opportunity for us to learn more by sharing, exchanging knowledge, and learning success stories from each country's nutrition programs for future collaboration. I am looking forward to AYDN's activities and making Asian Dietitians stronger and well-respected.

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