

STATE OF FOOD INSECURITY AND NUTRITION IN SOUTH-EAST ASIA, 2022

The *State of Food Security and Nutrition in the World 2022*, a flagship publication jointly prepared by the UN Food and Agriculture Organization, the UNICEF, International Fund for Agricultural Development, the World Food Programme, and the World Health Organization, underscored the continuing challenges of food insecurity and malnutrition. Such accrue especially from the pandemic, extreme weather events, uneven patterns of economic recovery, ongoing war in Ukraine, and war-induced supply chain disruptions that have worsened global hunger.

The report sounded the alarm on the implications of this growing food insecurity on children's well-being. The gains earned in the previous two decades in reducing stunting and wasting are under threat.

Affordability and Cost of a Healthy Diet. Forty-two percent (42.0%) of the global population or about 3.1 billion people cannot afford a healthy diet in 2020, of whom 11.3% are from South-East (S-E) Asia. More than half (53.9%) of S-E Asians experienced this affordability issue, higher than the 42% global average (Table 1). Of the seven S-E Asian countries, Lao PDR (79.8%), Indonesia (69.1%) and the Philippines (68.6%) had the biggest shares of their population in 2020 who find healthy food costly, whereas it is only 1.9% in Malaysia.

TABLE 1

PERCENT AND POPULATION IN SOUTH-EAST ASIA WHO ARE UNABLE TO AFFORD A HEALTHY DIET, 2017-2020

Region/Country	Percent (%)				Total Number (in millions)			
	2017	2018	2019	2020	2017	2018	2019	2020
World	42.9	41.5	40.9	42.0	3049.1	2973.8	2961.9	3074.2
South-East Asia	55.6	54.0	52.0	53.9	347.3	340.9	331.6	347.2
Indonesia	70.7	68.9	67.3	69.1	187.2	184.4	182.0	189.1
Lao PDR	80.6	79.2	78.4	79.8	5.6	5.6	5.6	5.8
Malaysia	2.6	2.1	1.7	1.9	0.8	0.7	0.5	0.6
Myanmar	68.1	63.6	59.7	65.1	36.3	34.2	32.3	35.4
Philippines	71.0	71.0	68.6	68.6	74.6	75.7	74.2	75.2
Thailand	17.5	17.9	16.0	17.0	12.1	12.4	11.1	11.9
Viet Nam	32.4	29.4	26.8	30.0	30.7	28.1	25.8	29.2

Note: Data is not available for Brunei Dar., Cambodia, Timor-Leste, and Singapore.

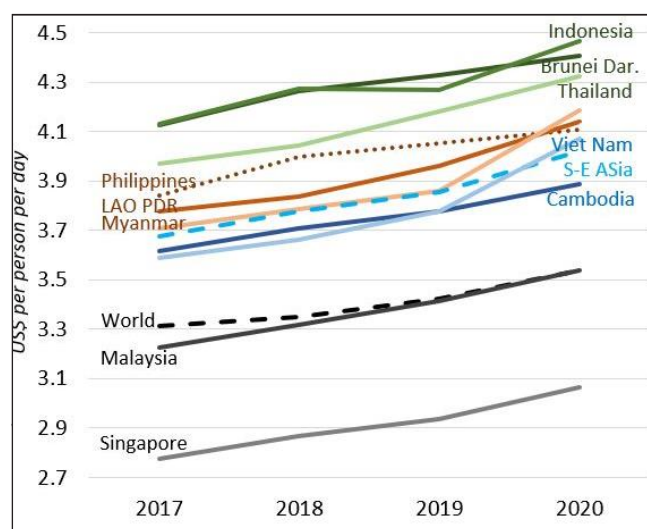
Source: Annex 3 of FAO, IFAD, UNICEF, WFP, and WHO. 2022. *The State of Food Security and Nutrition in the World 2022*.

In terms of cost in US dollars per person per day, healthy diets were found to be most expensive in Indonesia and Brunei Darussalam, both around \$4.4 in 2020 (Figure 1), much higher than the average \$4.0 for S-E Asia. Five other countries exceeded the regional average for



the same period and these are Thailand, Philippines, Lao PDR, Myanmar, and Vietnam. For context, the then \$4.11 healthy diet cost in 2020 for the Philippines is already 41.1% of the 2022 Metro Manila minimum wage (\$10 at the current \$1: P57 exchange rate). Note that the world average for the cost of healthy diet is just \$3.54 per person per day in 2020. In S-E Asia, only Malaysia and Singapore have healthy diets cheaper than both the regional and world averages.

FIGURE 1
COST OF A HEALTHY DIET IN SOUTH-EAST ASIA, 2017-2020



Source: Annex of FAO, IFAD, UICED, WFP and WHO (2022)

Undernourishment and Food Insecurity. Interestingly, prevalence of undernourishment went down between the two data periods: 2004-2006 and 2019-2021 (Table 2). But food insecurity in fact worsened, based on the data for 2014-2016 and 2019-2021. The prevalence

of moderate to severe food insecurity is glaring in Cambodia (50.0%), Philippines (43.8%) and Thailand (33.8%), and unmistakably higher than the regional and world estimates of 18.8% and 28.1%, respectively.

TABLE 2
PREVALENCE OF UNDERNOURISHMENT AND FOOD INSECURITY IN THE TOTAL POPULATION (%), S-E ASIA

Region/Country	(% Prevalence in Total Population)					
	Under-Nourishment		Severe Food Insecurity		Moderate or Severe Food Insecurity	
	2004-2006	2019-2021 ^a	2014-2016	2019-2021	2014-2016	2019-2021
<i>World</i>	12.2	9.0	7.7	10.7	21.8	28.1
<i>South-East Asia</i>	17.0	5.9	2.4	3.4	15.9	18.8
Cambodia	17.0	6.3	16.9	15.1	48.9	50.0
Indonesia	19.2	6.5	0.7 ^a	0.7 ^{bc}	6.0 ^b	6.0 ^{bc}
Lao PDR	22.4	5.1		8.3		31.8
Malaysia	3.2	2.5	7.8	6.3	17.4	15.4
Myanmar	27.8	3.1		3.7		25.5
Philippines	14.4	5.2		4.8^{bc}		43.8^{bc}
Singapore			1.0	0.7	2.8	4.6
Thailand	11.9	8.8	4.2	10.5	15.1	33.8
Viet Nam	15.5	5.7		0.6 ^{bc}		7.6 ^{bc}

Note: No available data (n.a.) for Brunei Darussalam. Removed Timor-Leste since data is only available for undernourishment. Countries with no available data are left with blank rows.

Undernourishment is defined as the condition of an individual whose habitual food consumption is insufficient to provide, on average, the amount of dietary energy required to maintain a normal, active and healthy life. Moderate food insecurity refers to a lack of consistent access to food, which diminishes dietary quality, disrupts normal eating patterns, and can have negative consequences for nutrition, health and well-being. Severe food insecurity depicts the situation where people have likely run out of food, experienced hunger and, at the most extreme, gone for days without eating, putting their health and well-being at grave risk.

a: Estimates referring to the middle of the projected ranges for the years 2020 and 2021 were used to calculate the three-year averages.

b: Based on official national data.

c: FAO data/estimates were used for years when official national data are not available.

Source: Annex 1 of FAO, IFAD, UNICEF, WFP, and WHO (2022).

Wasting, Stunting, and Overweight children under five (U5). In 2020, the Philippines had the lowest prevalence of wasting among U5 while Indonesia had the highest (Table 3). The problem of stunting is much acute with about one in four S-E Asian U5 considered as stunted in 2020, though already relatively lower than the 2012 prevalence rate of 30.5%. In fact, stunting in S-E Asia is much worse than the global prevalence rate of 22.0%. Conversely, the prevalence of overweight U5 increased in all S-E Asian countries between 2012 and 2020 except for Myanmar and Timor-Leste.

Anaemia, Breastfeeding, Low birthweight. Except for the Philippines which registered a decline in the prevalence of women (15-49 years old) with anaemia, the rest of the S-E Asian countries recorded increases (Table 4). Recall that in 2018, RA 11148 or Kalusugan at Nutrisyon ng Mag-Nanay Act was signed into law. A positive finding for S-E countries, excluding Cambodia,

is the increase in the prevalence of exclusively breastfed infants between 2012 and 2020. But cases of low birthweight still range from 8.2% (Vietnam) to 20.1% (Philippines) in 2015, when prevalence rates were found to be slightly lower than in 2012.

TABLE 3
PREVALENCE OF WASTING, STUNTING, AND OVERWEIGHT AMONG U5, AND OBESITY AMONG 18+, S-E ASIA

Region/Country	(% Prevalence)						
	Among Children Under Five Years of Age					Obesity in Adult Population (18 and up)	
	Wasting	Stunting		Overweight		2012 2016	
		2020 ^a	2012	2020 ^b	2012		
<i>World</i>	6.7	26.2	22.0	5.6	5.7	11.8	13.1
<i>South-East Asia</i>	8.2	30.5	27.4	5.8	7.5	5.4	6.7
Brunei Darussalam		17.5	12.7	8.4	9.3	12.1	14.1
Cambodia	9.7	34.4	29.9	2.1	2.1	3.1	3.9
Indonesia	10.2	34.5	31.8	8.2	11.1	5.5	6.9
Lao PDR	9.0	40.7	30.2	2.3	3.0	4.1	5.3
Malaysia	9.7	18.3	20.9	6.0	6.1	13.1	15.6
Myanmar	6.7	31.9	25.2	2.2	1.5	4.6	5.8
Philippines	5.6	32.2	28.7	3.4	4.2	5.4	6.4
Singapore		3.2	2.8	4.0	4.8	5.6	6.1
Thailand	7.7	13.9	12.3	8.7	9.2	7.9	10.0
Timor-Leste		52.8	48.8	3.0	2.6	2.9	3.8
Viet Nam	5.8	25.9	22.3	4.2	6.0	1.6	2.8

Note: Countries with no available data are left with blank rows.

Wasting is defined as weight-for-height less than -2 standard deviations (SD) below the WHO Child Growth Standards median. Similarly, Stunting defines those with -2 SDs height-for-age, per WHO median. Conversely, Overweight as children below five years old with as weight-for-height greater than 2 SDs than the WHO growth median. Obesity for adults is defined as a BMI of 30 kg/m² or more.

a: For regional estimates, values correspond to the model predicted estimates for the year 2020. For countries, the latest data available from 2014 to 2020 are used.

b: FAO data/estimates were used for years when official national data are not available.

Source: Annex 1 of FAO, IFAD, UNICEF, WFP, and WHO (2022).

TABLE 4
PREVALENCE OF ANAEMIA AMONG WOMEN (15-49Yo), EXCLUSIVELY BREASTFED 0-5 Mo. INFANTS, AND LOW BIRTHWEIGHT, S-E ASIA

	(% Prevalence)					
	Anemia in women (15-49 y.o.)		Exclusive Breastfeeding among Infants (0-5 months)		Low birthweight	
	2012	2019	2012 ^a	2020 ^b	2012	2015
<i>World</i>	28.5	29.9	37.1	43.8	15.0	14.6
<i>South-East Asia</i>	25.0	27.2	33.5	45.1	12.4	12.3
Brunei Darussalam	14.8	16.7			12.1	10.8
Cambodia	46.1	47.1	72.8	65.2	12.6	12.1
Indonesia	27.0	31.2	40.9	50.7	10.2	10.0
Lao PDR	36.3	39.5	39.7	44.4	17.7	17.3
Malaysia	30.1	32.0		40.3	11.3	11.3
Myanmar	39.4	42.1	23.6	51.2	12.5	12.3
Philippines	16.9	12.3	33.0	54.9	20.4	20.1
Singapore	11.5	13.0			9.7	9.6
Thailand	22.1	24.0	12.3	14.0	10.8	10.5
Timor-Leste	26.8	29.9	50.8	65.0		
Viet Nam	17.0	20.6	17.0	24.0	8.4	8.2

Note: Countries with no available data are left with blank rows. Prevalence of Anemia refers to women of that age with a haemoglobin concentration below 110 g/L for pregnant women and below 120 g/L for non-pregnant women. Exclusive breastfeeding for infants <6 months of age is defined as receiving only breastmilk and no additional food or drink, not even water. Low birthweight is defined as a weight at birth of less than 2,500 g (less than 5.51 lbs), regardless of gestational age.

a: Regional estimates are included when more than 50% population is covered. For countries, the latest data available from 2005 to 2012 are used.

b: Regional estimates are included when more than 50% of population is covered. For countries, the latest data available from 2014 to 2020 are used.