Cooperation between Japanese and Cambodian Dietitians in Setting up a Hospital Diet Management System

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Summary  Cambodia faces a considerably high percentage of the stunted under 5 (Unicef, 2014). Despite the National Nutrition Strategy Launched by the Ministry of Health in cooperation with development partners, nutrition improvement projects have not always been effective. It is generally said these issues are addressed in many other developing nations, and the literature largely documented that successful nutrition programmes are community-based programmes because of their sustainability and the intensive communications between health workers and beneficiaries. Learning from the past experiences, the Foundation for International Development/Relief organized a project team with a Cambodian dietitian and an experienced Japanese dietitian to implement a hospital diet programme for children from April 2006 to March 2014 in the National Pediatric Hospital (NPH) in Cambodia. The project has two objectives: establishing a hospital diet management system, and developing the capacity of NPH staff. Hospital food menus were created paying particular attention to Cambodian culture, eating habits and accessibility to the ingredients for the purpose of continuous supply. We have also put emphasis on the communication between dietitians and family members of the children to let them understand the importance of a nutritious diet. After 8 y of project implementation, the hospital diet management system was established providing 7 types of menu with nutritious diets. The final evaluation of the project showed that NPH staff have the intention to continue hospital food supply with their acquired knowledge and capacity. In practice, a Cambodian dietitian currently takes the initiative for a continuous nutritional diet in NPH. The key to this success is the collaboration between Japanese dietitians with experience and Cambodian dietitians with knowledge of Cambodian eating habits. Taking our experience into account, it is highly recommended to educate Cambodian dietitians, as they are extremely scarce, and to increase the awareness of health care staff towards the importance of nutrition management.

Key Words  stunted, National Nutrition Strategy, dietitian, hospital diet, Cambodian eating habits

1. Outline of the Hospital Diet Assistance Project

Cambodia has been struggling with children’s bad nutritional status. According to the Cambodia Demographic Health Survey (CDHS 2010) (1), 40 percent of children in the country under age 5 are stunted, 14 percent are severely stunted, and 28 percent are underweight. These figures, which have not shown any significant progress since 2005, indicate nearly half of all Cambodian children are malnourished. At the same time, like many other developing countries, Cambodia is presently facing the threat of emerging obesity and non-communicable diseases which are partly attributable to improper nutrition intake. Such a situation, caused by insufficient and/or improper nutrition intake, has to be urgently dealt with.

Hospitals are expected to play important roles in not only medical care but also nutritional care for patients. Improvement of patients’ nutritional status has to be regarded as a part of medical treatment. However, the nutritional status of patients is often neglected or overlooked due to a number of factors, including lack of recognition of the need for nutritional care, lack of proper knowledge on nutrition management and lack of information sharing on a patient’s nutritional status among different departments.

Considering such a reality, FIDR has implemented the Hospital Diet Assistance Project (HDP) (2) in the National Pediatric Hospital (NPH) for 8 y so that NPH would become the model of clinical diet in Cambodia. As a result of 8 y of project implementation, a hospital diet management system with 7 types of nutritious diets as a part of medical treatment was established in NPH. NPH became the country’s first national hospital that operates systematic diet management directly working on the nutritional status of the patients.

2. Cooperation between a Cambodian Dietitian and Japanese Dietitians

The setting up of the hospital meals was considered as a crucial need for the medical treatment, though the
required intensive technical and monetary support as well as the human resources in the clinical nutrition field is lacking. Through the Hospital Diet Assistance Project of the Foundation for International Development/Relief and the close collaboration of the National Pediatric Hospital, the role of the dietitian is mainly played by doctors and nurses.

In order to achieve the objective of the project, experienced Japanese dietitians assisted by a Cambodian dietitian, worked on awareness-raising in terms of the importance of nutritional needs over time. Training, both in-house and outsourced, locally and internationally, was also conducted in order to strengthen technical knowledge and management of the diet system in the hospital. From the “First come, First served” meal system, a systematic diet system came to be installed and operated by the hospital staff, especially meals is delivered in front of the inpatients’ rooms.

Different perspectives on nutrition by the medical staff and dietitian and their limited knowledge was a big challenge. Passing through these challenges, the project helped the hospital staff to install seven different types of diet, namely (1) General diet; (2) Liquid diet; (3) Soft diet; (4) High-energy, high-protein diet; (5) Complementary diet; (6) Low-salt diet; and (7) No-salt complementary diet. In addition, a hospital diet management manual was published and a Cambodian version of nutrient calculation software was also developed based on the reference of the ASEAN Food Composition table for creating the diet recipes in the hospital.

3. Conclusion

Though there surely existed some obstacles, the diet management system was successfully established in NPH thanks to the close cooperation between Japanese and Cambodian dieticians. Though such a diet management system needs to be observed continuously, it should be promoted not only in NPH but also in other hospitals throughout Cambodia. In order to achieve this, human resource development in the field of clinical nutrition is an urgent task. It is also expected that strong encouragement and support from the Ministry of Health, Cambodia and development agencies will be offered.

REFERENCE

1) Cambodia Demographic and Health Survey 2010. UNICEF. http://www.unicef.org/cambodia/12686_18885.html