

**NATIONAL UNIVERSITY OF LESOTHO**  
**FACULTY OF HEALTH SCIENCES**  
**DEPARTMENT OF NUTRITION**  
**COMMUNITY NUTRITION I - NUT3313**  
**SEMESTER I EXAMINATION**

**JANUARY 2024**

**TIME: 3HRS**

**MARKS: 100**

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**Instructions:**

- The paper consists of two (2) sections; section A (65 marks) and section B (35 marks).
- Attempt all the questions.
- Write each question on a separate page.
- Answer questions **orderly**.
- Outline your points clearly

## SECTION A

- 1) What is **community nutrition**? Mention the three arenas of community nutrition practice. **[4 marks]**
- 2) Explain 2 types of nutrition intervention and for each intervention provide example of initiatives that can be implemented to curb malnutrition. **[6 marks]**
- 3) Describe how the following immediate, underlying and basic causes of malnutrition can increase the prevalence of malnutrition in Lesotho. **[16 marks]**

### Immediate causes

- Inadequate dietary intake
- Disease

### Underlying causes

- Household food insecurity
- Inadequate care
- Unhealthy household environmental and lack of health service

### Basic causes

- Lack of capital
  - Social,
  - Economic
- 4) Gaining cultural competence in community health care is a developmental process involving developing attitudes, skills, knowledge, and levels of awareness that enable one to provide culturally appropriate, respectful, and relevant interventions.
    - a) List and describe the need for gaining cultural competence as nutritionists. **[10 marks]**
    - b) Explain how the following causes contribute to health disparities: **[12 marks]**
      - Socioeconomic status
      - Insurance issues
      - Culture
      - Access to and utilization of quality health care services
      - Environment.
  - 5) What is food culture? **[2 marks]**
  - 6) Mention five aspects of food culture. **[5 marks]**

7) Explain five barriers to a healthy diet.

[10 marks]

**Total: 65 marks**

## **SECTION B**

1) How does a problem become part of the “policy agenda,” and what factors are important in determining whether a problem becomes recognized as being on the policy agenda?

[10 marks]

2) Vitamin A deficiency is a serious global nutritional problem that particularly affects preschool-age children. Iron deficiency, the most prevalent micronutrient deficiency in the world, affects more than 2 billion people. In Lesotho it affects about half of all children and more than 70% of all women. In regions with a high prevalence of poverty, inadequate infrastructure, and poorly developed markets for food processing and delivery, biofortification has been proposed as a more effective intervention.

Discuss how you would formulate a policy on biofortification of Basotho staple foods (maize, beans) to address vitamin A and iron deficiencies in children.

[10 marks]

3) Deficiencies of micronutrients, particularly iron, iodine, vitamin A, zinc, and folic acid, wreak havoc on survival, health, and productivity around the world. Micronutrient deficiencies are often called “hidden hunger” because they do not manifest themselves in immediate physical signs but are insidious in causing disease. They are particularly problematic in Lesotho because of the sheer numbers of women and children affected: 35% of the world's malnourished children live in Lesotho, and 34% of children in Lesotho are stunted. Indeed, because the Basotho diet is dominated by consumption of soft, crumbly or stiff maize meal porridge, a poor micronutrient source, the population suffers from multiple micronutrient deficiencies. The Lesotho government has not met its current goals related to reducing micronutrient deficiencies.

Discuss in detail the five policies in place for addressing above-mentioned micronutrient deficiencies in Lesotho and their effectiveness.

[15 marks]

**Total: 35 marks**

**End**

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