

**Partnerships for Mobilizing the Diversity in Traditional  
Food Systems to Ensure Adequate Nutrition and  
Health in  
ECOWAS Member States  
Ouaga SEPTEMBER 5 & 6 2007**

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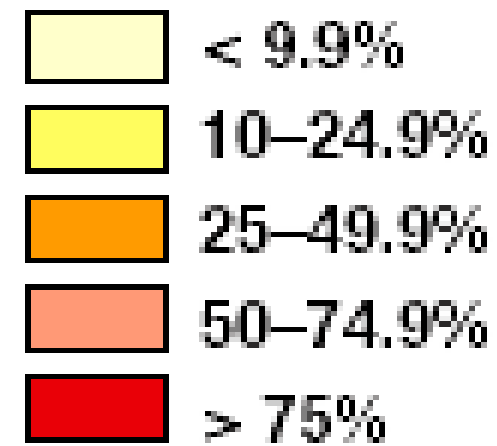
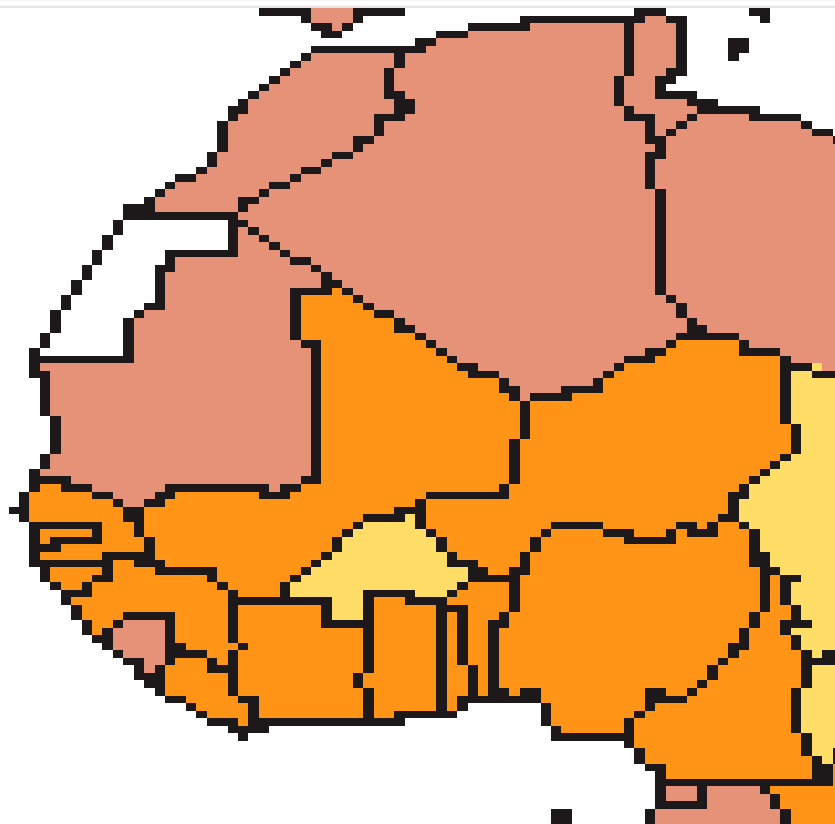
# Background

## **Paradox of Nutrition situation in West Africa**

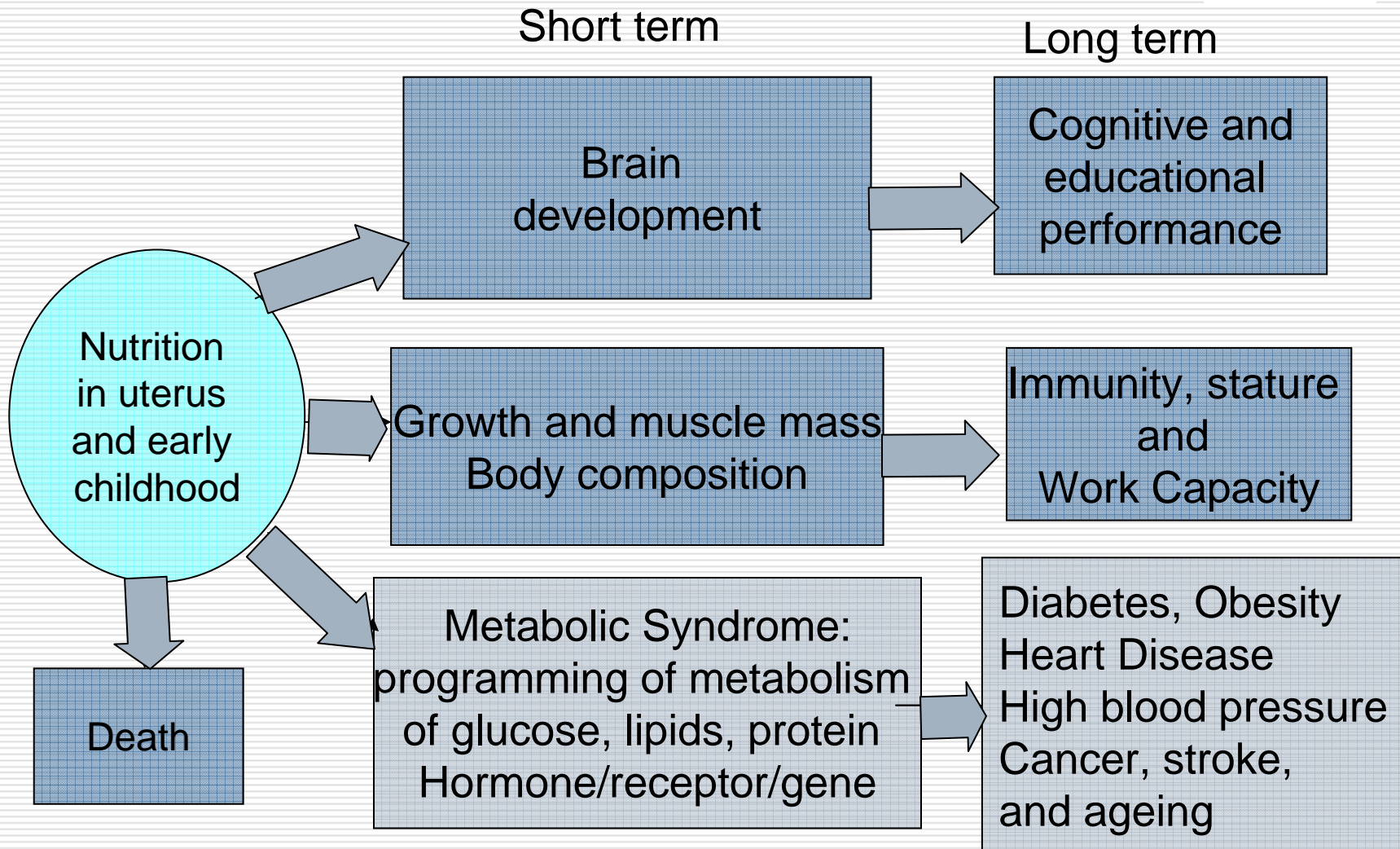


PAYS	Retard de Croiss. (2)	% Perte PIB (4)	Rang Mortalité <5ans (2)	Rang IDH (3)	Taux de Goitre % (4)	# décès CVA < 5 (4)	IPH-1 (Rang/103 pays/) (1)
Benin	31	1.1	25	167	33	9 000	95
<b>Burkina</b>	<b>37</b>	<b>2</b>	<b>8</b>	<b>175</b>	<b>17</b>	<b>20 000</b>	<b>102</b>
Cap Vert	16		90	105			45
Côte d'Ivoire	25		14	163			84
Gambie	21	1.3	37	155	20	1 000	88
Ghana	26	1.1	48	138	18	12 000	62
Guinee	46	1.4	23	156	23	8 000	
<b>Guinee. B</b>	<b>30</b>	<b>1.5</b>	<b>10</b>	<b>172</b>	<b>17</b>	1 750	<b>93</b>
Liberia	<b>39</b>	1.2	<b>5</b>		18	5 000	
<b>Mali</b>	<b>38</b>	<b>2.7</b>	<b>7</b>	<b>174</b>	<b>42</b>	<b>24 000</b>	<b>101</b>
<b>Niger</b>	<b>20</b>	0.6	<b>2</b>	<b>177</b>	<b>20</b>	<b>26 000</b>	<b>103</b>
<b>Nigeria</b>	<b>40</b>	<b>1.7</b>	<b>13</b>	<b>158</b>	<b>8</b>	<b>82 000</b>	<b>75</b>
Senegal	25	1.3	32	157	23	9 500	83
<b>Sierra L</b>	<b>34</b>	1.4	<b>1</b>	176	<b>16</b>	<b>13 250</b>	<b>98</b>
Togo	47	1.0	29	143	14	3 250	76

# Obesity in adulthood in ECOWAS



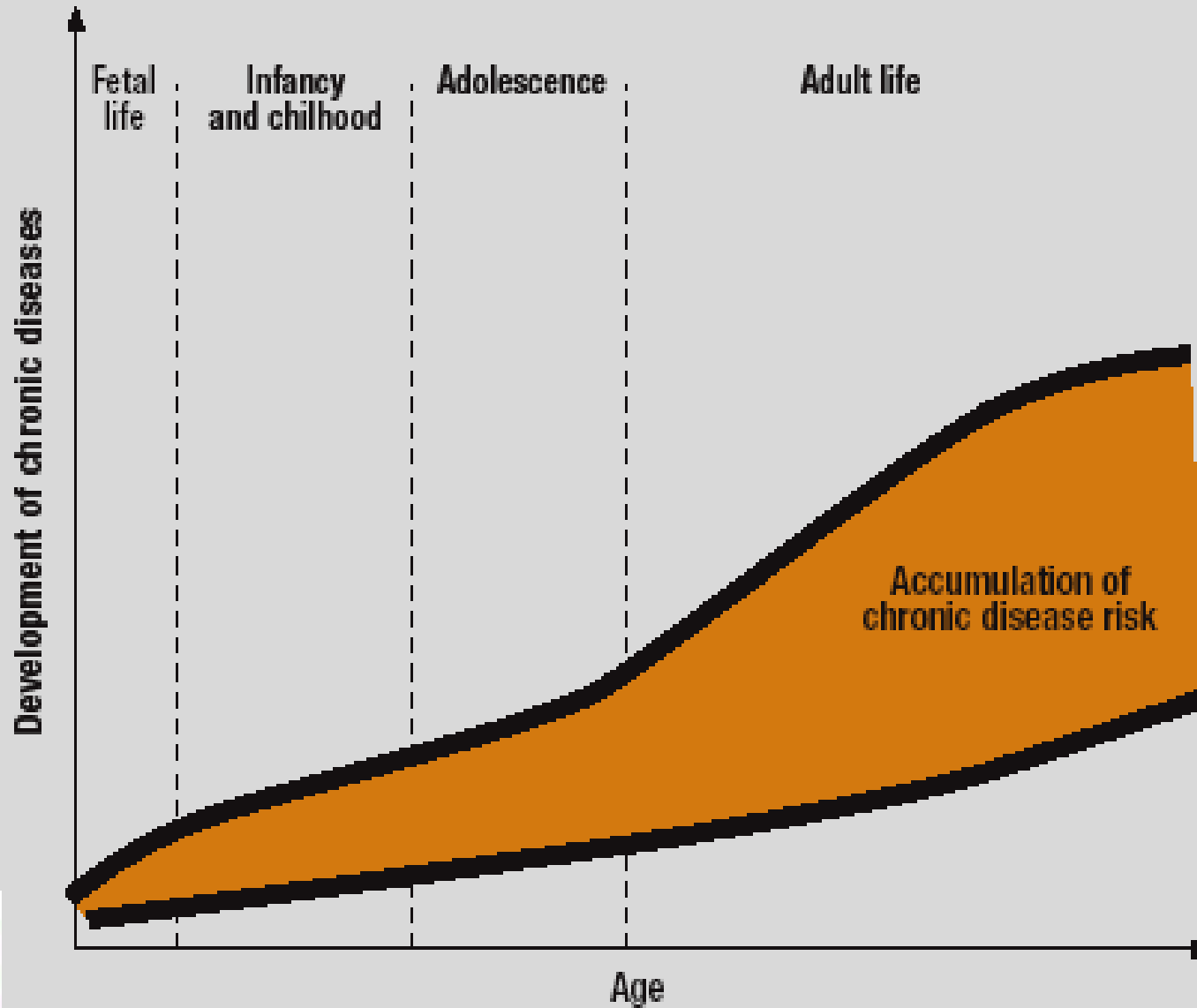
Source: Preventing chronic diseases a vital Investment: WHO (2005)



## Consequences of growth failure across the life cycle

(James et al 2000)

# A life course approach to chronic diseases



WHO: 2005

# Standing Committee on Nutrition



## The nutrition transition and the paradoxical double burden of malnutrition

- The Nutrition Transition is occurring in countries together the processes of economic development, industrialization and increasing urbanization
- Increasingly countries no longer just have undernutrition as a problem, they also have overnutrition, and this is the double burden of malnutrition.
- The paradox is that as countries develop economically these two types of malnutrition increasingly co-exist, first in the same country (more in urban than rural), but then increasingly in the same community and eventually even in the same household.
- Having overweight parents (typically mothers more than fathers) and underweight children in the same household, seems to deny that food availability or access is part of the problem.

**R. Schrimpton ( Mindelo, Sep, 19-2006)**

## **CONTEXT: WAHO & BIiversity**

- Under nutrition: Structural
- Over Nutrition: raising
- Demographic growth & Poverty/PP
- Globalization: Open Markets & Marketing
- Few Actions: on Prevention & Mitigation





# Objectives

- ❑ Understand the potential role of local and traditional foods in the prevention of micronutrient deficiencies and diet related chronic diseases.
- ❑ Explore the development of action-oriented collaboration between sectors through a strategic analysis(SWOT) within the current collaborative arrangement between agriculture and health sectors.
- ❑ Carry out strategic direction for an advocacy strategy to build and strengthen collaboration between health, agriculture, and the private sector, for significant improvements in nutrition and health programmes.
- ❑ Identify and propose options to accommodate existing legal frameworks within the newly developed cross-sectoral strategy for the prevention of micronutrient deficiencies and diet related chronic diseases.
- ❑ Develop action plans for implementation within the 15 ECOWAS.



# ***Expected Outcomes***

- ❑ Collaboration is initiated between policy and decision makers in agriculture, health/nutrition sectors.
- ❑ Mechanisms for cross-sectoral collaboration are defined.
- ❑ Constraints to collaboration, including policy constraints, between the sectors for the promotion of food related preventive measures against malnutrition and diet related chronic diseases are identified and solutions proposed.
- ❑ A cross-sectoral working group (coalition of workshop participants) established to develop and ensure sustainability of collaborative activities
- ❑ A joint strategy and action plan for advocating positive changes in dietary patterns of population groups in West Africa developed.
- ❑ Current legal instruments hindering the production, processing availability, access and consumption of local and traditional foods that help to prevent malnutrition and diet related chronic diseases, as well as possible policy and legal gaps identified and solutions proposed.



# Challenges

- Too many
  - Policy “Papers (PRSPS/Banjul 2002)
  - Declarations
  - Strategies
  - MDGs
- Partnership & Coordination
  - Optimize resources
  - Compartive advantages
- Technocratic approach and Communities Neglected
- Underlying causes of Malnutrition: Macro and Micro economic measures, distribution of the “Wealth of Nations” /A. Smith: Ideologic Position **Policy**  
**Implications**



# Challenges

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- ❑ Need of Paradigm Change
  - Consumption of Market oriented foods vs
  - Consumption of Available
  - Culturally acceptable, affordable, Biologically useful
- ❑ Need of Policy change to
  - Support Traditional Foods systems: Sensitization & marketing
  - Support Research
  - Strengthen Public Private Civil Society partnership
  - Policy Harmonization “Market Oriented in ECOWAS” customs, taxation, tariffs, QAC...



- **Thanks**
- **Merci**
- **O'Brigado**

