



Agenda Item 5

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**JOINT FAO/WHO FOOD STANDARDS PROGRAMME
FAO/WHO COORDINATING COMMITTEE FOR AFRICA**

19th Session

Accra, Ghana, 1 - 4 February 2011

**FAO and WHO ACTIVITIES IN NUTRITION IN THE AFRICAN REGION
(Prepared by FAO and WHO)**

FAO/WHO are pleased to present some of the activities that were carried out in Africa in 2010.

FAO Activities:

Food Composition Training course

1. Data on the nutritional composition of foods are essential tools for food labelling, monitoring dietary intake, linking diet to health and disease, planning and prescription, education, food security, trade and legislation. A two-week training course on food composition was given in South Africa from 15-26 November 2010. The course was jointly sponsored by the Graduate School VLAG, University of Pretoria, and the Division of Human Nutrition in cooperation with United Nations University (UNU), Food and Agriculture Organization of the United Nations (FAO), and the European Food Information Resource Network (EuroFIR). The course “Food Comp 2010” demonstrated how to produce, manage and use good quality food composition data in a standardized way, using harmonized procedures. Eighteen participants from Botswana, Cameroon, Ethiopia, Kenya, Mozambique, Nigeria, South Africa, Tanzania, Uganda and Zimbabwe attended the course.

Food Composition publication

2. The publication *Composition of Selected Foods from West Africa* was produced by FAO, in collaboration with the West African Health Organization and Bioversity International. The food composition table includes 173 West African foods including some varieties. These data represent the average values of the collected compositional data compiled in 2010 using different data sources from 7 countries (Benin, Burkina Faso, Ghana, Guinea, Niger, Nigeria and Senegal): scientific papers, thesis, university reports, as well as food composition databases. The publication will be updated in 2011.

Complementary foods project in Malawi

3. FAO promotes improved complementary feeding by teaching families how to enrich young children’s diets using locally available nutrient-dense foods. Feeding recommendations and recipes were developed and tested through formative research. In 2011, project activities will commence in Malawi. The baseline survey is planned to take place in April/May 2011. Partnering with the Justus-Liebig-University Giessen, Germany, FAO will evaluate the effectiveness of the “Trials of Improved Practices” for generating sustainable feeding recommendations and recipes; 2) the extent to which locally available and affordable foods can meet the nutritional requirements of children aged 6-23 months; 3) the effectiveness and impact of combining behaviour change communication with crop and dietary diversification; and 4) the extent to which improved complementary feeding practices will be sustained over time and can be replicated and scaled up through local support mechanisms. An expert meeting is planned from 7-9 March in Rome to finalize the research design.

Supporting Food Security, Nutrition and Livelihoods in Sub-Saharan Africa

4. The three year German-funded project “Supporting Food Security, Nutrition and Livelihoods in Sub-Saharan Africa” is designed to assist FAO and its partners to integrate food security, nutrition and livelihoods objectives into regional, national and local policies and programmes. In 2010, FAO was active in

Cape Verde, Congo DRC, Côte d'Ivoire, Ethiopia, Mali, Mauritania, Mozambique, Rwanda, Sierra Leone and Uganda.

WHO Activities:

Resolutions, Partnerships and Advocacy

5. The World Health Assembly adopted resolution WHA63.23 on Infant and Young Child Nutrition in 2010 and two workshops for its implementation were organized. An advocacy document on Food Crisis in Africa and a framework for its implementation was developed. Food security was discussed during the Second Inter-ministerial Conference on Environment in Angola in 2010.

Food and Nutrition Policies, Micronutrient Deficiency

6. Twelve countries conducted landscape analysis and revised nutrition strategies and action plans¹. Cape Verde developed school feeding and gardens projects. Benin, Eritrea and Ghana adapted the WHO DPASS². Guinea and Mozambique developed national nutrition policies and plans. Workshops on policy development and flour fortification were organized for countries. Five³ countries elaborated strategic plans on Iodine Deficiency Disorders. Ghana, Kenya and Tanzania addressed iron deficiency anaemia and vitamin A deficiency. Research on the Efficacy of Neonatal Vitamin A Supplementation in Improving Child Survival was initiated in Ghana and Tanzania.

Integrated management of Acute Malnutrition

7. A regional workshop on IMAM⁴ was organized for four countries⁵ and ten countries supported to build a national pool of trainers⁶. Cote d'Ivoire, Guinea, Mali, Togo and Uganda adapted and implemented various training manuals and guidelines. Cote d'Ivoire and Guinea reinforced their multisectoral Food Safety and Nutrition Coordination Teams. Côte d'Ivoire was supported to develop educational material on nutrition for school children. EHA emergency training module on nutrition was updated.

Nutrition Surveillance and WHO New Growth Chart

8. Nutrition indicators for IDSR⁷ were defined and a training module was elaborated. Capacity was built on the new child growth standards in ten countries⁸. Technical support was provided to strengthen nutrition surveillance in eleven countries⁹. Six¹⁰ countries strengthened surveillance systems and the nutrition surveillance profile was mapped in 13 countries¹¹.

¹ Burkina Faso, Comoros, Cote d'Ivoire, Ethiopia, Ghana, Madagascar, Mauritania, Mozambique, Namibia, Niger, Sao Tome and Principe and South Africa

² Diet and Physical Activity Strategy

³ Burundi, Comoros, Cote d'Ivoire, Guinea and Kenya

⁴ Integrated Management of Acute Malnutrition

⁵ South Africa, Swaziland, Zambia and Zimbabwe

⁶ Botswana, Burundi, Gambia, Ghana, Malawi, Namibia, Nigeria, Niger and Zimbabwe,

⁷ Integrated Disease Surveillance and Response

⁸ Cote d'Ivoire, DRC, Madagascar, Malawi, Mali, Mozambique, Sierra Leone and Tanzania

⁹ Angola, Botswana, Central African Republic, Chad, DR Congo, Equatorial Guinea, Ethiopia, Lesotho, Madagascar, and Zimbabwe

¹⁰ Burundi, Coted'Ivoire, Madagascar, Malawi, Uganda and Zimbabwe

¹¹ Botswana, Burkina Faso, Chad, Comoros, Equatorial Guinea, Ghana, Madagascar, Sao Tomé and Principe, Sierra Leone, South Africa, Zambia and Zimbabwe

Infant and Young Child Nutrition and in HIV

9. There was a consultation on integration of Nutrition in HIV/AIDS programmes for 20 Francophone countries. Guidelines on Anti-retroviral Therapy, PMTCT¹² and infant feeding was revised and implemented. Fourteen countries¹³ conducted activities on nutrition, IYCF and HIV. Baby Friendly Hospitals and Nutrition Friendly Schools were strengthened in five countries¹⁴. The World Breastfeeding Week was commemorated in August¹⁵.

¹² Prevention of Mother-To-Child Transmission of HIV

¹³ . Angola, Botswana , Swaziland, Mozambique, Mauritania, Lesotho, Ethiopia, Cote d'Ivoire, Guinea, Guinea Bissau, Kenya, Uganda, Rwanda and Zimbabwe

¹⁴ Benin, Burkina Faso, Malawi, Lesotho and Rwanda

¹⁵ Ghana, Cote d'Ivoire and Malawi