



Comprehensive Africa Agriculture Development Programme (CAADP)

West Africa Regional CAADP Nutrition Program Development Workshop

Nutrition Country Paper – The Gambia

English Version

DRAFT

November 9-12, 2011

Dakar, Senegal

This synthesis has been elaborated for a CAADP workshop on the integration of nutrition in National Agricultural and Food Security Investment Plan, held in Dakar, Senegal, from the 9th to the 12th November 2011. The purpose of this Nutrition Country Paper is to present key data and information required to improve nutrition in participating countries and scale up nutrition in agricultural strategies and programs. This work document has been initiated and updated by the workshop work team of the country, composed of focal points from different sectors; with the assistance of the technical piloting committee. It will be regularly updated and completed.

Key policy documents to be consulted

- Poverty Reduction Strategy (PRS) II 2007-2011
- National Medium-term Investment Programme (NMTIP) 2007-2011
- The Gambia National Agriculture Investment Programme (GNAP)
- National Nutrition Policy 2010-2020

Other key documents: Please refer to the workshop material

General sources used to produce this document

Sources	Information	Internet link when available
FAO	Nutrition Country Profiles	http://www.fao.org/ag/agn/nutrition/profiles_by_country_en.stm
	FAO Country profiles	http://www.fao.org/countries/
	FAO STAT country profiles	http://faostat.fao.org/site/666/default.aspx
UNICEF	Nutrition Country Profiles	http://www.childinfo.org/profiles_974.htm
	MICS: Multiple Indicators Cluster Surveys	http://www.childinfo.org/mics_available.html
OCDE / CILLS	Food Security Country Profiles for 9 African Countries : Burkina Faso, Cape Verde, Chad, Gambia, Guinea-Bissau, Mali, Mauritania, Niger, Senegal	http://www.oecd.org/document/6/0,3746,en_38233741_38246823_4163879_0_1_1_1_1,00.html
DHS	DHS Indicators	http://www.measuredhs.com/Where-We-Work/Country-List.cfm
OMS	Nutrition Landscape information system	http://apps.who.int/nutrition/landscape/report.aspx
CAADP	Signed Compact / Investment plans / Stocktaking documents / Technical Review reports if available	http://www.nepad-caadp.net/library-country-status-updates.php
REACH	REACH multi-sectoral review of existing data on the nutrition situation, programmes and policies	<i>When available (Mauritania, Sierra Leone)</i>
SUN	Progress Report from countries and their partners in the Movement to Scale Up Nutrition (SUN)	http://www.scalingupnutrition.org/wp-content/uploads/2011/09/compendium-of-country-fiches-ROME-VERSION.pdf http://www.scalingupnutrition.org/events/a-year-of-progress/
WFP	Food security reports	http://www.wfp.org/food-security/reports/search

I. Context – food and nutrition situation

General Indicators		Sources
Population below poverty line of US\$1.25 per day	34%	UNICEF 2011
Under-five mortality rate (per 1,000 live births)	103	UNICEF 2011
Infant mortality rate (per 1,000 live births)	78	UNICEF 2011
Primary cause of under-five deaths (Malaria)		
Neonatal death – Rate of death due to malaria	29%	WHO 2011
Primary school net enrolment or attendance ratio	75%	UNESCO 2007
Primary school net enrolment -ratio of females/males	79% f /86% m	NS 2007
Agro-nutrition indicators		Sources
Cultivable land area	31%	FAO 2007
Access to improved drinking water in rural areas	86%	UNICEF 2008
Food Availability		
Average dietary energy requirement (ADER)	2200 kcal/person/day	FAO 2005- 2007
Dietary energy supply (DES)	2350 kcal/person/day	FAO 2005-2007
Total protein share in DES (Animal protein)	9.3 % 2.4 %	FAO 2005-2007
Fat share in DES	26.9 %	FAO 2005-2007
Food diversification index		FAO 2005-2007

Geography, population, and human development

The smallest country in Africa, The Gambia situated on the West Coast. It is a narrow strip of land stretching 400 km from East to West between the valleys of The Gambia River. It has a surface area of 11,000 km², and is surrounded by the Republic of Senegal except along its short Atlantic coastline. About 31% of Gambia's land is considered arable of which less than 1% is currently under irrigation (20 km²). Soils are being degraded from erosion, clearing by burning, limited incorporation of green manure, and salinization. The UNDP's Human Development Index (HDI) rated The Gambia 155 out of 177 countries in 2004 and 2005 (slipping from 151 in 2003) (UNDP, 2008). Life expectancy is just 56.6 years. Over half the population lives in urban areas and 44% is under 15 years of age. Under-five mortality rate is 103 per 1,000 live births compared to the world average 60 and The Gambia's ranking was 31 out of 194 countries (UNICEF, 2009). The most commonly reported diseases in The Gambia are malaria, diarrhoea and acute respiratory infections which together account approximately 60% of infant deaths (GoTG, 2007).

Economic development

The Gambia is a low-income country with a structural food deficit. GDP growth was 6.7% in 2009, but dropped to 5.4% in 2010 as global economics affected re-exports, tourism and remittances. The construction and banking sectors have been driving growth. External shocks including reduction in grant aid and trade revenues, rising oil and food prices as well as domestic and international debt, remain challenges. Inflation is expected to increase in 2011. Agriculture, the primary sector of the economy, is the source of livelihood for more than 75% of the population. It accounted for about 29% of GDP and about 70% of export earnings in 2009 (GoTG, 2010). Over 91% of the members of extremely poor households work in agriculture. In a participatory World Bank poverty assessment conducted in 1999-2002, the majority of rural dwellers that were identified as poor, cited low productivity, inadequate access to essential inputs for production, and poor marketing opportunities as major factors affecting their incomes. The results may be an over-estimate since the survey did not record multiple sources of income, which often are part of livelihood strategies in poor households. Nonetheless, meager household income derived from poor agricultural productivity is one of the root causes of rural poverty in The Gambia.

In 2008 and 2010, the National Nutrition Agency with support from CILSS conducted Food Vulnerability Studies in the urban areas of Banjul and Kanifing. In assessing the nutritional status of women 15-49 years using Body Mass Index (BMI) 8.4% had BMI < 18.5 kg/m² ie. under-nourished in 2008; however, in 2010, there was a significant decrease in the proportion of women considered to be under-nourished from 8.4% in VAMU 1 to 6.1% in VAMU 2 (p=0.0427).

Focus : Malnutrition and Food insecurity in Gambia

➤ Poor Infant Feeding Practices

- About half (52%) of all newborns do not receive breast milk within one hour of birth.
- 59% of infants under six months are not exclusively breastfed
- During the important transition period to a mix of breast milk and solids (6-9 months), over half of infants are not fed appropriately with both breast milk and other foods.

➤ High Disease Burden

- Compared to well-nourished children, under-nutrition increases the likelihood of falling sick, the severity of disease, and the risk of death from illness.

➤ Limited Access to Nutritious Food

- 9% of households are food insecure, i.e. lacking access to calories, and many more lack access to diverse diets year round

Source : <http://siteresources.worldbank.org/NUTRITION/Resources/281846-1271963823772/TheGambia41211web.pdf>

<i>Agro-nutrition indicators (continued)</i>		<i>Sources</i>
<i>Nutritional Anthropometry (2006 WHO Child Growth Standards)</i>		
Prevalence of stunting in children < 5 years of age	28 %	MICS 2005-09
Prevalence of wasting in children < 5 years of age	7 %	MICS 2005-09
Prevalence of underweight children < 5 years of age	16 %	MICS 2005-09
% Women (15-49 years) with a BMI < 18.5 kg/m ²	%	DHS 2007

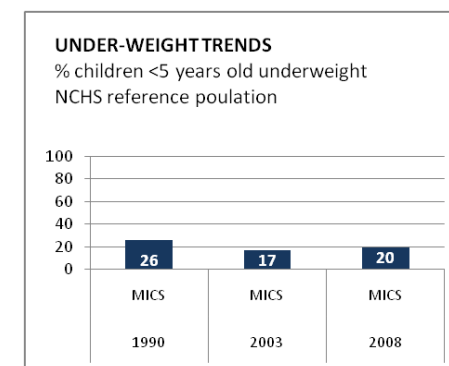
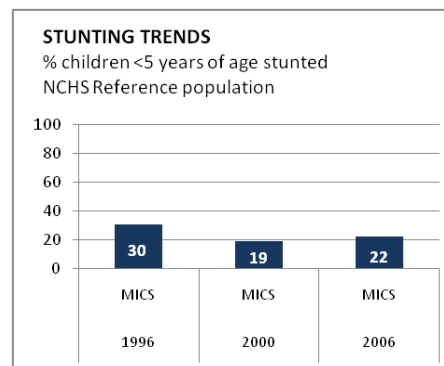
Food security (food availability, access, utilization, and coping mechanisms)

Agricultural production is limited and The Gambia depends heavily on imported food staples. Domestic food production covers only 50% of consumption requirements; the rest is filled by imports particularly of rice. Capacity for post-harvest food storage exists at strategic locations. These stocks were used to store food aid and emergency relief supplies in the early 80's. Most of these facilities have since deteriorated, although a few were repaired and used by Non-Governmental Organizations (NGOs) to store food for communities. At the community level, NGOs and Community-Based Organizations (CBOs) operate Village Cereal Banks. With increasing urbanization and most rural households being net food purchasers, access has become an important element in food security in The Gambia. The WFP Comprehensive Food Security & Vulnerability Assessment (CSFVA) 2011 found among communities surveyed that borrowing from neighbours, relatives, middle traders (bana banas) and even formal credit institutions are among the most common coping strategies relied upon when there is insufficient food. Access to credit is more constrained in urban areas. The primary sector has been characterized by subsistence production of food crops comprising cereals (early millet, late millet, maize, sorghum and rice); semi-intensive cash crop (groundnuts, cotton, sesame and horticulture) and traditional livestock production. Arable land area per farmer has steadily declined over the last 20 years, because the farming population has almost doubled since 1992, while the total area has remained unchanged. The same trend is seen in consumption patterns, particularly of meat and dairy products. Yields have remained the same, but there has been a major increase in imports to support the growing population (CILSS, 2008). The lean period (July to September) is especially difficult for rural producer households as stocks are lowest and prices highest. Consequently, households are prone to food insecurity with income or production losses exacerbated by natural calamities such as drought or floods. According to WFP's CSFVA (2011), one of the major constraints for the agriculture sector and groundnuts in particular, is the high rainfall dependency, which leads to variable production. Lack of farming inputs (e.g., tractors and heavy machineries), poor seed quality, limited processing and storage capacities which lead to large post harvest losses up to 15% of the total (NASS, 2004) and other structural bottlenecks in the value chain prevent increased commercialization of agricultural products and reduce households' income opportunities. The Gambian National Agricultural Investment Plan (GNAIP) aims to improve agricultural productivity. Land reform and infrastructure development will be keys to its success.

Agro-nutrition indicators (continued)		Sources
Infant feeding by age		
Children <6 months who are exclusively breastfed	41 %	MICS 2005-09
Children (6-9 months) who are fed complementary food timely	44 %	MICS 2005-09
Children (20-23 months) who are still breastfeeding	53 %	MICS 2005-09
Coverage rates for micronutrient supplements		
% Households consuming adequately iodized salt (≥ 15 ppm)	7 %	MICS 2005-09
Vitamin A supplementation (<5 years of age)	80.1 %	MICS 2005-09
Vitamin A supplementation coverage rate (≤ 2 months postpartum)	78 %	MICS 2005-09
Prevalence of anaemia among pre-school children	79 %	WHO 1999
Prevalence of anaemia among pregnant women	75 %	WHO 1999
Iron supplementation coverage among women		n/a

Nutritional status

In The Gambia, the prevalence of stunting among children <5 years of age was 28% in 2009 (UNICEF, 2011), higher than reported by the MICS in 2006 (22%). This is partially due to the adoption of new growth standards released by the WHO in 2006. If the numbers of MICS 3 in 2006 (based on the NCHS reference) are compared to those of MICS 2000, a 3% increase in stunting can be seen. This trend might account somewhat for the higher rate reported by UNICEF in 2011. Similarly, underweight among children <5 years of age decreased from 20% to 17% (MICS 2000 and 2006 based on NCHS). According to the new growth standards, the rate of underweight in this age group is 16%. There is a lack of current data on the anthropometry of Gambian adults. However, a 1996 nationwide study in Gambia documented an 8% rate of overweight and almost 5% obesity among adults, with 18% having a BMI <math><18.0 \text{ kg/m}^2</math>. A 2008 study of women in an urban area reported that 40% were overweight or obese. The trend of rising obesity seen in low-income countries appears to be occurring in The Gambia.



Indicator (source DHS 2007)	Gender			Residence			Wealth quintile					
	Male	Female	Ratio m/f	Urban	Rural	Ratio u/r	1 (poorest)	2	3	4	5 (richest)	Ratio richest to poorest
Stunting prevalence <5 y (WHO Child Growth Standards)	29	27	1.1	19	32	0.6	37	33	26	24	15	0.4
Under weight prevalence < 5 y (WHO Child Growth Standards)	16	15	1.1	11	18	0.6	21	17	16	12	10	0.5

Infant feeding

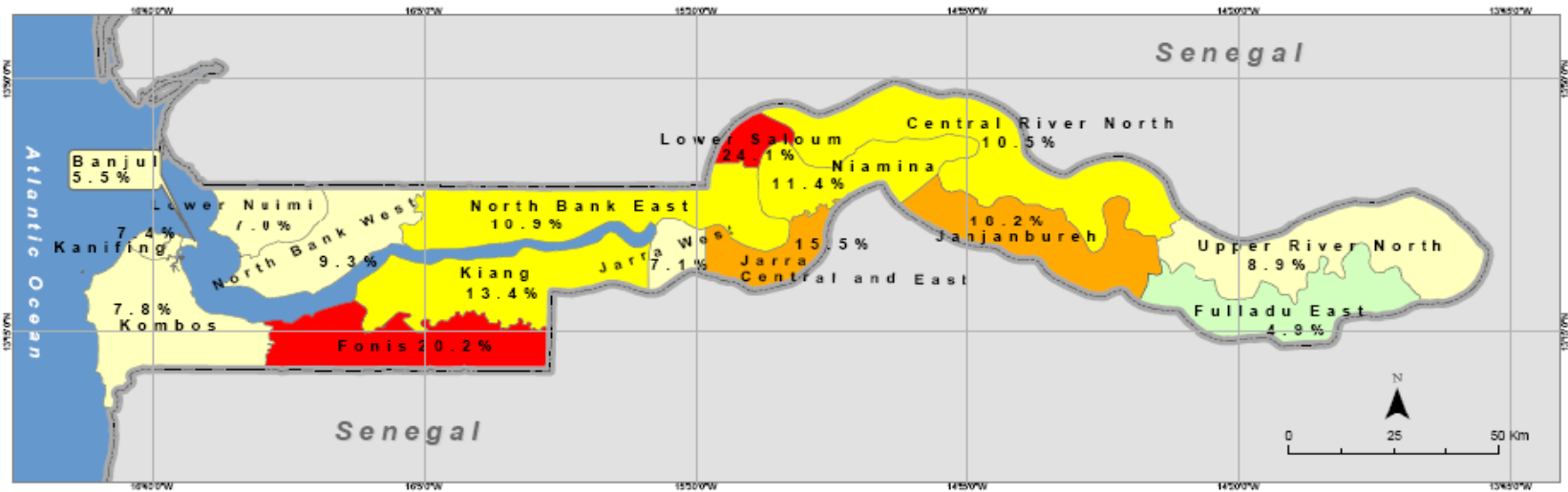
Infant feeding practices are not optimal. Only 48% of women initiate breastfeeding early, within the first hour of life and just 41% of infants under the age of 6 months are breastfed exclusively. There is a lack of data on the mean breastfeeding duration and breastfeeding rates per age. However, Less than half of the infants receive timely, appropriate complementary foods and 54% are still breastfed between 20 and 23 months (UNICEF, 2011). In 2006 the MICS 3 reported that overall only 40% of young children between 0-11 months were fed appropriately (i.e., infants <5 months received breastmilk only and children 6-11 received appropriate complementary foods in addition to breastmilk (UNICEF, 2007). Although the mean rate of exclusive breastfeeding is still low, overall progress in the mean rate of exclusive breastfeeding can be seen comparing rates from 2007 to 2011 released by UNICEF. Exclusive breastfeeding rates for children < 6 months of age increased by 18% (UNICEF 2007, 2011).

Micronutrients

During the postpartum period, about 78% of women received Vitamin A supplementation within 2 months of delivery (MICS 3, 2006) and 80.1 % of children received within the last 6 months of the reporting period (UNICEF, 2007). There is no current update of the Vitamin A supplementation by UNICEF. The adequate use of iodized salt varies greatly but remains low overall. While the coverage in some areas can be comparatively high (41%) the mean coverage is just 6.6%. Data updated in 2009 indicate no significant changes in the coverage rate. Information on iron supplementation is scarce. Based on estimates by the WHO from 2005, Vitamin A Deficiency was not considered a public health problem in The Gambia (WHO, 2008). With nearly 80% of The Gambia suffering from anaemia in 2005, it was considered a severe public health concern (WHO, 2009), however, the information is not conclusive, since micronutrient studies have not been conducted for over a decade.

Food Security Map: Proportion of food insecure or vulnerable population

Poverty Map: Proportion of poor population (proxy for stunting) *Source: <http://documents.wfp.org/stellent/groups/public/documents/ena/wfp235363.pdf>*

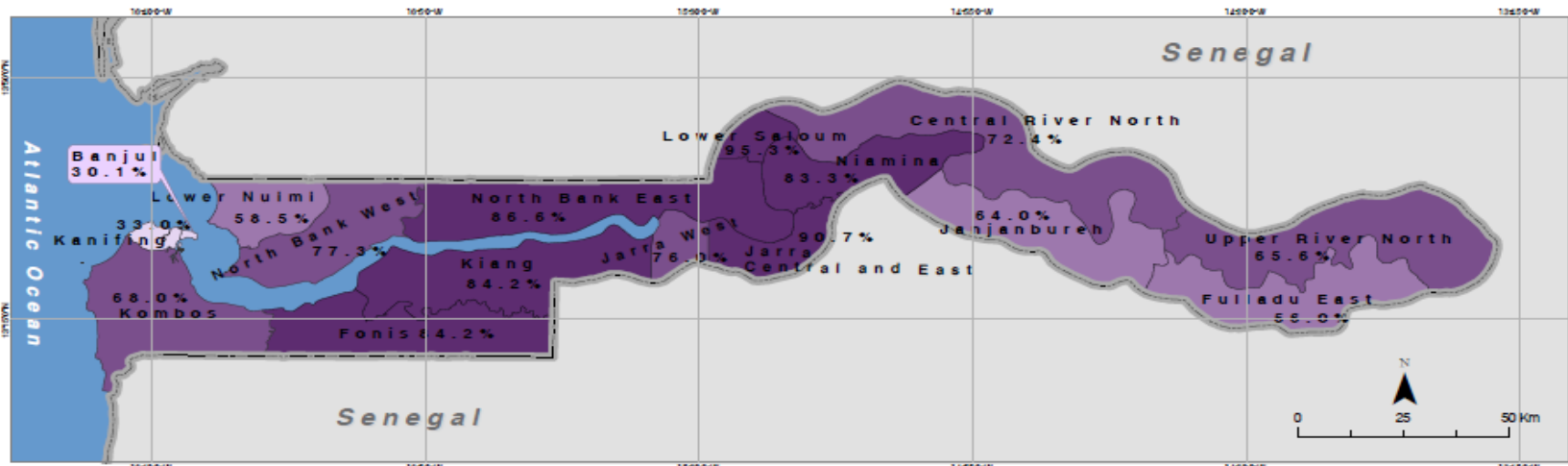
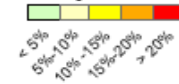


Map produced by WFP VAM ODD/The Gambia. The boundaries and names shown on this map do not imply official endorsement or acceptance by United Nations.



THE GAMBIA
Food insecure or vulnerable population
CFSVA 2011

Percentage of households



Map produced by WFP VAM Dakar/Banjul. The boundaries and names shown on this map do not imply official endorsement or acceptance by United Nations.



THE GAMBIA
Population within lowest and low wealth groups
CFSVA 2011

Percentage of households




II. Current nutrition policy framework and implementation mechanisms for improving food security and nutrition

Specific strategies and programs currently in place in the food and agriculture sector to improve nutrition

<i>Strategy / Program</i>	<i>Reference period</i>	<i>Objectives and main components</i>	<i>Budget*</i>	<i>Stakeholders</i>	<i>Key points (Impact, best practice, lessons learned,...)</i>	<i>Integration of Nutrition Components</i>
STRATEGIC FRAMEWORK:						
Vision 2020	1996-2020	<p>Vision 2020 seeks to transform The Gambia into a dynamic middle-income country, socially, economically and scientifically over a 25-year period. It provides a broad outline of policies achieve this objective. Six major activity areas relating to Agriculture, Industry, Trade, Tourism, Financial Services and Human Resource Development call for special attention so as to attain the given level of economic development.</p> <p>Vision 2020 Mission Statement & Objective: "To transform The Gambia into a financial center, a tourist paradise, a trading, export-oriented agricultural and manufacturing nation, thriving on free market policies and a vibrant private sector, sustained by a well-educated, trained, skilled, healthy, self-reliant and enterprising population and guaranteeing a well-balanced eco- system and a decent standard of living for one and all under a system of government based on the consent of the citizenry."</p>		The National Think Tank (NATT) in consultation with the Gambian population, private sector		
<p>Poverty Reduction Strategy II (PRSP)</p> <p>Programme for Accelerated Growth and Development (PAGE). PAGE is the successor to the PRSP</p>	2007 - 2011	<p>The PRSP II is a 5-year planning framework to assist The Gambia in its efforts to achieve the MDGs and the goals of the Vision 2020, the country's long-term development strategy. It includes interventions in the priority sectors health, education, agriculture, and water resources.</p> <p>Long-term goal: To eradicate poverty by significantly increasing national income through sustained economic growth and reduce income and non-income inequalities.</p> <p>The PRSP II focuses on five pillars or areas of intervention: 1-Create an Enabling Policy Environment to promote Growth and Poverty Reduction; 2-Enhance the capacity and output of productive sectors: 3-Agriculture, Fisheries, Industry, Trade and Tourism, with emphasis on productive capacities of the poor and vulnerable populations; 4-Improve coverage</p>		Government of The Gambia with the World Bank and the International Monetary Fund (IMF)		Nutrition integrated into the PRSP and PAGE

		of the basic social services and social protection needs of the Poor and Vulnerable; 5-Enhance governance systems and build the capacity of local communities and Civil Society Organizations (CSOs) to play an active role in economic growth and poverty reduction; 6-Mainstreaming poverty related cross-cutting issues into poverty reduction.				
National Medium-Term Investment Programme (NMTIP)	2007-2011	<p>The NMTIP has proposed two Bankable Investment Profiles (BIPs), with both proposed to be implemented in two phases: 1-Natural Resources and Environmental Management Project (NRMP); 2-The National Program for Food Security (NPFS)</p> <p>Both BIPs have irrigation components including water harvesting. There are 7 recent projects, 8 on-going and 2 in the pipeline funded by 8 different donors</p>	Total from NMTIP: US\$ 20,18 million: NRMP (1): US\$ 7.6 million NPFS (2): US\$ 12,6 million			

AGRICULTURE

<p>The Gambia National Agricultural Investment Programme (GNAIP)</p> <p>Part of the ECOWAS Regional Agricultural Investment Programme (RAIP)</p> 		<p>Overall objective of the GNAIP: To increase productivity through commercialization and active private sector participation consistent with the national macroeconomic framework to enhance growth and reduce poverty. The GNAIP focuses on 5 key programs: 1-Improvement of water management; 2- Improved management of other shared resources; 3- Development of agricultural chains and market promotion; 4-Prevention and management of food crises and other natural disasters; 5-Sustainable farm management; and 6- Institutional capacity building for program implementation.</p> <p>Nutrition-Related Objectives: 1-To enhance the transformation of agriculture from traditional subsistence to commercial production through the use of appropriate technologies for value addition, leading to diversification of the population’s dietary intake among other outcomes. 2-To adopt quick responses to food crisis and other forms of disaster- related crisis in order to reduce their negative impact on affected populations and communities. A key focus area of this objective is social protection for vulnerable groups. Investment Areas Related to Nutrition: -Develop assessment tools that will identify deficit and vulnerable groups as well as surplus areas.</p>	Total: US\$ 261.8 million	GOTG and its two CAADP implementing ministries, the Department of State for Agriculture (DOSA), and the Department of State for Trade, Industry, and Employment (DOSTIE), spearhead the process; private sector investors and partners; agribusiness.	<p>Suggestions for Improvement: -Increase the variety of crops promoted to increase dietary diversity. -Identify and implement additional nutrition interventions to address the food and nutrition needs of vulnerable groups, based on the results of the food and nutrition needs assessment. -Specify in the GNAIP how vulnerable people will be targeted so that their food and nutrition situation benefits from increased food production and improved marketing. -Establish mechanisms</p>	
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		<ul style="list-style-type: none"> -Conduct food and nutrition needs assessments for vulnerable groups. -Provide food-for-work programs for vulnerable groups. -Establish and manage cereal banks. -Establish revolving capital for purchase of food stocks for cereal and seed banks. -Develop appropriate recipes for households and sensitization to increase consumption of local cereals. 			<p>for collaboration between the Ministry of Agriculture and NaNA in addressing the food and nutrition needs of vulnerable populations.</p> <ul style="list-style-type: none"> -Integrate a monitoring and evaluation system to assess effectiveness of efforts to improve the food and nutrition situation of vulnerable populations. 	
Agriculture and Natural Resources Policy (ANRP)	2006–2015	<p>The ANRP is a agriculture and natural resource (ANR) policy formulated to be funded through the accompanying NMTIP investment plan.</p> <p>Short-term vision of a strengthened sector supported with at least 10% of national budgetary allocations (excluding debt servicing), attaining sustainable increased levels of self-sufficiency in food production, by at least 25% of present levels, as well as increased incomes of smallholders, and increased food security at household level.</p> <p>The ANRP has four strategic objectives: (i) improved and sustainable measurable levels of food and nutrition security in the country in general and vulnerable populations in particular; (ii) a commercialized ANRP sector, ensuring measurable competitive, efficient, and sustainable food and agricultural value chains, and linkages to markets, (iii) strengthened institutions (public and private) in the sector to provide needed services, create a strong and enabling environment, and reduce vulnerability with respect to food and nutrition security; and (iv) sustainable and effective management of the natural resource base of the sector. Output targets for a number of crops such as rice have been set.</p>	US\$ 20,18 (see NMTIP)	CAADP implementing ministries: the Department of State for Agriculture (DOSA), and the Department of State for Trade, Industry, and Employment (DOSTIE)	<p>Targets include sustainable rice production increased by at least 25% of present levels; sustainable artisanal fisheries production increased to over 90% of the catch/production process by indigenous small holders mechanized in the next 5–10 years and unregulated exploitation of fish in territorial waters of the country reduced by at least 50%; and a well developed forest land area covering at least 30%.</p>	
“Back to the Land” and “Feed the Nation” “Move to Food Security”	1999 - 2005	The Government provided over 100 tractors for hire during land preparation activities		GoG		

FOOD SECURITY						
National Programme for Food Security (NPFS)						
Food Crisis Prevention and Management Network in the Sahel and West Africa, the SWAC		There is a significant convergence on the need for a greater commitment to address long term structural solutions to food insecurity. It proposes to develop this initiative aiming to provide “Country Profiles on Food Security” for the Sahel and West Africa. This initiative will provide a set of analytical indicators allowing a better understanding of the causes of food crisis.		Network of Peasant Organizations and Producers in West Africa – ROPPA and ECOWAS		
Village Cereal Banks and Seed Stores		600-800 seeds stores exist in the country built by GOTG and NGOs. There are 10-15 operational cereal banks, well-constructed stores that serve as a social mechanism which allows farmers to store, sell cereals to the store when they need cash, and to buy back those cereals at a reasonable price when they need grain.		NGOs such as Action Aid, FFHC, GARDA, ADWAC and AFET; and Community-Based Organizations (CBOs)		
NUTRITION						
National Nutrition Policy (First Policy 2000-2004)	2010-2020	Comprehensive and cross-cutting policy		Health, Agriculture and Education		
National Nutrition Policy Strategic Plan	2011-2015	Strategic Plan with strategies and activities to be carried out to achieve the Policy objectives				
Business Plan for Better Nutrition	2011-2015	Business Plan has strategies and costs for tackling malnutrition				
The National Nutrition Agency (NaNA) (Under the Office of the Vice President)	2000-ongoing	<p>NaNA was established in 2000 and became a legal entity by an Act of the National Assembly in 2005. NaNA is responsible for overseeing and coordinating the implementation of the National Nutrition Policy (2010-2020).</p> <p>NaNA’s mandate: coordinating all nutrition and nutrition related activities in the country including IBFAN activities in the country. IBFAN is a pro-advocacy network of professionals, institutions, organizations and individuals that advocate for the protection, promotion and support of optimal Infant and Young Child Feeding (IYCF) practices. Reports to National Assembly on nutrition programs and strategy. Aim: To keep the NAMs abreast of nutrition programs in The Gambia including IYCF and IBFAN issues.</p> <p>Program Interventions: Salt iodization; Vit. A supplementation; Baby friendly hospital initiative; Baby</p>	Mainly funded by GOTG and UNICEF	National Assembly Members; IBFAN & IYCF stakeholders		

		friendly community initiative; and, Integrated anemia pilot program.				
Gambia Rapid Response Nutrition Security Improvement Project	2010-1012	Nutrition project aims to promote healthy behaviours for maternal nutrition and child growth; and improve access to selected therapeutic and preventive public health nutrition services to vulnerable populations including children under-five and pregnant and lactating women in poor rural areas (with World Bank support).	World Bank: US\$ 3 million	NaNA, Ministry of Health, Communities, UNICEF, WHO, FAO, WFP		
Baby Friendly Community Initiative (BFCI) villages		The Baby Friendly Community Initiative (BFCI) is a comprehensive health and nutrition package modelled on the BFHI. It involves the active participation of local communities and health authorities in concert to improve the health and nutritional status of children.		Village BFCI Committees	85% of women in BFCI villages vs. 45.6% in other villages practice Exclusive Breastfeeding for 6mo.	
Various GoTG Initiatives: (Through the Food Act, 2005 the Breastfeeding Promotion and Food Fortification and Salt Iodization Regulations 2006, Food safety and Quality Act, 2011.		Initiatives to promote improved nutrition include: Exclusive Breast Feeding, Vitamin A Supplementation Programme, The iron folic supplementation and the programme to promote the consumption of iodide salt at household level These programmes have components covering sensitization and outreach program using various mass media to enhance understanding and adoption	UNICEF: US\$ 95;million for IYCF	NaNA, World Bank, UNICEF, Communities, Ministry of Health		
HEALTH & SOCIAL PROTECTION						
Health Policy Framework "Health is Wealth"	2007-2020	Vision: Healthy Gambia population with per capita income of US\$750 by 2020. Mission: Promote and protect the health of the population. Objective related to Nutrition: To attain the basic nutritional requirements of the Gambian population. Strategies: Strategies: 1-Advocate for increased food production and consumption of required foods; 2-Establish mechanism for providing appropriate nutritional information for the population; 3-Develop food standards and guidelines for processing, preservation, storage, food hygiene safety and sanitation; 4-Strengthen and expand proven nutrition interventions to ensure national coverage				

*Separate and identify budget committed to nutrition when information is available

Institutional execution framework linked to food security and nutrition

Main entities for food security and nutrition execution polices

While no specific or structured organization has been established for food crisis prevention and management, the following mechanisms exist:

The Department of Trade, Industry and Employment (DOSTIE): continuously monitors the stock level of essential food items and encourages the private sector to stock up for commercial purposes;

The Department of Planning, under the Department of State for Agriculture: undertakes weekly cereal price collections at in both regular and weekly markets. This is currently disseminated in its annual publications (The National Agricultural Sample Survey). This provides a good means of monitoring price fluctuations in the market.

The Multidisciplinary Working Group (MWG): Established in the early 1980's initiated by AGRYHYMET of CILSS and coordinated by the Department of Water Resources. Other members comprise the Department of Planning of Agriculture, The Agricultural Pest Management Unit (APMU), Department of Livestock Services, Department of Agricultural Services and the National Environment Agency (NEA). The MWG monitors the agricultural season from May to October through joint tracking and the publication of a decadal bulletin covering climatic, crop performance, and fodder and commodity prices.

The Nutrition Surveillance Programme (NSP): on-going since 1985 and now under NaNA covering the under 5 year old children at the Primary Health Care Centres. Conducted twice yearly (rainy and dry seasons)

The Gambia Food Security Working Group (FSWG): There is interest in reactivating the FSWG, in order to address food security issues and reinforce its leading role on issues such as early warning systems, disaster mitigation, emergency preparedness, and food security monitoring systems (FSMS). WFP liaises with the Government and development partners with an aim to reactivating the FSWG.

The National Disaster Management Secretariat (NDMS), under the Office of the Vice President: supported by the UNDP. Has recently been established to enable rapid response to national and localized emergencies/disasters. At national level, the National Disaster Management Committee (NDMC) is chaired by the Vice president while the regional committees are chaired by Governors. All provide information on the food situation, which could contribute to an effective early warning mechanism. Most of the institutions mentioned encounter budgetary constraints, which results in inconsistent, less accurate and less timely data. Data less timely or inaccurate.

The CILSS, FAO, WFP Annual Crop Assessment missions: conducted in September-October of every year to review the crop and fodder situation. These are

subsequently reviewed at the regional level to map out strategies for interventions.

The World Food Programme (WFP): WFP's activities in The Gambia support the development priorities of the Government's Poverty Reduction Strategy Programme. WFP acts as a key advisor to the Government and development agencies on food security issues. In this role, WFP supports the establishment of strong partnerships and institutional capacity-building as a means to improve targeting and response mechanisms for assisting vulnerable populations affected by the food and financial crises. **WFP** is currently implementing a Vulnerability Analysis and Mapping (VAM) strategy that aims to enhance sectorial coordination, build institutional capacities and support efforts to set up a comprehensive FSMS to incorporate household-level food security information. This VAM strategy is essential, as proper identification of the most vulnerable populations helps WFP tailor its assistance to those who need it most and this should assist the GOTG do the same. In January 2011, **WFP** conducted the Comprehensive Food Security and Vulnerability Analysis (CFSVA), the first nationwide survey of its kind in The Gambia, involving Government, UN, NGOs and community representatives. The CFSVA identifies the most vulnerable populations and illuminates the underlying and immediate causes of food insecurity. Identified areas and groups (or individuals) are then targeted for relief assistance. The results will serve as a baseline for the FSMS to follow up the evolution of food security and vulnerability at household and community levels amongst the urban and rural poor in the future. Plans are also underway to set up a market information system that tracks price volatility of staple food commodities, exchange rate fluctuations and cross-border trade flows that influence household's access to food.

Adherence to global / regional initiatives linked to nutrition

- Domesticated the International Code of Marketing of Breastmilk Substitutes (Breastfeeding Regulation, 2006)
- Implementing the ECOWAS Nutrition Forum recommendations
- Implementing the Global Strategy on Optimal Infant and Young feeding Practices
- BFHI
- Universal salt iodization
- Vitamin A supplementation Programme
- Essential Nutrition Package

Main information systems linked with food security and nutrition

- Twice yearly Nutrition Surveillance
- Household surveys
- HMIS
- Urban assessment of household Food Vulnerability (VAMU)

III. Analysis of current and future country nutrition actions (Focus on CAADP Investment Plan)

Institutional framework and funding

-/-

Consideration of nutritional goals into programs / activities related to agriculture and food and main population groups targeted (focus on the agricultural sectors to develop, if possible)

-/-

Main technical and financial partners (TFP) and coordination mechanisms

A number of donor partners cooperate with Government in the area of food security through a variety of interventions. Key donors comprise the AfDB, IFAD, FAO, The-European Union, IDB, KFAED, UNDP, IDA, WFP and bilateral cooperation with the Republic of China (Taiwan). Although many donors and interventions are involved, support has generally been small-scale in nature and of short duration. These conditions have made sustainability of gains difficult to achieve and seem to perpetuate the cycle of poverty and food insecurity. Furthermore, coordination of interventions is uncommon, resulting in duplication of efforts and lack of efficiency. The Government has recently established an Aid Coordination Office in the Department of State for Finance and Economic Affairs to resolve this. It is estimated that about 80 local and international NGOs are active in the Gambia. Key NGOs involved in the area of food security include: Action Aid International The Gambia (AAITG), Catholic Relief Services (CRS), Concern Universal (CU), Methodist Mission Agriculture Programme (MMAP), Gambia Food and Nutrition Association (GAFNA), Freedom From Hunger Campaign (FFHC), National Women Farmers Association (NAWFA), Agency for Development of Women and Children (ADWAC). These and some 70 other smaller NGOs, due to their grass roots nature, have made gains in promoting horticultural production and marketing among women, rural finance intermediation, group management, food safety net programmes for vulnerable groups, soil and land conservation, promoting skills, off-farm income generating activities and environmental management. The registered NGOs have formed an association (TANGO) to better co-ordinate their activities and to liaise and coordinate with the Government programs. As a collective body under TANGO, there are increasing possibilities to influence government decisions and policies.

- **AU/NEPAD**- The African Union/New Partnership for African Development created the CAADP initiative to accelerate economic growth and development of African countries. CAADP is an agriculture-led economic growth and development scheme which seeks to eliminate hunger, diminish food and nutrition insecurity, reduce poverty, and facilitate the expansion of exports. As a program of the African Union, it emanates from and is fully owned and led by African Governments.

- **WHO**- Provides technical support for policy and implementation plan development, growth monitoring manuals-trainers and participants, as well as for the adoption process of NGS and training of health staff of the NGS. Financially, WHO provides support for computer training of staff to improve surveillance, training of trainers on NGS, and training for District staff on NGS. Additionally, WHO provides logistical support for vehicles, screening tools, office equipment, computers and accessories.
- **UNICEF**- Provides technical support in the development of the treatment protocol of SAM; IYCF guidelines development; and, National Nutrition Policy development. Financially, UNICEF supports holding drafting meetings, procurement of all drugs and food supplies in the treatment of SAM, and training of district staff in CMAM.
- **WFP**- Provides supplementary feeding of malnourished children, pregnant and lactating mothers, and people living with HIV/AIDS.
- **The World Bank**-Provides financial support for NaNA and institutional strengthening related to community maternal and child nutrition programming and monitoring and evaluation.
- **FAO**- Preparation of nutrition education materials for Lower Basic Schools
- **USAID**
- **PROFILES**- with support from the World Bank, The Gambia has just developed PROFILES, a Nutrition advocacy tool designed to demonstrate the contribution that improved nutrition can make to human and economic development of a given country.

CAADP : National Nutrition Agency, Ministry of Agriculture, Ministry of Basic and Secondary Education, Ministry of Health, Ministry of Trade, FAO and NGOs will collaborate in implementing nutrition activities identified in the NAFSIP.

Moreover, the following structures are in place to facilitate coordination and communication:

National level:

- The National Nutrition Council comprising Ministers and chaired by the Vice President
- The Nutrition Technical Advisory Committee

Regional level: Regional Technical Advisory Committee

Ward Level: Multi-Disciplinary Facilitation Teams

Village level:

- Village Development Committee
- The Village Support Groups

Monitoring and evaluation mechanisms

The assessment of the evolution of poverty in The Gambia was not adequately tackled in the past. However, the 2003/04 Integrated Household Survey has addressed the problem by standardizing the 1992 and 1998 datasets in terms of methodological differences. A number of structures exist that monitor and report on the food situation in the Gambia; these are however institutionally based. What is

needed is to coordinate these efforts and ensure sharing timely information that could provide early warning for rapid response. The World Bank project will support Monitoring and Evaluation (M&E) strengthening. The M&E system will include the use of community monitoring, Knowledge-Coverage-Practice (KPC) surveys, the health and nutrition information systems, and the Lot Quality Assurance Sampling (LQAS) on the basis of which supervision and support is provided to the VSGs. The community integrated anemia control component will also measure hemoglobin levels through sample surveys to monitor and evaluate the outcome of the activities. The importance of surveys and data gathering is also evident from the Results Framework . This component will finance the hiring of an M&E specialist to oversee the M&E activities. This person will continue with NaNA on the national budget after the project closes.

CAADP : An M&E mechanism is mentioned in the GNAIP but the indicators are not specified. However, NaNA has developed a comprehensive M&E framework and tools that can be used to monitor nutrition activities in the GNAIP.

Capacity for data collection and analysis exist in the country but this need strengthening as capacity gaps do exist both in terms of human resources and equipment.

Managerial and technical capacities at the institutional level

Generally managerial and technical capacities are constrained by lack of funding and by inadequately trained staff in the nutrition sector. ***Capacity Strengthening for Program Management and Surveillance component of World Bank funded Gambia Rapid Response Nutrition Security Improvement Project (US\$0.9m)***: focuses on capacity strengthening of NaNA to respond to unpredictable, external crises and preempt downturns in specific health and nutrition indicators. This will complement a recently launched Non-Lending Technical Assistance Project (P120632) on strengthening the institutional, organizational and operational capacity for the implementation of the National Nutrition Policy. Institutional strengthening will involve training and expansion of capabilities such as financial management and monitoring and evaluation, and improvements of the M&E system of the project. Communities will be strengthened in their operational capacity to implement nutrition activities in addition to supply and receive feedback on project monitoring data. This cycle is anticipated to generate interest of the communities to sustain the activities beyond the project period. This component will support activities such as: the conduct of a national nutrition survey; strengthening of the national surveillance system; development of a nutrition-relevant data bank for real-time representative data; improved communication between the regional and central levels; enhanced web based information; and training in and application of nutrition advocacy tools

Focus on public / private partnerships

Sustainability of actions

Assessing short-term responses to transitory food insecurity is only a part of the solution. There is a significant convergence on the need for a greater commitment to address long-term structural solutions to food insecurity. ECOWAS and other regional actors propose to develop this initiative aiming to provide “Country Profiles on Food Security” for the Sahel and West Africa. This initiative will provide a set of analytical indicators allowing a better understanding of the causes of food crisis. It will also be used to inform and support decision makers to take them into account when defining policies and investment strategies for sustainable food security.

One special feature of the NGO-led programmes is that these are fully demand driven with a high level of community ownership.

Definitions

Acute hunger	Acute hunger is when the lack of food is short term, and is often caused when shocks such as drought or war affect vulnerable populations.	Multi-stakeholder approaches	Working together, stakeholders can draw upon their comparative advantages, catalyze effective country-led actions and harmonize collective support for national efforts to reduce hunger and under-nutrition. Stakeholders come from national authorities, donor agencies, the UN system including the World Bank, civil society and NGOs, the private sector, and research institutions.
Chronic hunger	Chronic hunger is a constant or recurrent lack of food and results in underweight and stunted children, and high infant mortality. “Hidden hunger” is a lack of essential micronutrients in diets.	Nutritional Security	Achieved when secure access to an appropriately nutritious diet is coupled with a sanitary environment, adequate health services and care, to ensure a healthy and active life for all household members.
Direct nutrition interventions and nutrition-sensitive strategies	Pursuing multi-sectoral strategies that combine direct nutrition interventions and nutrition-sensitive strategies. Direct interventions include those which empower households (especially women) for nutritional security, improve year-round access to nutritious diets, and contribute to improved nutritional status of those most at risk (women, young children, disabled people, and those who are chronically ill).	Severe Acute Malnutrition (SAM)	A weight-for-height measurement of 70% or less below the median, or three standard deviations (3 SD) or more below the mean international reference values, the presence of bilateral pitting edema, or a mid-upper arm circumference of less than 115 mm in children 6-60 months old.
Food Diversification	Maximize the number of foods or food groups consumed by an individual, especially above and beyond starchy grains and cereals, considered to be staple foods typically found in the diet. The more diverse the diet, the greater the likelihood of consuming both macro and micronutrients in the diet. <i>Source : FAO</i>	Stunting (Chronic malnutrition)	Reflects shortness-for-age; an indicator of chronic malnutrition and it is calculated by comparing the height-for-age of a child with a reference population of well-nourished and healthy children.
Food security	When all people, at all times, have physical, social and economic access to sufficient, safe and nutritious food that meets their dietary needs and food preferences for an active and healthy life.	Underweight	Measured by comparing the weight-for-age of a child with a reference population of well-nourished and healthy children.
Hunger	Hunger is often used to refer in general terms to MDG1 and food insecurity. Hunger is the body’s way of signaling that it is running short of food and needs to eat something. Hunger can lead to malnutrition.	Wasting	Reflects a recent and severe process that has led to substantial weight loss, usually associated with starvation and/or disease. Wasting is calculated by comparing weight-for-height of a child with a reference population of well-nourished and healthy children. Often used to assess the severity of emergencies because it is strongly related to mortality. <i>Source : SUN Progress report 2011</i>
Iron deficiency anemia	A condition in which the blood lacks adequate healthy red blood cells that carry oxygen to the body’s tissues. Without iron, the body can’t produce enough hemoglobin, found in red blood cells, to carry oxygen. It has negative effects on work capacity and motor and mental development. In newborns and pregnant women it might cause low birth weight and preterm deliveries.		
Malnutrition	An abnormal physiological condition caused by inadequate, excessive, or imbalanced absorption of macronutrients (carbohydrates, protein, fats) water, and micronutrients.		
Millennium Development Goal 1 (MDG 1)	Eradicate extreme poverty and hunger, which has two associated indicators: 1) Prevalence of underweight among children under five years of age, which measures under-nutrition at an individual level; and, 2-Proportion of the population below a minimum level of dietary energy consumption, that measures hunger and food security, and it is measured only at a national level (not an individual level) . <i>Source : SUN Progress report 2011</i>		

Acronyms

ASARECA	Association for Strengthening Agricultural Research in Eastern and Central Africa
AUC	African Union Commission
BMI	Body Mass Index
CAADP	Comprehensive Africa Agriculture Development Program
CILSS	West Africa Regional Food Security Network
CIP	Country Investment Plan
COMESA	Common Market for Eastern and Southern Africa
CORAF	Conference of African and French Leaders of Agricultural Research Institutes
DHS	Demographic and Health Survey
EAC	East African Community
ECOWAS	Economic Community of West African States
FAFS	Framework for African Food Security
FAO	Food and Agriculture Organization
IFAD	International Fund for Agricultural Development
IFPRI	International Food Policy Research Institute

JAG	Joint Action Group
MICS	Multiple Indicator Cluster Survey
NAFSIP	National Agriculture and Food Security Investment Planning
NCD	Non-communicable Disease
NCHS	National Center for Health Statistics, Centers for Disease Control & Prevention
NEPAD	New Partnership for Africa's Development
NPCA	National Planning and Coordinating Agency
PRS	Poverty Reduction Strategy
REACH	Renewed Efforts Against Child Hunger
REC	Regional Economic Community
SGD	Strategic Guidelines Development
SUN	Scaling-Up Nutrition
UNDP	United Nations Development Program
UNICEF	United Nations International Children's Emergency Fund
USAID	United States Agency for International Development
WFP	World Food Program
WHO	World Health Organization