



Agenda Item 5

CX/AFRICA 13/20/8

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

20th session

Yaoundé, Cameroon, 29 January – 1 February 2013

NUTRITIONAL ISSUES AT NATIONAL OR REGIONAL LEVEL

Comments received in reply to CL 2012/26-AFRICA: Central African Republic, Mauritius and Zimbabwe

Central African Republic

1. Please describe any developments since the 19th Session of the Committee regarding issues related to nutrition, such as: obesity, overweight, underweight, micronutrient deficiencies and any public health-oriented actions undertaken, including nutrition education and the use of nutritional labelling and claims, and implementation of the WHO *Global Strategy on Diet, Physical Activity and Health*.

In collaboration with FAO, the Ministry of Health and Agriculture has undertaken many activities relating to nutrition and the *Global Strategy on Diet*.

The National Codex Committee is not yet being asked to support these various events, which are clearly in line with its mission.

2a. Please describe current priority nutrition issues to be addressed nationally and regionally

The main issues relating to nutrition that are of concern at the national level are: nutritional deficiency, malnutrition and underweight.

2b. Please describe current priority areas for capacity-building (ongoing and for future)

Capacity-building for nutritionists, nutritional awareness workers, community leaders and media professionals.

2c. Please describe what additional support through capacity building is required

Support for the Central African Republic National Codex Committee, agricultural groups, small-farmer and herder associations, and industrial groupings, not forgetting consumers' associations.

MAURITIUS

1. Please describe any developments since the 19th Session of the Committee regarding issues related to nutrition, such as: obesity, overweight, underweight, micronutrient deficiencies and any public health-oriented actions undertaken, including nutrition education and the use of nutritional labeling and claims, and implementation of the WHO *Global Strategy of Diet, Physical Activity and Health*.

1. The Mauritius Nutrition Survey 2012 has been carried out for the following age groups:

- a) Children aged 5-11 years
- b) Adolescents aged 12-19 years
- c) Young adults aged 20-49 years
- d) Older adults aged 50-64 years

The aim of the survey was to study food consumption patterns and assess the nutritional status of the population with a view to addressing the problem of non-communicable diseases in the country. The results will be out by 2013. A similar survey was carried out in 2004 and since then several actions have been taken.

2. A National Plan of Action for Nutrition 2009-2010 was formulated and has been implemented. Some of the interventions that have been implemented are:

- Banning of soft drinks in school canteens.
- Legislation on the sale of snacks in school canteens.
- Study into the re-use of cooking oils in the Republic of Mauritius.
- Health weight for all – A campaign on weight management for adults.

There are ongoing Nutrition Education activities at all levels making use of different mass media.

A Mauritius Salt Intake Study was carried out in 2012 so as to find the dietary sodium intake of the Mauritian population. This was followed by a study on the salt content of the following:

- a) Bread
- b) Fancy bread
- c) Snacks
- d) noodles

Meeting will be convened with producers of the above products in 2012 so as to reformulate them. This will be done on a voluntary basis. A surveillance will be carried out for the levels of sodium, further which legislation may be passed.

Forthcoming activities are formulation and implementation of the following:

- a National Plan of Action for Nutrition 2013-2017
- Population salt reduction strategies
- Population-based prevention of childhood obesity.

ZIMBABWE

1. Please describe any developments since the 19th Session of the Committee regarding issues related to nutrition, such as: obesity, overweight, underweight, micronutrient deficiencies and any public health-oriented actions undertaken, including nutrition education and the use of nutritional labeling and claims, and implementation of the WHO *Global Strategy of Diet, Physical Activity and Health*.

Zimbabwe carries out micronutrient survey in the population every two years whenever funds are available.

The demographic health survey is also carried out every two years to establish health indicators for the nation. The DHS establishes status of all infectious diseases as well as Non-communicable diseases. This enables the country to map out strategies to tackle the diseases.

Current priority areas

The country currently prioritises micronutrient deficiencies especially, iron, vitamins, folic acid and iodine. There is need to build capacity to establish a mechanism for data collection for the purpose of national food consumption patterns. The laboratories have to be capacitated so that they can carry out tests to give national indigenous food composition patterns.