

PROGRAM BRIEF

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How Important is Good Nutrition in Ghana?

Background

Available evidence indicates that poor nutrition leads to loss of lives and poverty. An analysis carried out for Ghana by the USAID FANTA project indicates that in the 2011 to 2020 period “more than 30,000 children’s lives could be saved by reducing the prevalence of underweight, more than 25,000 children’s lives could be saved by reducing vitamin A deficiency, and more than 4,500 mothers’ lives could be saved by decreasing maternal anaemia”. Using the analysis done under the Cost of Hunger Studies for Ghana, we estimate that Ghana’s GDP for 2019 and 2020 alone could be higher by 5.7% if malnutrition was effectively addressed to achieve a 50% reduction of the 2012 levels by 2025. Based on Ghana’s poverty-growth elasticity and the IMF’s projected growth rate for GDP in 2020, the number of poor people in Ghana will increase to 7 million by 2020 using the national poverty line. If malnutrition had been addressed, the 5.7% of GDP saved from being lost would have kept about 200,000 Ghanaians from being poor with the projected number of poor people being about 6.8 million. Thus malnutrition will keep 200,000 in poverty by the end of 2020¹.

Immediate action is needed to tackle malnutrition as the incidence is still notable at present. About 1 in every five children under 5 years suffers from stunting and about 1 in every 10 children suffers from underweight and wasting. Also, 1 in 5 children under 5 suffers from Vitamin A and Iron deficiency, about 2 in 5 children under 5 suffer from Anaemia and about 1 out of every 2 pregnant women suffers from Anaemia. Furthermore, about 9 out of 10 children from 6 to 23 months old do not meet the minimum acceptable diet². Overall, according to FAO, one out of every two people in Ghana is moderately or severely food insecure in the sense that they face difficulties in regularly obtaining food of sufficient quality and quantity. These levels of malnutrition lead to loss of lives, illnesses and the avoidable healthcare costs, reduced IQ for stunted children, avoidable school class repetitions due to inability to cope and the associated avoidable additional education costs, lower physical power for manual labour by malnourished people and lower labour supply due to children that die from malnutrition based causes. Thus, productivity and income as well as death rates are affected by malnutrition. Urgent attention is needed now to address malnutrition.

What Can Be Done Presently?

Two levels of intervention are needed: policy level interventions and program level interventions. At the policy level, there is a need to clarify and strengthen coordination roles between the MDAs, improve the effectiveness of the inter-ministerial committee on nutrition, establish coordination teams at regional and district levels, improve the M&E for the nutrition sector to encourage rapid implementation and feedback, improve the capacity of the civil society, parliament and the business community to play active roles in the implementation of the nutrition policy and improve funding for the preceding and other activities in the nutrition sector. At the program level, improved funding is needed for scaling up proven successful interventions in the health, agriculture, education and other key sectors that have a strong bearing on nutrition outcomes. Examples of these interventions are indicated in the boxes below.

¹ This relates to the loss for 2020 alone and not the cumulative loss from 2012 to 2020 which is expected to be higher and therefore have larger impacts.

² The malnutrition rates here are from the Ghana Multiple Indicator Cluster Survey 2017/2018 and the Ghana Micronutrient Survey 2017

Box 1: Successful and Necessary Interventions for Improving Nutrition in Ghana

Proven and effective health/food solutions

- Promotion of optimal breastfeeding
- Promotion of appropriate complementary feeding
- Interventions to improve hygienic practices
- Vitamin A supplementation
- De-worming
- Iron-folate supplements for pregnant and lactating women
- Salt iodization
- Fortification of staple food, such as flour and oil
- Multiple micronutrient powder
- Prevention of chronic undernutrition
- Treatment of severe acute malnutrition with special foods, such as ready-to-use therapeutic food

Proven interventions under agriculture

- Promote women's access to and control over productive resources such as capital, and farming inputs.
- Promote consumption of diversified diets to ensure nutrition security.
- Promote use of labour-saving technologies to enable women to manage caring, reproductive, and productive roles.
- Promote increased food production and utilization.
- Promote diversified farming alongside behavior change communication
- Promote small irrigation schemes to support year-round production, especially vegetables and fruits.
- Promote agro-processing, preservation, storage, distribution of food, and marketing (especially small scale).
- Promote food safety along the agricultural value chain.
- Promote agribusinesses to increase income.
- Expand extension coverage targeting women.
- Promote nutrition-sensitive agriculture and food-based approaches.
- Intensify nutrition and health behavior change strategies in agricultural interventions.

Necessary interventions in education

- Supporting nutrition interventions early in life for improved school performance
- Ensure that the schools in the district have a health plan that emphasizes nutrition
- Strengthening the capacity of teachers and administrators in the district in nutrition
- Supporting adequate inclusion of nutrition and health in the school curriculums

Source: Based on briefs from the USAID FANTA project

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