FOOD SYSTEMS FOR HEALTHIER DIETS

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SUMMARY REPORT
This report provides ten summary insights and discussion points on the direction of the 'Food Systems for Healthier Diets' (FSHD) research program in Ethiopia based on a consultation with Ethiopian partners and the CGIAR Ethiopia site integration team, including a two-day workshop in Addis Ababa, with interactive panel discussions, breakout groups and preparatory and follow-up interactions. The consultation engages government and non-government institutions from the health, agriculture, environment, industry, finance and education sector as well as international donors. The group identifies and reviews trends, knowledge, gaps, opportunities and priorities for improving diets through sustainable food system pathways in Ethiopia and interacts with the CGIAR Ethiopia site integration process to ensure alignment. Workshop presentations, a summary of background materials, and an initial inventory per cluster of activity are also available, exchanged in a joint Dropbox folder.

**Ten Summary Points**

1. A consensus on a working definition for food systems is key to ensure alignment among partners and to define the scope and borders of the program in Ethiopia. At first, the broad definition of food systems, referring to the full set of processes, activities, infrastructure and environment that encompass the production, processing, distribution, consumption of food, and the disposal of waste, seemed to aim at capturing and doing everything and therefore caused confusion. The notion that problems are typically interlinked and so cannot be solved at only one level of the system and the idea of Food systems thinking as an approach that considers how all elements and actors of the food system are interrelated and can be affected by (targeted) incentives or interventions that change final (nutrition) outcomes (Herforth et al., 2015), helped clarify the systems approach, understand the added value and define the scope of the flagship for the Ethiopia case.

2. It is well recognized among different stakeholders that over the last five years, Ethiopia has developed a very rich and innovative policy, program and research environment for nutrition. The Seqota declaration, National Nutrition Plan and Nutrition-sensitive Agriculture Strategy are good examples of this commitment. The number of multi-sectoral projects is growing and an overall national nutrition coordination body meets every three months. Related implementation and research capacity are lagging behind, but efforts to strengthening those are underway. Most nutrition projects however focus only on undernutrition, while the challenges of the emergent overweight, obesity and diet-related non-communicable diseases, are growing rapidly, particularly in the expanding urban areas (about 20% of the population is urban now). Participants emphasized that this FSHD flagship therefore provides a unique opportunity in Ethiopia to inform the development and implementation of food systems approaches to address undernutrition and the emerging overnutrition, simultaneously through aiming for overall healthier dietary patterns.

3. What a healthier diet exactly means for the diverse Ethiopian settings and population groups remains still largely unclear. A national study from the Ethiopian Public Health Institute (EPHI, 2013) sheds light on some major dietary quality gaps, including Vitamin A and Zinc inadequate intake, but who consumes what and why, i.e. the heterogeneity of dietary patterns and quality concerns among the large diversity of consumers, remains to be investigated and currently limits efficient targeting of food-based
interventions. Filling this knowledge gap was identified among the priorities for this flagship in Ethiopia. Research could then inform the development of healthy (& sustainable) food-based dietary guidelines considering diverse settings in Ethiopia as well as the design and targeting of food-based approaches to nutrition.

4. Ethiopia has a fast growing economy, and a changing food environment, with declining shares of food expenditures and increased access to non-staples, processed foods and sugary beverages. Stunting among young children has reduced from 57% in 2000, to 40% in 2014 (GNR 2015), but levels of chronic undernutrition are still among the highest in the world. In addition, Ethiopia’s food production and supply are very vulnerable to climate change and variability (e.g. droughts in 2015-2016), which leads to temporal high levels of severe food insecurity and acute malnutrition. Indications for dietary transitions are observed in several overall trends (Worku et al. 2015) e.g. increased caloric intake; declining but still dominant share of cereals in diets; more purchased foods. If diets as a whole are changing towards healthier or unhealthier patterns, and how this differs between and within regions and population groups, is unclear. It was discussed that probably also in Ethiopia the consumption of healthy as well as unhealthy components is increasing, but that maybe the increase of unhealthier components is faster than that of healthy components (Imamura et al. 2015).

5. Two large national government-led programs seem to shape the food systems development. First, the Growth and Transformation Plan (GTP) targets large agricultural and agro-industrial investments through the Agricultural Growth Program (AGP) (Figure 1A), to high potential areas in four regions of the country, thereby enabling an agricultural growth corridor. Second, the Productive Safety Net Program (PSNP) (Figure 1B) supports the most vulnerable households in rural areas, to cope with food insecurity and manage risks. The impact of those large national programs on food system dynamics and dietary changes is not yet known. On-going evaluations led by the Ethiopian Strategy Support Program (ESSP) will help shed light on those trends, particularly on changes in diets. However, knowledge or research on how food systems operate and change in Ethiopia, and how those interact with dietary transitions, is much more scarce and identified during the consultation as a key knowledge and research gap. Several existing databases can be mobilized for that purpose and complemented with new specific food system data collection efforts. Such food systems research could help identify leverage points for food-basket interventions in Ethiopia adapted to different contexts, needs and dynamics. It was further suggested that the geographic allocation of AGP and PSNP together with the CGIAR Ethiopia site integration process should also guide the geographic targeting of this flagship.

Figure 1: Agricultural Growth Program phase 1 intervention woredas (A), and Productive Safety Net Program intervention areas (B) (Source: FAO 2011 http://coin.fao.org/cms/world/ethiopia/Projects/Maps.html
6. Environmental challenges that underpin Ethiopian food systems have been raised repeatedly during the consultation, in particular climate change and variability - and related water shortage, seasonality and unpredictability - and land degradation - and related soil infertility and biodiversity loss. Ethiopia's Climate Resilient Green Economy (CRGE) strategy and the Sustainable Land Management Program (SLMP) aim to address those challenges but linkages to food and nutrition programs are unclear. Taking a food systems approach, this flagship provides an opportunity to strengthen such linkages and explore opportunities for synergies and minimizing tradeoffs between food system and diet transformations, climate change adaptation and mitigation and land degradation. For example linking enhanced water management efforts (e.g. water harvesting, drip irrigation), to a diversity of stronger value chains and fresh markets for fruits and vegetables, could benefit both diet and environmental outcomes. A major common pressure for the environment and Ethiopian food system is the high population growth. Ethiopia is now the second-most populous country in Sub-Saharan Africa with a population of 96.5 million in 2014 (as compared to about 30 million in 1980), and population growth rate of 2.5% (as compared to 1.9% in 1980) (World Bank, 2015).

7. Current large projects in Ethiopia that try to influence the demand-side towards healthier food choices include 1) extension programs, in particular community health workers, the women development army (community volunteers, mainly women, trained to support health services within their own community), and development agents; 2) media campaigns, e.g. radio, TV, mobile messaging, and 3) specific projects that include nutrition campaigning and education at the core of their activities, e.g. ENGINE, Smart food campaigns, Alive and Thrive. The effectiveness of those models for stimulating demand for healthier diets in Ethiopia is not yet known, but M&E efforts are on-going. Several complementary demand-side innovations were suggested by the participants: food-based dietary guidelines (which also consider environmental sustainability and risks for overweight and NCDs), food labelling and better quality assurance to gain the consumers' trust, support to nutrition champions e.g. chefs, celebrities, and more activities through popular media.

8. Projects that try to influence the supply-side (production, value chains, markets) towards healthier food choices in Ethiopia have been growing over the last five years, particularly through stronger integration of nutrition into agriculture (this in terms of policies, institutions and projects). Examples include efforts to increase access to a diversity of seeds and nutrient dense varieties of major staples (e.g. sweet potato, maize, legumes), small-scale irrigation and gardening projects for vegetables and fruits, value chain improvements of livestock and irrigated products, support for cooperatives to enhance production, scale and marketing of a diversity of products, and new standards for food fortification. Despite the growing number of projects, a clear need for more integrating systems projects (food, market and agricultural systems) was expressed during the consultation process to target the multiple burdens of malnutrition simultaneously, to reduce inefficiencies, as well as potential future social, environmental and economic trade-offs. Concrete examples of suggested projects include: overcome adoption constraints and creating markets for fruits and vegetables, strengthen urban agriculture pilots and related fresh markets, better waste and water management throughout the food system. Further, practical methods and human capacity are needed to investigate how those food system innovations (supply- and demand-side) influence the food basket consumed, e.g. what are the net nutritional impacts of specific innovations and are there gender-related and environmental trade-offs.

9. There are several active Ethiopian multi-stakeholder platforms, with which the food systems for healthier diet flagship can and should interact in Ethiopia and which provide pathways to anchor/ scale effective food system innovations. Central is the national nutrition coordination body, led by the ministry of health and engaging nine ministries, donors, UN agencies, NGOs, private sector and research institutes. The nutrition coordination body drives the national nutrition strategy and links
directly to the Scaling Up Nutrition (SUN) movement, including the SUN’s business network coordinated by GAIN. Other examples of multi-stakeholder, multi-sector platforms include the CASCAPE platform (coordinated by WUR), the ReSAKSS-East and Central Africa platform (facilitated by ILRI and IFPRI), and the ATONU-FANRPAN network.

10. A clear need for enhanced capacity in food systems thinking, whole diet approaches and their applications has been expressed in the consultation. A combination of short- (1-2 weeks of intense trainings and 2-3 months internships) and long-term (MSc, PhD, postdoc) trainings was suggested. For the purpose of capacity building, the flagship can build on several on-going efforts and structures, for example: new nutrition curricula and programs at several universities (e.g. Hawassa University new Center of Excellence for Nutrition, Addis Ababa University for Science and Technology) as well as for government officials (e.g. nutrition trainings and capacity building at the Ministry of Agriculture and Natural Resources and at the Ethiopian Public Health Institute (EPHI), media campaigns, and the extensive network of community health workers, development agents and the women development army.

THANK YOU TO ALL PARTICIPANTS!

References


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