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Business and its Role in Improving Nutrition: Opportunities, Challenges and Solutions for Ghana. Case Studies and Key Messages from the Workshop

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March 2016

The IDS programme on Strengthening Evidence-based Policy works across seven key themes. Each theme works with partner institutions to co-construct policy-relevant knowledge and engage in policy-influencing processes. This material has been developed under the Reducing Hunger and Undernutrition theme.

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BUSINESS AND ITS ROLE IN IMPROVING NUTRITION: OPPORTUNITIES, CHALLENGES AND SOLUTIONS FOR GHANA. CASE STUDIES AND KEY MESSAGES FROM THE WORKSHOP

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Abbreviations

ESM	Exp Social Marketing Foundation
FDA	Food and Drug Authority
FO	Farmers' organisation
GAIN	Global Alliance for Improved Nutrition
IDS	Institute of Development Studies
INF	International Nutrition Foundation
JICA	Japanese International Cooperation Agency
KKP	KoKo Plus (a home fortification product containing micronutrients and amino acids)
NCD	non-communicable disease
NGO	non-governmental organisation
OFSP	orange-fleshed sweet potato
P4P	Purchase for Progress
PPP	public-private partnership
SHF	smallholder farmer
SME	small and medium-sized enterprise
SUN	Scaling Up Nutrition
UG	University of Ghana
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
USI	Universal Salt Iodisation
VBE	village-based entrepreneur
VSLA	Village Savings and Loan Association
WFP	World Food Programme

Summary

This Evidence Report presents the findings from a workshop held by the Institute of Development Studies (IDS) in partnership with the Ghana School of Public Health held in Accra on 11 and 12 November. The workshop convened individuals from the private sector, civil society, the donor community and government to discuss the opportunities, challenges and potential impacts of using market-based solutions to improve nutrition, and attempted to develop some concrete ways forward. This was the third in a series of workshops held in Tanzania, Nigeria and Ghana, aiming to share research findings in all three countries where the primary research for the project was conducted.

The day began with an overview of IDS' research on market and private sector interventions for improving nutrition, which highlights key constraints when using markets and potential options to address these challenges. Using a framework for understanding how market systems operate, and feeding the research findings into this framework, participants conducted an analysis of four real case studies from Ghana. The key challenges affecting the ability of market systems approaches to improve nutritional outcomes in Ghana were identified by the participants as:

1. the need for promotion and for creating demand for nutritious products through various channels for different groups, and sensitisation about nutrition along the value chain, not just among the end consumers;
2. reaching the most vulnerable and poorest segments of the population and developing effective, sustainable and scalable ways to do this;
3. ensuring programme sustainability, in terms of a programme's long-term ability to have positive impacts on nutrition.

On the second day, a panel comprising representatives of the Ghana Health Service, the World Food Programme, the Scaling Up Nutrition (SUN) civil society alliance in Ghana, and two representatives of the private sector, discussed potential next steps and future ways forward.

Key points from this discussion include:

- how to introduce new legislation and improve enforcement, and ensure that those responsible for monitoring are accountable;
- improving collaboration between the government and the private sector, especially small and medium-sized enterprises (SMEs), while at the same time managing conflicts of interest;
- addressing some of the gaps between SUN's strategic, high-level aims and objectives and implementation of nutrition projects and programmes on the ground;
- how to ensure sustainability of interventions, projects and programmes to improve nutrition in the long term;
- the need to move beyond fortification to a broader understanding of nutritious foods.

The group ended the day by calling for a platform, like an active SUN business network, or even a virtual platform in the short term, to allow the momentum generated by the workshop to continue and ensure a move from talk to action.

1 IDS work on markets, business and nutrition

The Institute of Development Studies (IDS) is a leading global institution for development research, teaching and learning, and impact and communications, based at the University of Sussex. Our present vision is a world in which poverty does not exist, social justice prevails and economic growth is focused on improving human wellbeing. We believe that research knowledge can drive the change that must happen in order for this vision to be realised.

IDS leads a portfolio of work on the role of businesses and markets in reducing undernutrition, including the 'Strengthening Agri-food Value Chains for Nutrition' project. Since 2012, the IDS team has worked in Ghana, Nigeria and Tanzania. Activities have included assessing nutrition opportunities in various agri-food value chains, conducting case studies of business action on nutrition and providing policy advice and recommendations to stakeholders in governments, development agencies, civil society and the private sector.

For more information and a list of publications, visit: www.ids.ac.uk/project/strengthening-agri-food-value-chains-for-nutrition.

2 The University of Ghana School of Public Health and Nutrition

The School of Public Health is the foremost public health training institution in Ghana, with a history of training public health managers in Ghana. The current nutrition research at the School focuses on enhancing the capacity of families and communities in Ghana to follow recommendations on nutrition. In the last five years, related completed research includes assessment of: food available to children in schools, with a focus on understanding childhood obesity; the labelling of complementary foods with reference to existing national legislation concerning breastmilk substitutes; the utilisation of dietary and herbal supplements, and of iodised salt. In addition, the School has been instrumental in contributing expertise for developing and reviewing national policies including Universal Salt Iodisation, national nutrition policy, and reviewing government expenditure on nutrition.

3 Context for food markets and nutrition in Ghana

Ghana has witnessed a significant decline in the poverty rate over the last ten years, from 52 per cent to 28 per cent, largely as a result of increased agricultural productivity in the south of the country. However, the improvement in Ghana's human development indicators has not been so rapid, with one-quarter of children aged under five stunted, an estimated 1.2 million people considered food-insecure and an additional 2 million at risk of food insecurity at the household level. There is also a high degree of inequality and of regional variation in terms of stunting rates and poverty levels, which are almost twice as high in the north as in the south (Ghana Statistical Service *et al.* 2014).

The Government of Ghana initiated the drafting of a national nutrition policy in 2010. While this was ongoing, the country signed up to the Scaling Up Nutrition (SUN) movement in 2011. In 2013, the national SUN multi-sector platform supervised completion of the policy, which is currently still in draft form, awaiting government approval. Next steps include advocating for all relevant non-health ministries to prioritise and support implementation of nutrition-sensitive interventions as outlined in the policy. In addition, activities are under way to develop plans to enable policy to be translated into programmes.

Private sector involvement in nutrition has increased significantly over the last decade. Since 2006, the Global Alliance for Improved Nutrition (GAIN) has supported industry, government and other relevant stakeholders, within the framework of the National Fortification Alliance, to implement mandatory fortification of wheat flour and vegetable cooking oil with essential micronutrients. This support has been extended mainly to large-scale milling and processing industries. In addition, small and medium-scale industries have also introduced smaller-scale voluntary fortification products into the local market. The government is promoting the use of bio-fortified products (for example, orange-fleshed sweet potatoes, quality protein maize, etc.).

Now that Ghana has reached middle-income status as a country, with decreasing access to donor funding, there is a greater need to look beyond traditional models towards sustainable ways of delivering nutritious foods to vulnerable populations. Some interesting examples of public-private partnerships are being explored, such as the Ghana Nutrition Improvement Project, examined below in one of the case studies, which brings together the public sector, international and national businesses, civil society, and academia to try to develop innovative products, programmes and marketing solutions that reach the poor, and seeks ways of continuously improving on the innovations. The present workshop, which was built on similar workshops held in Tanzania and Nigeria, aimed to accomplish the following:

- Share research from three countries on the opportunities and challenges of using markets to deliver nutritious foods to populations most at risk of undernutrition.
- Provide a better understanding of how various policy and business models can shape markets for nutritious foods, and how they can achieve sustainability and scale.
- Strengthen the use of evidence on markets and nutrition in designing and planning programmes.
- Bring together key stakeholders into a shared space to discuss how to move from discussing challenges into developing an action plan for addressing some of these challenges.

At the end of the workshop, participants felt strongly that a major challenge in Ghana was the lack of a platform for key stakeholders to come together and discuss how the private sector could be more involved in nutrition (unlike in Tanzania and Nigeria, Ghana does not have an active SUN business network). Proposals included developing a SUN business network or

an online platform to enable the conversations from the workshop to continue, and critically, to move from discussion into action. It is hoped that such a platform will be developed as a result of this workshop.

4 Methods



Group diagramming the impact pathway for KoKo Plus. *Photographer: © Isaac Amini (2015).*

The day started with an overview of IDS' research into food, markets and nutrition, situated within the Ghanaian policy context. Once the key research findings had been presented, the large group was broken into four smaller groups (whose members were assigned on the basis of their expertise) to employ the research findings in evaluating four Ghanaian case studies of market and nutrition interventions aimed at improving nutrition outcomes. Each small group was tasked with diagramming the impact pathways, moving from the ultimate nutrition outcome backwards through the pathway to determine what intermediate steps are necessary to achieve the final nutritional outcome, as well as identifying key actors and potential barriers to achieving that outcome.

The four case studies discussed were:

Group A: Ghana's Universal Salt Iodisation programme

Group B: Finer Foods

Group C: World Food Programme's Purchase for Progress initiative

Group D: The Ghana Nutrition Improvement Project

The case studies and discussions are presented in more detail later in this report. Each case study was presented by a key expert involved in the company, project or programme. After the case study was presented, a trained facilitator guided the group through a discussion to develop an impact pathway, thinking through the various factors that constrained or enabled a project, programme or company to be effective at addressing the challenges surrounding nutrition in Ghana. Participants were assigned to the initial groups on the basis of their expertise and experience. Once the impact pathway for the project, programme or company was developed, groups were asked to rotate to the next case study, 'world café style', allowing each group to hear about the different projects and to add their input to the impact pathway that had been developed by the initial group. After each group had had an opportunity to hear about each of the other projects, programmes or companies and add

their input to the various impact pathways, they all returned to their 'home' case study and reviewed the additions that the other groups had made to their impact pathways. The group then worked to identify the two or three key problems or barriers that they felt were having a significant impact on the programme's ability to influence nutritional outcomes. Key issues from each group were presented back to the whole group, and three that emerged as main themes or cross-cutting issues were identified, through a process of group discussion. Participants then voted on these in order to decide what the top three most critical challenges were.

The day concluded with a discussion of what next steps should be taken, and how these key challenges might be addressed.

The second day of the workshop featured a panel discussion representing the views of key stakeholders and focused on identifying the crucial next steps.

5 IDS research presentation and summary of research

The workshop started with a presentation by Kat Pittore of the research carried out by Dr John Humphrey and Ewan Robinson. A summary of the main points from the presentation and key research findings discussed at the workshop is presented here.

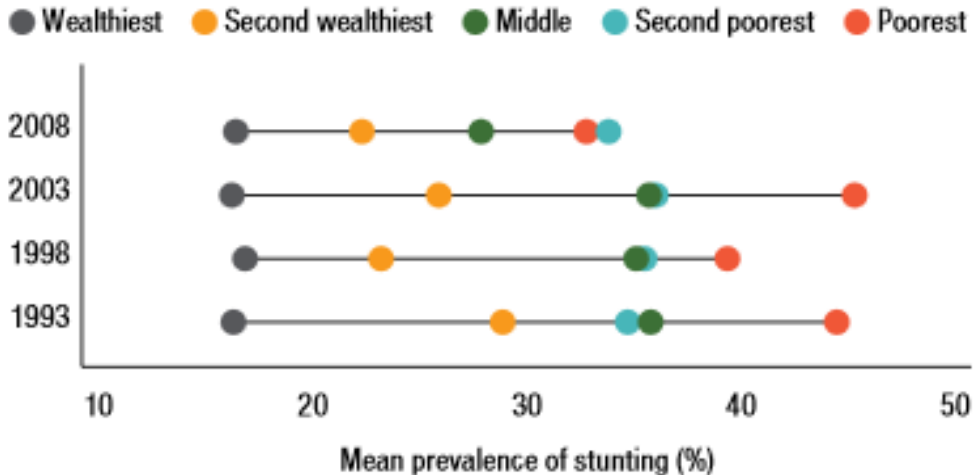
5.1 Factors not discussed today

Before I start discussing the research findings, I want to stress that this research is only examining one element of improving nutrition: food. Nutrition is a multi-sectoral issue, and achieving real improvements in nutrition requires not just access to nutritious foods, but also clean water and sanitation to prevent disease, and access to health care to treat illness. Care practices for infants and young children are also crucial, and are related to bigger issues around female education, time and other factors linked more broadly to questions of gender equality. While the rest of the day will focus on food-based strategies for addressing undernutrition, it is critical that we understand that access to nutritious foods is only one element necessary for improved nutrition in Ghana.

5.2 The challenge of maintaining an equity focus

One key challenge to keep in mind as we start to think more about market and private sector solutions to the problem of undernutrition is the difficulty of reaching the poorest and most vulnerable populations, or ‘bottom of the pyramid’ consumers. As Figure 5.1 demonstrates, rates of stunting in Ghana in the poorest and second-poorest quintiles of society are almost twice as high as in the wealthiest quintiles. In Ghana there are also regional disparities in terms of undernutrition; stunting rates are highest in the Upper East, Northern, Eastern and Central regions (Ghana Statistical Service *et al.* 2014). However, these groups that are most affected by undernutrition are also the most difficult and least profitable to reach with private sector and market-based nutrition programmes.

Figure 5.1 Variations in stunting prevalence in Ghana over time, by wealth quintile



Source: DHS surveys 1990–2011 adapted from Bredenkamp *et al.* (2014).
 Source: IFPRI (2015). Reproduced with permission.

I also want to focus attention on reaching those populations who are most at risk of undernutrition, especially women of reproductive age, and young children, especially in the 'first 1,000 days' from the time a child is conceived until the age of two. At this age, especially after six months when complementary foods are introduced, children are growing very quickly and this is a key period for preventing stunting, which can lead to irreversible damage to children's physical and brain development.

Throughout the day, I want to make sure that we are thinking about how the projects and programmes that we are examining are able to deliver nutritious foods not just to wealthy, urban consumers, but also to the poorest and most vulnerable populations.

5.3 Major challenges facing markets and nutrition

From our research, I want to highlight a few central themes that are common to many of the specific interventions and businesses studied. As I mentioned, we argue that there are big challenges facing markets for nutrition, and these are beyond the control of any individual business. There are no incentives for action that would improve nutrition for the vulnerable groups.

We illustrate these challenges by identifying four key nutrition conditions: these are the requirements that must be met in order for a particular food to contribute to better nutrition for the 'first 1,000 days' (from the time a child is conceived until his/her second birthday) and for low-income populations. These conditions are about the food itself and about how it is used and who eats it. They are: affordability, availability, acceptability and quality. However, when we are seeking to provide foods through markets, these nutrition conditions also raise a second set of issues, which are specific to businesses. Companies cannot simply deliver nutrient-rich foods; they need to do it in a way that enables them to earn profits and have a sustainable business model. Businesses in Ghana face intense competition over prices and operate in a difficult environment. Although they have the potential to meet each of the nutrition conditions, this increases their costs, threatening the viability of the business model. As a result, the incentives to businesses are not aligned with what we want in terms of nutrition. Table 5.1 shows the link between the nutrition conditions and the problems that businesses face in meeting these conditions.

5.4 Key challenges

Affordability. One of the challenges when it comes to reaching key groups is that of affordability of products. One study found that although poor consumers are willing to pay 5–8 times more for nutrient-dense foods than for traditional staples, many of the premium-branded nutrient-dense foods are on average 12–26 times more expensive than traditional goods and, as a result, are out of reach for poor consumers (Kayser, Klarsfeld and Brossard 2014). Furthermore, key elements of products, such as appropriate packaging to ensure nutrients are not lost, can have cost implications, causing a tension between selling products in the cheapest possible packages so that they are more affordable, and selling them in better packaging that preserves nutrients but adds to the total final cost. One recent study looked at marketing complementary foods to bottom-of-the-pyramid consumers in Madagascar, Côte d'Ivoire, Burkina Faso and South Africa, and found that the investment necessary in order to raise customer awareness and ensure that products were used correctly, was very substantial and accounted for over 70 per cent of a product's total cost. The resulting overall cost was very high, even though the products were sold mainly in urban areas, so there were not the additional problems of accessibility, discussed below (Kayser *et al.* 2014).

Table 5.1 Delivering nutrient-rich foods: problems and possible solutions

Challenge	What is the problem?	Potential solution?	Limitations
Affordability	Individuals may recognise benefits of nutrient-dense products, but unable to frequently afford them	Mandatory fortification	Weak enforceability
Availability	High transportation costs for centrally produced foods, especially in rural areas (low population density and long distances)	Use existing infrastructure aimed at wealthier consumers Invest in distribution	Reach is limited – especially in remote rural areas Higher price
	Market systems approaches often neglect the role the informal sector plays	Improve function of informal markets which are already in close proximity to the poor and for which costs are lower	Informal goods can fluctuate wildly in terms of quality and nutritional value
Acceptability	Products meet cultural and social norms	Invest in product placement/ marketing goods to promote brand awareness	Higher price
		Products in informal sector tend to be aligned with cultural preferences of poorest, increasing acceptability	Informal goods can fluctuate wildly in terms of quality and nutritional value
Quality	Traditional diet is low in nutrients	Introduce more nutrient dense foods Mandatory fortification	Lack of acceptability and higher price Weak enforceability
	Asymmetric information re nutritional benefits	Signalling mechanisms (branding, labelling, marketing, voluntary certification)	Higher price Difficulty in implementation Mislabelling and false claims weaken signalling mechanisms

Accessibility. One of the main challenges of reaching key populations concerns accessibility to the poorest, especially in rural areas. Longer distances between population centres, smaller population densities in rural areas combined with weak transport and other infrastructure mean higher transport costs for nutrient-rich products, which are usually centrally produced by large manufacturers (Bruyeron *et al.* 2010). These increased costs can either raise the price of these goods or make it uneconomical for businesses to operate in thin markets.

Acceptability. The demand for nutritious foods is greatly influenced by their affordability and acceptability. Because of the higher manufacturing costs, together with branding and marketing costs, the price of nutrient-rich foods can be significantly higher than for those that are not as nutritious. Consumers may be unable to afford them and, anyway, as the nutritional benefit is difficult to observe, may prefer to buy cheaper substitute goods. Even if nutrient-rich foods are not prohibitively expensive, consumers must have both the ability and the willingness to buy these products. Moreover, consumers will have preferences regarding food texture, taste, appearance and ease of use. These preferences are shaped by numerous factors; products that do not take into account cultural norms are likely to be overlooked.

Quality. Nutrition has been identified as a credence good (Maestre *et al.* 2014), meaning that nutritional value of a product cannot be easily identified by consumers either before or after consumption. This creates information asymmetries between producers and consumers. Several 'signalling' mechanisms such as premium branding, labelling and

marketing have been employed to highlight the benefits of nutritious products. However, these mechanisms are insufficient if standards, laws and norms are unenforceable (Dulleck, Kerschbamer and Sutter 2011). Anim-Somuah *et al.* (2013) point out that the absence of these mechanisms leads to a 'race to the bottom' where there are strong incentives for producers to reduce the quality of their complementary food products in order to sell them at the lowest price possible. At present, only very high-cost products from larger multinational companies can provide a guarantee of nutritional quality.

5.5 Key questions for market-based initiatives

In this workshop we are attempting to translate the research findings into a model that different stakeholders can use to better understand the ways in which various market-based solutions for tackling undernutrition are thought to operate, and the potential external influences on the markets, including informal markets. We hope that this framework will help actors move beyond the specific activities involved in a project, and think about underlying assumptions regarding how various actors will behave, and what external factors are influencing a company, project or programme. We hope that throughout (and beyond) today, participants will be able to think about the wider market system in which a project or programme is operating and how this system, including both formal and informal channels, is influencing a project, programme or business. Please consider these five questions as we move forward into discussing today's case studies.

1. **Context matters.** What is effective in one market might not be effective in another context. What are the motivations and incentives driving business action? How do market conditions affect these incentives?
Companies that seek to demonstrate nutritional quality through premium branding are successful in building consumer trust in formal market systems but this strategy will be unsuccessful in informal markets where consumers will not be able to afford premium products. In another context, described in the case study in Section 6.2, premium branding is actually a disincentive for this particular buyer, who purchases food to distribute to refugee populations. In this context, branding increases the likelihood of resale of the food into markets, and therefore the buyer prefers to purchase unbranded products.
2. **Markets are diverse and interlinked.** There are different kinds of markets, including formal and informal, national and local. These markets are often interlinked: a project that aims to have an impact on what is being sold on the formal market also has an effect on what is available on the informal market.
One example from our research in Ghana demonstrates this connection well. Aflatoxin is a compound that is produced by a type of fungus that grows on grains, such as maize, and on groundnuts. Consuming aflatoxin has been linked to stunting in children and liver cancer in adults. A United States Agency for International Development (USAID)-funded research and product development programme sought to reduce aflatoxin in value chains for groundnuts in Ghana. However, it struggled to create incentives for those further removed from production, especially farmers and traders. Improved farming and storage practices can reduce growth of the fungus and prevent aflatoxin contamination. However, since traders would not offer farmers a higher price for properly stored groundnuts, the farmers did not adopt better practices. Therefore, the preferred method for reducing aflatoxin in the value chain was to sort groundnuts at the stage of food processing or retail. However, this created its own problems. The contaminated groundnuts that were removed during sorting were not discarded; they were resold at a lower price. As a result, they tended to be steered towards poor consumers, increasing their health risks. This is a clear illustration of how markets are linked: the formal sector businesses that were partners with the project were producing 'aflatoxin-free' products (sold at a higher price). However, these businesses were also linked to informal markets that sold

contaminated products (at a lower price). Thus, solving a problem in one market can create a problem in another. Policy solutions need to look across both formal and informal markets, rather than focusing only on individual businesses.

3. **Sustainability and stability.** If an intervention or business model depends on current market conditions (or policy conditions), what would happen if these conditions changed in the future? If a programme relies on donor or government funding, what happens if this funding is withdrawn or stops? What if a change is made to regulations on how a product must be fortified? What would happen if a competing product entered the market, or was imported? Would the genuine product be competitive? If a product depends on strict regulation to control pass-off products, how likely is it that this level of enforcement can be maintained?
A key point to think about here is a case study we looked at in Nigeria. In this case study, Benue State had a contract with a company called BioOrganics, which supplies micronutrient home fortification 'sprinkles' through the health-care system. When the state stopped paying for the sprinkles, the company lost a significant amount of money and the programme was stopped. In retrospect, BioOrganics felt that it should not have relied only on non-profit distribution but should also have looked at selling the products through the open market.
4. **Capacity of both public and private institutions.** The capacity of regulatory agencies and their staff to undertake monitoring and enforcement is a key issue that came up in both previous workshops. In terms of public capacity, what would strong institutional capacity look like? How can we ensure long-term commitment to monitoring and enforcement? What can enforcement bodies do to disincentivize copy-cat and pass-off products? What is the best strategy for ensuring enforcement? Is it praising companies that are doing well? Or punishing those that are not (is there the capacity to do this?) In terms of private capacity, do small and medium-sized enterprises (SMEs) have the capacity to check their products at all points in the value chains? Or the capacity to ensure transparent value chains?
In another example from one of the Nigerian case studies, we heard from a medium-sized indigenous company that had pioneered voluntary fortification in Nigeria. This company, which had established itself in the market and built a base of consumer trust through premium products and branding, found that at one point up to 50 per cent of the products being sold under its brand name were fakes. Eventually one of the regulatory agencies was able to stop one company producing fakes, but the regulators themselves pointed out the problem, which is that as soon as you stop one factory making fakes, it simply sets up elsewhere or starts manufacturing at night.
5. **Evidence.** What evidence do we use when we design and implement market-based programmes? Much of the existing evidence base refers to programmes and products under carefully controlled pilot or trial conditions. But market-based approaches are inherently difficult to control and their outcomes difficult to predict in the long term. Do we have evidence about what works under real world conditions and in real markets? What do we need to know? Given the difficulty and cost of conducting full-scale trials and experiments, how can we measure the success of programmes?
For example, in Ghana we do not have evidence about who is actually consuming fortified products; are these products actually accessible to the poor? Only 40 per cent of people are consuming iodised salt. Who are these people? Are they the people who need it most? More evidence is required in order to determine whether key initiatives are reaching target groups.

The key message that I would like to leave you with, as we break into groups to discuss specific programmes, is about the need to think about the entire market system in which a project or programme operates. Any project or programme that uses markets to deliver nutritious foods must address challenges systematically, addressing both demand and supply-side issues, and consider the policy and market environment in which the project, programme or company is operating. Consumer awareness and demand generation will only

work in a context where people have access to nutritious foods, believe the claims of nutritional benefit, and can afford these products. Similarly, companies will only seek to increase the supply of nutritious foods if it is profitable for them to do so, or if there are severe consequences for not doing so (for example, strong penalties for those that are not following guidelines on fortification).

We hope the ideas from today will be useful when you are thinking about your own programmes, companies, projects, policy and advocacy work, and that the markets systems analysis will be something that can be useful for developing future programmes. Thank you very much for your participation.

6 Ghana case studies

In order to show how the research findings can be applied to projects and programmes, the first day of the workshop was structured around analysing four projects and companies operating in Ghana. Expert case study leaders presented four case studies of programmes, projects and companies aiming to increase access to nutrient-rich foods in Ghana using market-based approaches. Small groups then worked with the case study experts to develop a shared analysis of each project, and to produce visual representations of the causal logic ('impact pathway') through which the project contributes to reducing undernutrition (these diagrams can be found in Annex B). Each of the case studies is introduced below, followed by the key findings from analysis.

Table 6.1 Ghana case studies

Case study	Leader	Affiliation
Universal Salt Iodisation	Kwasi Antwi	Ghana Ministry of Trade and Industry
Finer Foods	Mawuli Oddam	Finer Foods
World Food Programme (WFP) and Purchase for Progress	Kazuyuki Fujiwara	World Food Programme-Ghana
Ghana Nutrition Improvement Project	Satoshi Kitamura	Ajinomoto – Ghana Nutrition Improvement Project

6.1 Group A: Ghana's Universal Salt Iodisation programme

Ghana's Universal Salt Iodisation (USI) programme seeks to ensure that all salt produced, distributed and marketed in Ghana meets required standards for quality, iodisation and packaging, to ensure at least 90 per cent of households have access to, and use, adequately iodised salt. The programme seeks to develop the salt industry through promotion of modern practices and improved quality assurance practices, and to strengthen the communication to consumers of the benefits of consuming adequately iodised salt.

The initiative is being undertaken through a well-designed national strategy which is being spearheaded by key actors including the Ministries of Trade and Industry, Health, and Local Government and Rural Development, the Ghana Health Service, Food and Drugs Authority, and Ghana Standards Authority, and partners such as the United Nations Children's Fund.

Activities

- Sensitising the government and its agencies on the need to understand the importance of USI and how their contribution can help achieve the national nutrition objectives.
- Facilitating the modernisation of the salt industry.
- Facilitating the setting up of 13 salt iodisation centres in salt-producing areas.
- Facilitating the provision of iodisation sites at major markets and at borders.
- Training producers on appropriate iodisation and packaging practices.
- Promoting the establishment of a salt bank in the salt-producing areas in order to minimise the amount of non-iodised salt that is transported from these areas.
- Ensuring that police are checking salt in transit areas and are equipped with appropriate testing equipment.
- Building the capacities of stakeholders to ensure effective enforcement of USI law. Strict enforcement of the law would ensure reduction of the amount of non-iodised on the market.
- Enforcing penalties and sanctions as provided in the Public Health Act for non-complying producers, transporters, traders, etc.

- Promoting consumer acceptance for, and use of, iodised salt through a mix of communication strategies. Consumer understanding of USI issues would create a demand for iodised salt; in this way there would be a pull, which in turn would trigger a push to encourage producers to ensure salt is iodised.
- Training in iodisation techniques for salt producers.

Key successes of the programme to date

- Since the beginning of the national USI project, there has been an increase in the consumption of iodised salt among the Ghanaian population, with the current rate standing at about 60 per cent.
- The salt traders have understood the benefits of selling iodised salt and have started requesting iodised salt from producers.
- The initiative has culminated in the establishment of a salt bank, which initially was not part of the plan.
- The population understands the benefit of consuming iodised salt.

Challenges and barriers

Salt produced and marketed in Ghana for human and animal consumption does not meet set standards of quality, iodisation, packaging, storage or handling, for the following reasons:

- inadequate government support to salt iodisation process;
- low consumption of adequately iodised salt at the household level is attributed to poor access to adequately iodised salt, poor handling and storage, and misconceptions about iodised salt – for example, believing that consuming it will reduce your lifespan;
- a perception among the public that iodising salt is foreign to Ghana because the salt produced in the country does not naturally contain iodine;
- iodised salt being seen as synonymous with refined packed salt;
- poor enforcement of value chain using USI regulation;
- producers having difficulty in accessing potassium iodate;
- poor iodisation quality; in Ghana, salt is produced by hundreds of small-scale producers using rudimentary technologies, but fortification programmes tend to be much more effective when the salt is produced centrally by a few producers;
- some 40 per cent of the population still not consuming iodised salt; the 2014 Demographic and Health Survey shows that richer households are doing better, but it is not known whether this is due to economic or physical access.

Indicators to show success

- data from salt-producing sites;
- reports on the effective monitoring of the salt iodisation process and sites;
- the usage of handy testing machines to analyse the level of iodine in salt at production site, in transit, and in trade;
- feedback from consumers;
- an increase in the level of salt produced;
- physical inspection;
- conduct of tests to measure urinary iodine.

Key challenges identified through the mapping

Enforcement of the USI law at salt-production sites – the salt is not being adequately iodised. This is especially true for small-scale artisanal producers. There are a number of reasons for this, including producers facing problems in accessing potassium iodate as well as the fact that many small-scale producers use rudimentary technologies that make it difficult to ensure adequate iodisation levels.

Need to sensitise salt producers and consumers about the importance of salt iodisation – and to correct misperceptions. Increased efforts are needed to change behaviours of both salt producers and salt consumers. It is important that not only the government, but also private-sector companies, non-governmental organisations (NGOs) and the media are involved in sensitisation and the promotion of iodised salt. The messages being given also need to be changed and refined, looking beyond just iodine deficiency disorder to tell people about other potential effects of iodine deficiency such as low IQ and cretinism. It is also important to make sure that the way in which iodised salt is promoted also addresses some common misperceptions – for example, that iodised salt will shorten your lifespan. Some consumers do not see the need for salt iodisation since, they believe, iodine does not naturally occur in food, so salt is being adulterated by having something added that it does not naturally contain.

There is a lack of capacity, both among the small-scale salt producers and among the regulatory bodies. It is mainly small-scale, artisanal producers that meet the local demand for salt, while medium-sized companies with greater capacity tend to produce for export. The small, artisanal producers do not have the necessary equipment, capacity or manpower to ensure adequate iodisation.

In terms of regulation, police are supposed to do spot checks but the system can be corrupted by bribes. Some salt producers get round enforcement checks by spraying the bags containing the salt, after they have been loaded on to the truck, with iodine so that the sample, which is always taken from near the top, will register as iodised, even though the whole shipment has not been iodised. The Food and Drug Authority (FDA) does not have enough staff to adequately enforce the regulations and there are some problems around government capacity; for example, there are supposed to be eight centres that are testing iodised salt but only 13 are operational.

6.2 Group B: Finer Foods

Finer Foods is an indigenous Ghanaian company which produces one product, Ceresoya, a wheat and soya bean porridge that is distributed through both non-profit and for-profit channels. The product's primary objective is to prevent malnutrition and it is specifically sold, at reduced prices, to those at risk of undernutrition, for example patients affected by HIV/AIDS and tuberculosis. The product is also sold through for-profit channels, distributed through a national supermarket chain, for consumption by the general population, with a specific focus as a complementary food product for children over six months.



Ceresoya. Photographer: © Isaac Amini (2015).

Key activities

- Ceresoya is produced using Ghanaian soya beans which are purchased from the north, and mixed with wheat, skimmed milk powder and a micronutrient pre-mix, all of which are imported.
- It is produced in Accra and distributed in seven out of ten regions in Ghana.
- Ceresoya is distributed through two non-profit channels (through the Catholic Secretariat), and through MaxiMart supermarkets.
- Differential pricing is used for vulnerable groups, particularly for patients in the Princess Marie Louise Hospital, and also to vendors in rural communities. This is achieved by distributing to such customers using low-cost or budget-size packages which are cheaper (small, unbranded packages are sold for 3 Cedi in hospitals, whereas the same quantity of product is sold in branded packages for 5 Cedi).

- To allow penetration into rural markets, large (20kg and 50kg) bags can be purchased by market vendors who sell small amounts at reduced costs.
- The product marketing is targeted at nutritionally vulnerable families in low-income communities, e.g. Ashiaman, Kasoa, Juapong, etc.
- The product is also targeted at people at risk of malnutrition as a result of disease such as tuberculosis, and at HIV patients seeking care from facilities such as Hohoe Municipal Hospital, and also the Volta Regional hospital.
- The product is also given, through non-profit channels, to refugees through the national Catholic Secretariat. The Secretariat purchases the food and redistributes it through refugee camps (e.g. Adjeikrom, Fetente, Buduburam, Elembele, Ampenyin and Chrisam camps). Non-branded products are given, to prevent the product from being resold in the market.

The main actors involved in the activities

- **Finer Foods Company Limited.** Manufacturers and mainly involved in marketing and distribution in seven regions across Ghana.
- **National Catholic Secretariat in conjunction with the UN High Commissioner for Refugees (UNHCR).** Purchases product in bulk quantities and distributes to refugee camps across three regions including Central, Western, and Brong Ahafo regions.
- **Koko King Company Limited.** Prepares and retails the product to the general public as ready-to-eat breakfast cereal in Accra. This is sold by the roadside.
- Hospitals in various regions also purchase and use the product to supplement diets of patients at risk of malnutrition
- Supermarkets and open markets serve as main retail points in all distribution centres.

Key challenges identified through the mapping

Sourcing high-quality raw materials. Only soya beans can be sourced locally, while all the other inputs (milk powder, wheat and micronutrient pre-mix) must be imported. Sourcing good-quality soya beans can also be problematic as the quality varies considerably by region. Also, when they are out of season their price doubles, but the final product is sold at the same price, meaning that profits are reduced. Larger companies can afford to stockpile when the prices are low but small companies like Finer Foods lack capital (see next point) to be able to do this.

Access to capital is a critical barrier for SMEs. Many key challenges were flagged including those related to access to storage facilities, ability to purchase new equipment, difficulties around employing skilled labour, and developing and registering new products. For example, the company has approached the World Food Programme (WFP) to see whether it could supply it with the wheat–soya blend, but currently the company is unable to handle orders of the size that the WFP would require. To do so it would have to purchase additional processing equipment, and for this it would need more capital, which is hard for smaller companies to access.

Sustainability depends on products being sold on the market, but barriers to entry are high. Orders placed by the Catholic Secretariat (using donor funds from UNHCR) are paid for as soon as the order is complete, which is good for the company as it means it has a reliable income stream. Currently 60–70 per cent of its output is distributed through the Catholic Secretariat. The company recognises that in order to be sustainable in the long term it needs to diversify the channels through which the product is distributed. However, when selling through markets, the market traders buy the goods on credit and the company does not receive payment for two months, which can lead to cash flow problems (see the above point about difficulties related to access to capital).

Promotion and marketing are essential for distribution through for-profit channels, but also expensive. Research shows that although, on average, SMEs spend 3–5 per cent of their income on marketing, this needs to be much higher (up to 70 per cent in some cases, when using intensive strategies such as face-to-face marketing) in order to have a real impact. The fact that the product was unknown to almost all of the participants in the group, despite being sold in a major supermarket chain, demonstrates how hard it is to get a new product noticed in a highly crowded space. Also, because people do not have much trust in claims that appear on packages, and because of the weakness of regulatory enforcement as in the case of the salt iodisation example discussed above, they are reluctant to try new products that are unknown to them, and are more likely to purchase a known product.

Developing new products, and getting them approved, is time consuming and costly. When Finer Foods first introduced Ceresoya, it took the company two years to get the product approved by the FDA. In addition to taking a long time, the process is also costly because many of the tests required by the FDA cannot be done in Ghana. The company has been encouraged by others, such as the WFP, to develop a range of products that meet the nutrient needs of specific populations, such as children aged 6–24 months, but this would require a new approval by the FDA.

6.3 Group C: The Purchase for Progress initiative

Through the Purchase for Progress initiative (P4P), the WFP uses its purchasing power to support the sustainable development of food security, by improving the lives of smallholder farmers. P4P aims to increase farmer productivity through practical training programmes and through helping farmers to access new markets, including the WFP's own food-assistance programmes being implemented in-country. Building on significant investments by the Government of Ghana and other stakeholders in agriculture, P4P and its partners work to improve the lives of 1,524 maize, rice and cowpea smallholder farmers in Ejura Sekyeredumasi in the Ashanti Region and in Tamale Metropolis, Sagnarigu, Tolon and Kumbungu Districts in the Northern Region.

Key activities

- Under the P4P initiative, the WFP and other partners teamed up and provided capacity-development practical training programmes and equipment (in a cost-sharing manner) to the targeted smallholder/low-income farmers and their farmers' organisations (FOs). A variety of areas was covered, including productivity enhancement technology (shown through demonstration farms and radio broadcasting), improving market access (by negotiating with formal and informal buyers), mitigation of post-harvest losses (through the use of rice threshers, tarpaulins, community warehouse storage facilities, etc.).
- The targeted low-income/smallholder farmers (SHFs) and their FOs who join the training are helped to boost their farming business by improving productivity and the quality of their products, mitigating post-harvest losses, and getting better access to markets.
- Supply-side partners include the Ministry of Food and Agriculture (MoFA) as well as other development projects and agencies that play key roles in developing the capacity of the targeted SHFs and FOs to improve productivity and market access.

Key outcomes of the project

- Outcomes include behaviour changes on the part of farmers to adopt good agricultural practices to improve yields and to embark on collective sales to WFP and to one of the largest processors in Ghana, Premium Foods Ltd (50 tonnes of white

- maize), as well as to 15 school caterers (13 tonnes of mixed food commodities such as rice, beans and maize) under the Home-Grown School Feeding Programme.
- In addition, at least one FO started buying fertiliser on a bulk/group procurement basis and the secretary of an FO applied for a matching grant from a donor-funded project to purchase a maize sheller.
 - The work of P4P on purchasing maize from smallholder farmers using a standard measuring scale had enabled farmers to benefit from using a standardised 110kg bag instead of the old 'bush weight' system (in which quantities varied from 150kg to 170kg).

Indicators to show success

- annual per capita increase in marketable surplus of maize and beans sold through FOs by members (disaggregated by gender and commodity type);
- downward trend in percentage of smallholder/low-income FOs' contracts rejected for not meeting WFP procurement standards;
- 30 per cent of targeted small and medium traders and smallholder/low-income FOs having developed the capacity to supply WFP with maize and beans through 'soft' tendering (in which some of the contract requirements are modified);
- declining trend in rates of smallholder FOs defaulting on WFP contracts;
- number of associations trained in marketing capacities;
- number of individual smallholder farmers trained in marketing capacities;
- percentage increase (from baseline) in the volume of commodities purchased by WFP from smallholder/low-income FOs;
- percentage increase in annual agricultural income of smallholder farmers from sale of maize and beans;
- number of contracts issued (volume of commodities per contract, type of supplier);
- number of signed agreements with supply-side partners.

Key challenges identified through the mapping

Long-term sustainability of the project. What will happen when the WFP leaves? How will the project and programme be sustained in the longer term? Who will be able to fill the gap for providing farmers with capacity-building and markets? Once WFP leaves, how will farmers have access to the market? The current project aims to increase production, but if the WFP no longer purchases the increased output, how or where will the products be sold? Who will take on the role of connecting farmers to markets? One possible solution proposed was for major stakeholders (those purchasing large amounts of agricultural products) to take on the role currently filled by WFP, which would ensure that they were buying high-quality products. However, actually setting up these links could be challenging.

Focusing on bio-fortification as a way of extending the reach of the programme. The project has had the most success in producing maize, which can be produced at a cost and quality acceptable to the WFP. The two other crops that were being promoted through the programme, beans and rice, cannot be purchased by the WFP because it is cheaper to import these commodities, even taking into account shipping costs. Although the programme's primary aim is to increase farmer income, it might be possible to add to this a focus on nutrition, by encouraging the growing of more nutritious crops such as yellow maize, especially given the fact that maize has been the most successful product, or orange-fleshed sweet potatoes. Since the WFP aims to promote increased agricultural output, why not do this for more nutrient-dense crops?

Government policy could play a role, in mainstreaming nutrition, promoting uptake of bio-fortified foods and providing subsidised inputs. If the programme were to focus more on encouraging farmers to grow nutritious products, then there would be a significant role for

government policies to encourage consumption of these foods. While it is easier to encourage consumption of known foods, there are examples of products that have been introduced and become very popular through marketing efforts: for example, the Indonesian brand of instant noodles, Indomie, which are now widely consumed throughout Ghana despite being a new food.

Need for a better evidence base on how and when programmes that aim to increase agricultural outputs will have the greatest impact on nutrition. There are numerous pathways through which agricultural interventions are thought to affect nutrition, although not necessarily in a straightforward way. These include increasing the amount of food that is available to be consumed at the household level, increasing farmers' incomes so they have sufficient cash available for food as well as non-food purchases, and women's empowerment, which will have an impact on income, caring practices and women's energy expenditure. In addition, there is a recognised need for greater research into how agricultural programmes can be designed to have the greatest nutritional impact (Ruel and Alderman 2013). Discussions raised the point that although P4P is not designed to have an explicit nutrition outcome at present, it could be designed more effectively to have a nutrition impact in the future.

6.4 Group D: Ghana Nutrition Improvement Project

The Ghana Nutrition Improvement Project is run by Ajinomoto, a large Japanese food company, and seeks to improve the nutritional status of children aged between six months and two years. In addition, the project aims to create an opportunity for low-income women to earn additional income. Ajinomoto, working in partnership with government, the private sector and NGOs, aims to deliver a nutritional supplement called KOKO Plus, a home fortification product containing protein, amino acids and micronutrients, which can be added to complementary foods at home. The project aims to reach 200,000 children aged 6–24 months by 2020.



KoKo Plus. Photographer: © Isaac Amini (2015).

Ajinomoto launched the Ghana Nutrition Improvement Project in 2009 in cooperation with the University of Ghana (UG), the International Nutrition Foundation (INF), the Government of Ghana, other international NGOs and local food manufacturers. The project is funded by USAID and the Japanese International Cooperation Agency (JICA).

The project's activities are implemented by a range of partners spanning government, the private sector – including both national and multinational companies – and academic institutions. The focus of the group discussion was around the product distribution trial.

- **Nutrition efficacy study.** The project includes a single blinded, randomised control trial of the KoKo Plus 'Trial for Reducing Undernutrition Through Modified Feeding' (TRIUMP) currently being conducted in the Central Region of Ghana. The trial will seek to examine the impact of KoKo Plus on growth, micronutrient status and development outcomes of children aged 6–18 months. The trial compared four groups: (1) receives KoKo Plus and nutrition education, (2) receives a micronutrient supplement (which does not contain additional amino acids or fats) and nutrition education, (3) receives nutrition education but no supplements and (4) receives routine care as provided by the Ghana Health Service (Ghosh *et al.* 2014). The results of this trial will be available soon.

- **Product distribution study.** Two different distribution methods are being trialled in an effort to understand which model is more effective at reaching poor mothers in rural areas:
 1. The first method, being trialled in the Northern Region, uses platforms developed by CARE international Village Savings and Loan Associations (VSLAs), which provide vulnerable communities with self-managed savings and loan schemes and access to formal financial institutions. To sell KoKo Plus, village-based entrepreneurs (VBEs) who are members of the VSLA are recruited and trained to sell the product, along the lines of the model used to market Avon cosmetics. CARE Ghana has also led demand-generation activities including community tastings, nutrition education and village theatre as well as more traditional marketing such as billboards (Ghosh *et al.* 2014).
 2. The second distribution method is being trialled in three districts in the Eastern Region by Exp Social Marketing Foundation (ESM) using the traditional micro-enterprise route and targeted demand creation. ESM conducted significant formative research to understand the best demand-creation routes and it decided to run soap operas about the product on community radio, develop billboards in connection with the radio shows, and run promotions from a mobile van and cooking demonstrations at markets (Ghosh *et al.* 2014).

The results of the evaluation, which was conducted using cross-sectional household-level surveys, is shown in Table 6.2. The traditional marketing delivery model results showed that social marketing was very successful in spreading the message, but that the product was used only on a discretionary basis. The community-based marketing, using mothers selling products face-to-face, was much more effective at encouraging regular use of KoKo Plus. Therefore, in the future, further work will be needed on creating sustained demand. The community-based model piloted in the north demonstrated success in achieving high coverage, but scalability may prove to be challenging, owing to the resource-intensive nature of this type of marketing.

Table 6.2 Results of the distribution trial

	Community base (Northern Region by CARE)	Social marketing (Eastern Region by ESM)
Message coverage Have you ever heard of KKP?	99%	89%
Contact coverage Have you ever used KKP?	84%	53%
Effective coverage Do you continuously use KKP?	62%	10%

Note: ESM is a social marketing company originally from South Africa.
Source: Ghana Nutrition Improvement Project presenter.

Key challenges identified through the mapping

Cost of sourcing packaging materials and pre-mix. It is not possible to get good-quality, nutrient-preserving packaging or the micronutrient pre-mix required for making KoKo Plus in Ghana, and importing these is expensive because of the large amount of duty charged by the government. Could the Ministry of Trade and Industry be persuaded to reduce the amount of duty charged on these inputs, to enable KoKo Plus to be produced in a more affordable and cost-effective way? Also, it would be very useful to engage with other key private sector actors, not just food companies, but also those that produce other necessary inputs such as packaging materials.

Promotion: identifying a cost-effective mode of promotion. Two types of marketing are currently practised: face-to-face marketing in the north, using mothers to promote the product, and traditional social marketing in the Eastern Region. The face-to-face marketing is much more effective in terms of encouraging regular use of the product; however, it is expensive and there are questions about both the sustainability and the scalability of the approach, which is currently being implemented by CARE with donor support.

Building effective partnerships between researchers, international donors, NGOs and the private sector is essential. The project has faced some strong criticism from some actors, including the media, who have accused the project of trying to use partnerships with Ghanaian companies as a way to get genetically modified foods into people's diets (genetically modified foods are currently highly controversial in Ghana). However, those working on the project feel that the partnerships have been essential. Partnering with key NGOs, which have a strong reputation in the implementation areas, and which people trust, has significantly increased the credibility of the product. Having strong links with the University of Ghana allows for the programme to be effectively evaluated and to be added to the evidence base on public-private partnerships.

7 Key lessons from the group work



Group prioritisation of key issues. *Photographer: © Isaac Amini (2015).*

After each group had presented their priorities for action, participants held a discussion to decide which issues were the most critical. They looked at those that featured in more than one case study, and at those that absolutely had to be addressed if business and markets were to make a meaningful contribution to nutrition. The group then voted (each person was allowed three votes) and came up with the following, listed in order of the number of votes received:

1. **The need for promotion and creating demand for nutritious products through various channels for different groups and sensitisation about nutrition along the value chain, not just with the end consumers.** The aim must be to reach a point where consumers are demanding more nutritious products, but this needs to be done by using multiple channels in terms of promotion. Awareness of nutritional issues must be created all along the value chain including, for example, with the producers of packaging materials. At present, high-quality packaging materials for preserving nutrients used for products such as KoKo Plus are not available on the Ghanaian market and must be imported, adding to costs.
2. **Reaching the most vulnerable and poorest segments of the population and developing an effective, sustainable and scalable way to do this.** One of the key problems about market and private sector efforts to tackle undernutrition is that the majority of the companies concerned focus on selling premium products to wealthier consumers. Projects that focus on the poorest use non-profit distribution channels, and this raises issues of long-term sustainability. Working more effectively with SMEs, which supply a large amount of the foods consumed by the poor, was suggested as a key next step.

3. **Sustainability cuts across all the projects.** For the WFP and KoKo Plus projects, which are donor-funded, sustainability is crucial, and there are important questions about how the project will continue to run when donor funding stops. Even for the medium-sized company, Finer Foods, its most reliable client is the Catholic Secretariat, which uses money from UNHCR to purchase food that is distributed to refugee camps in the north. While acknowledging the need to diversify its distribution models to ensure long-term sustainability, it is aware that there are certain difficulties that do not arise with the non-profit distribution model; for example, the fact that most distributors purchase on credit, meaning that Finer Foods is not paid for two months, can cause cash flow problems. Additionally, using market-based solutions implies a significant investment in marketing, which requires capital that the company is unable to access.

In addition to the three priority areas identified above, a few other cross-cutting issues were also identified but received fewer votes:

4. **Foster stakeholder partnerships and collaboration, coordination and cooperation.** The former SUN focal point for Ghana identified the need to ensure that partnerships are being developed and there is an opportunity for people to come together in a shared space to better coordinate and collaborate around nutrition. This is especially true for engagement with the private sector, which is not often included in discussions with government and other stakeholders around nutrition.
5. **Regulations and enforcement.** Enforcement of regulations concerning mandatory fortification is a major challenge for enforcement agencies, especially in the case of SMEs and micro-enterprises. There was some discussion over whether a carrot or a stick approach would be the more effective, and the sense was that there was a need for both. One problem is that the fines for large companies found to be in violation of mandatory fortification guidelines are too small to affect a large company's bottom line, meaning that companies are happy to just pay the small fine, if necessary.
6. **Issue of cost.** The more that the private sector gets involved in nutrition, the more we will hear about added costs, including the cost of pre-mix and the additional cost of value addition for nutrition purposes; this is where government must come in. One key challenge is that many inputs must be imported, such as micronutrient pre-mixes, which are subject to high import duties. Participants wondered whether it would be possible to reduce the import duties paid on key inputs such as fortificant mixes, to reduce overall costs?

Key area identified for future research

Finding ways to effectively engage with SMEs. The group recognised that the poor and base-of-the-pyramid consumers tend to purchase most of their foods from SMEs; however, these are the companies that are hardest to regulate. What would be the most effective ways of encouraging SMEs to carry out both voluntary and mandatory fortification?

8 Next steps

The second day of the workshop sought to share the main findings from the first day with a larger audience and, critically, to hear from key experts from government, the UN, civil society and business about the potential for moving the agenda forward.



Panel discussing the next steps for progressing the involvement of the private sector in nutrition. *Photographer:* © Isaac Amini (2015).

Panellists, from left to right: **Dr Richmond Aryeetey**, Chair of the panel; **Mr Emmanuel Quaye**, formerly of GAIN; **Dr Kate Quarshie**, Ghana Health Service; **Mr Kazuyuki Fujiwara**, World Food Programme; **Mr Fidelsi Avogo** Ghana Scaling Up Nutrition Civil Society Alliance; and **Mr Eric Ampadu**, Fruit Processors Association.

The day started with an overview of the changing landscape of nutrition and private sector involvement in nutrition, presented by Mr Quaye, who had previously worked for GAIN in Ghana. Mr Quaye is currently working with the Food and Beverage Association of Ghana.

8.1 The changing landscape of private sector involvement in nutrition

Twenty years ago it was only development partners that were involved in nutrition in Ghana. In the last 5–10 years we have seen the rise of public–private partnerships (PPPs). Now we are seeing the private sector doing their own thing with nutrition and government does not know what is going on, creating challenges for government to maintain an overview of what is happening in terms of the nutrition landscape. While this is largely a positive development, it can create some confusion and adds complexity.

The global nutrition landscape has changed a great deal over the last five years as well, influenced by the growing evidence base on high-impact nutrition interventions including the 2008 and 2013 *Lancet* nutrition series. There has also been an increased level of political commitment to nutrition, including at high-level political events such as the Nutrition for Growth event in 2013 where donors, countries and many companies all made financial and

policy commitments to nutrition. Now that Ghana is a middle-income country, donors are pulling out or are phasing out their involvement, and it's becoming increasingly difficult to attract donor funding for nutrition and necessary to look at other funding models.

In Ghana the SUN-Business Network is still being established. It is hard to get the private sector to commit to nutrition, and a company always asks, what is in it for us? We are already selling our products; if we incur more costs, will we also make more money? It is important to think about how nutrition is pitched to the private sector in order to persuade them to engage more fully in nutrition programmes.

Globally, figures for undernutrition are improving. Southeast Asia as a region met Millennium Development Goal 1 of reducing underweight and hunger. Now, the majority of undernourished people are in sub-Saharan Africa and South Asia. Nutrition indicators in Ghana are much better than for most of West Africa, but the country could be doing better; 1.2 million of its people are undernourished and progress is plateauing.

In Ghana, one in five children is stunted, 13 per cent of children are underweight and children's nutritional status is actually declining in urban areas. In rural areas, rates of underweight are declining, but not fast enough. Also, it is important to keep in mind the double burden of malnutrition, which is becoming a challenge in Ghana. There is a need to think about how to engage with the food industry around the double burden as well; these conversations will always be antagonistic in nature, but it is important to have them anyway.

Technology has also changed the landscape, making it much easier than it was ten years ago to collect nutrition data, carry out nutrition surveillance and conduct surveys.

There are scalable solutions to many of the undernutrition problems – in Ghana there are laws requiring fortification of vegetable oil and wheat flour, but are they working? Anaemia rates in children have increased despite the fact that wheat flour must be fortified with iron. Are the laws around mandatory fortification being monitored well enough to be effective? Are there other products that perhaps should be fortified? In South America they are fortifying sugar – but some people question whether this is good idea, given the problems with sugar consumption. Others argue that people will consume this food whether or not it is fortified, so it is preferable to make it more nutritious, but some say if you are promoting a food because it is fortified people will eat more of it. Rice is another potential vehicle for fortification, given the increased rates of rice consumption. Another option that could be explored is bio-fortification. Why is biofortified maize not being championed?

There is evidence that PPPs work – the food fortification programme still works because of the partnership between government and the private sector. Generally, the private sector will not act unless prompted (there are exceptions).

Government must provide structures for leadership and ensure that the private sector is included in such structures. The government must also provide an enabling environment. Attracting the right financing from external and internal sources is needed to build and sustain political commitment to nutrition. Business must be involved and willing to participate in decision-making activities with government. Currently, the government does not have a budget line for nutrition. The private sector must find some business models for nutrition or support government nutrition programmes.

8.2 Key points from the discussion

How do we address the growing challenge of non-communicable diseases?

The Ghana Health Service's representative highlighted the growing challenge posed by non-communicable diseases (NCDs) and how we need to be considering this as part of the challenge of addressing undernutrition, given the links between stunting and increased risk of NCDs later in life. We also need to bring industry to the table to talk about industry developing products that are unhealthy and how the government should be regulating the way these products are labelled.

How can we improve how SUN functions in Ghana?

The SUN Civil Society Alliance feels that SUN is a good platform, but has not been effective in bringing people together to discuss a common agenda. The challenge is how to get everyone on board. How do we get SUN working? What is the missing ingredient?

The Ghana Health Service's view is that the missing ingredient is implementation, in terms of translating high-level commitments articulated by SUN into improvements on the ground. There is a need to move beyond the SUN-level strategic thinking and planning and strengthen programme implementation.

What will you do to ensure long-term sustainability?

The World Food Programme's representative spoke about how the WFP has been supporting the public sector in terms of ensuring project sustainability, but he said it can also support the private sector to develop better inputs and can work on creating demand from end users through social behaviour change communication.

What lessons can we learn from food fortification?

The reason that food fortification is working, despite some challenges, is that the National Fortification Alliance brought government and the private sector together into a shared space, and risks were considered by all stakeholders, at the very outset. Everyone was there – not just government and the private sector but also civil society. We can learn from this example and look at how we can build from this model to improve implementation of SUN's higher-level strategic ideas with bodies such as the National Fortification Alliance, to discuss project implementation.

How do you build consumer trust and demand for nutritious foods?

Some SMEs are doing things around voluntary fortification, but there is a cultural perception that anything foreign is better than anything local. How are we able to work with SMEs, given this perception?

How are new regulations developed and enforced?

We have regulations for mandatory fortification of wheat flour and vegetable oil. The challenge is how to develop new standards. We cannot stop products from being produced, but we need legislation in place, the Food and Drug Authority can only regulate on legislation that exists. We need new legislation to establish what an energy drink is, what a fruit juice is, in terms of what the product must contain to be able to claim it is a certain type of product. The FDA can only look at microbial load and harmful chemicals, and certify that these are not present; it does not assess the nutrient value. In Ghana, products cannot be marketed as 'nutritious'. You can say something is high in a certain micronutrient but there is no legislation around what a 'nutritious' product is and what requirements a product must meet in order to qualify. New regulations can only be developed by legislation, and this can only be initiated by a ministry.

There are also critical challenges around monitoring, which is not being done adequately. Flour that is supposed to be enriched with orange-fleshed sweet potato (OFSP) is white and we can see that the OFSP flour has not been added. Getting the monitoring right is essential.

The FDA, like all government bodies in Ghana, does not have the necessary resources to be able to fully monitor all foods on the market. It has a mandate to carry out monitoring and surveillance, but needs greater capacity.

How can we advocate for mandatory fortification of complementary foods? Is this something we should be doing?

Civil society can carry out advocacy around this issue, but it is government that needs to actually move the issue forward. However, given that most people make complementary foods at home it is not certain how effective this strategy would be.

The Ghana Health Service representative reminded people that fortification of complementary foods was part of the original aims of the National Fortification Alliance. However, this agenda has not been progressed because there are other, perhaps more pressing, issues. Given that, as already mentioned, most people serve homemade complementary foods, there are questions as to how effective the mandatory approach would be. The WFP looked into home fortification as a potential strategy, but there were a number of challenges to the effectiveness of this approach.

Is it officially known who is delivering nutrition to the population?

In the north a mapping was conducted to look at all players involved in developing nutritious foods, but the Ghana Health Service is unaware of any similar mapping done in other parts of the country.

Additionally, there are challenges around regulating the informal sector. Consumers should play a role – if they don't like a product they will not buy it again.

Can government support business and build capacity?

It is often assumed that the government is able to do everything, but it cannot, and we should not try to move back to the time when we expected it to do everything. There are many other forms of support available to the private sector including research centres that incubate private sector programmes. The government also supports the private sector in other ways, such as the provision of agricultural extension services.

The government also needs to play a key role in managing conflicts of interest between private sector and the public health concerns and ensure that these are managed correctly.

8.3 Key issues

From the discussion, the group identified the following as key priorities:

- addressing issues around legislation and enforcement, especially monitoring and accountability;
- collaboration across government and SMEs, including the management of conflicts of interest;
- addressing some of the gaps between SUN (strategic, high-level) aims and objectives and the actual implementation of nutrition projects and programmes on the ground;
- sustainability of interventions, projects and programmes to improve nutrition in the long term;
- concerns, voiced by some participants, that in tropical countries like Ghana, with high levels of biodiversity, a more sustainable solution to addressing nutrition problems is to focus on the production and consumption of a wide variety of fruits and vegetables, instead of only on fortification.

8.4 From discussion to implementation

There was a clear sense from participants that, in addition to raising these issues, there is a need to ensure that we are capturing an action plan for how to move forward and ensure that key points raised here are really acted upon.

Potential ways of doing this proposed by the group included:

- The potential to establish a SUN Business Network in Ghana which could provide a forum for private sector and other key actors to come together and support 'collaboration, cooperation, coordination and partnerships' between private sector actors working on nutrition and government and other stakeholders.
- The National Fortification Alliance has been an effective way of bringing stakeholders together; however, sustainability is a challenge because it has been no one's responsibility to drive this initiative forward. Is there a possibility of building on this platform to ensure its longer-term sustainability?
- In the short term, would it be possible to have an online or virtual platform to bring people together to continue the discussions started over the past two days?

There was a clear sense from participants that it was time to move beyond discussing the challenges around the private sector's involvement in nutrition towards action to address some of these challenges. They were very clear that they wanted to take forward the discussions and hoped that those present at the workshop could support the development of some form of platform, such as an active SUN Business Network, or even a virtual platform in the short term to allow the momentum generated by the workshop to continue.

Annex A List of participants

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Annex B Impact pathway diagrams

Figure B.1 Universal Salt Iodisation (Group A)



Figure B.2 Finer Foods (Group B)



Figure B.3 World Food Programme Purchase for Progress (Group C)

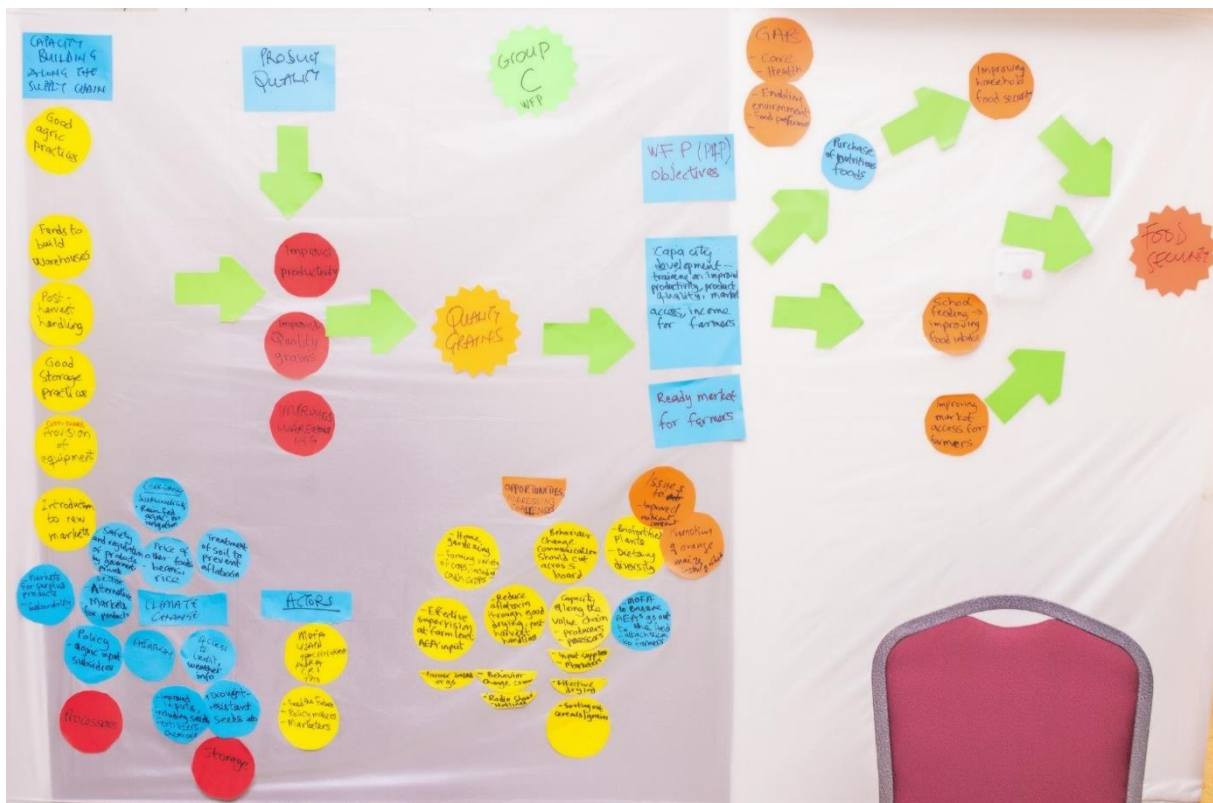
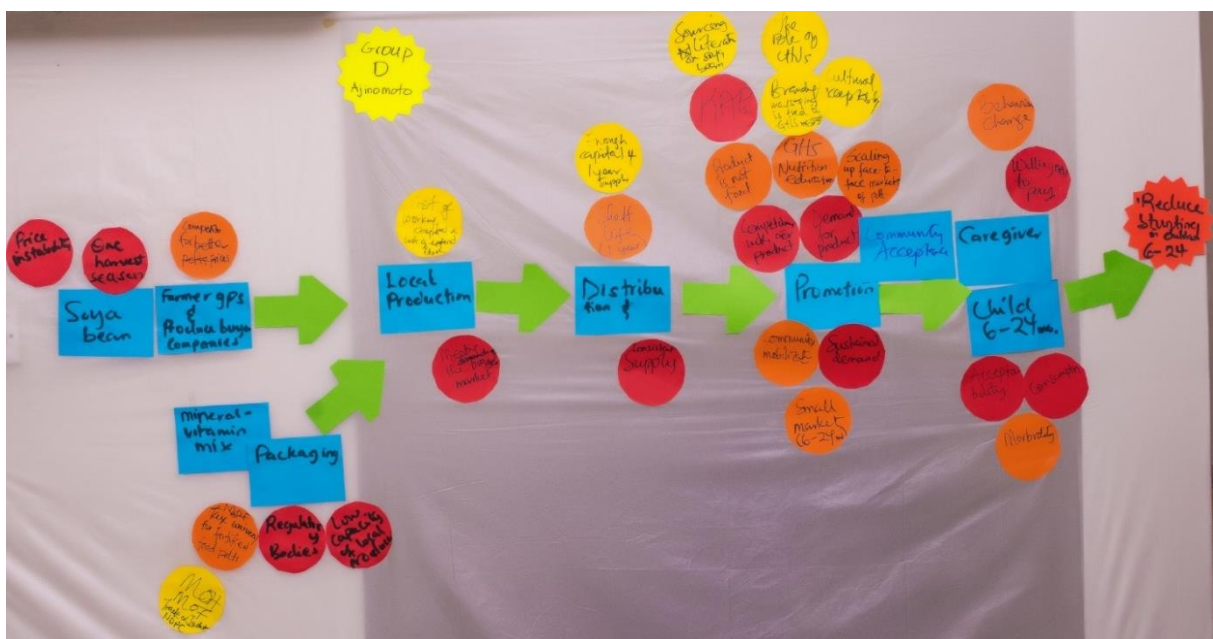


Figure B.4 The Ghana Nutrition Improvement Project (Group D)



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