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How Africa Can Build a Future Free from Hunger and Malnutrition



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## BENIN



CASE STUDY



Between 2000 and 2016, Benin made some progress in reducing levels of undernutrition. While stunting rates in the country fell from 39 percent in 2000 to 34 percent in 2016, wasting rates commendably decreased by half during the same period to five percent. The Global Hunger Index value also decreased from 38 to 23 during the same period (equivalent to a 39 percent change). Stronger multisectoral coordination systems and programs for child nutrition and feeding, fortification, and biofortification of millet have played a role in these improvements.

## INSTITUTIONAL REFORMS

The importance of institutional and high-level commitments to tackle malnutrition has been recognized since the beginning of the 1960s with the creation of the Food and Applied Nutrition Service (Service Dahoméen d'Alimentation et de Nutrition Appliquée) in 1962, which evolved into the Directorate of Food and Applied Nutrition (Direction de l'Alimentation et de la Nutrition Appliquée, DANA) in 1974. DANA is currently situated within the Ministry of Agriculture. It aims to implement and enforce the government's food security and nutrition policies and is responsible for food security and nutrition programming and surveillance. In 1994, the Mother and Child Health Directorate (Direction de la Santé de la Mere et de L'Enfant, DSME) was created within the Ministry of Health and includes a nutrition unit. This unit is tasked with reducing acute malnutrition and promoting exclusive breastfeeding for infants up to six months of age. In 2009, the government set up a National Council of Food and Nutrition (NCAN) attached to the President's office. The NCAN is a multisectoral and multistakeholder platform charged with strengthening policy making on nutrition. The Council includes members from Health, Agriculture, Industry and Finance Ministries, as well as from academia, civil society, municipalities, private sector, and nongovernmental organizations. It is responsible for ensuring the coordination of all actions related to food security and nutrition in Benin.<sup>1</sup>

## POLICY AND PROGRAMMATIC INTERVENTIONS

Benin's strong programmatic commitment to tackling malnutrition is demonstrated by its enrollment in the Scaling Up Nutrition movement in 2011. Between 2000 and 2016, many programs related to food security and nutrition were implemented within the health and agricultural sectors. The Ministry of Health made a commitment to develop and implement a Sectoral Program of Applied Nutrition between 2001 and 2005, aiming to improve the nutritional status of vulnerable groups including children, adolescents, and lactating women. In addition, several programs have been developed for the control of micronutrient deficiencies, including for the eradication of iron and vitamin A deficiencies, created in 2004. Furthermore, national legislation on food security and nutrition is comprehensive and includes laws on food fortification, regulation of marketing of breast-milk substitutes, and maternity leave. In 2009, a Strategic Plan for Food Security and Nutrition Development (*Plan Stratégique de Développement de l'Alimentation et de la Nutrition*, PSDAN), which laid out both nutrition-specific and nutrition-sensitive approaches, was adopted and implemented by several ministries, including the Ministries of Health and Agriculture.

The Plan aims to:

- improve the institutional development of the food and nutrition sector;
- guarantee everyone a satisfactory nutritional status through improved availability, access, and use of nutritious foods, particularly for vulnerable groups such as infants and children, adolescent girls, and pregnant and

lactating women; and

- monitor, evaluate, and disseminate actions conducive to scaling-up and sustainability.<sup>3</sup>

The PSDAN, which was adopted in 2009 is operationalized through a results-based Food Security and Nutrition Programme (Programme National d'Alimentation et de Nutrition axé sur les Résultats, PANAR) and contains five sub-programs that integrate nutrition-specific interventions, primarily targeted at the first 1,000 days. Under the framework of the PANAR, a four-year Community Nutrition Project (PNC) was launched in 2012 to document the lessons learned and to provide education and communication on best nutrition practices. The PNC is now incorporated into the larger Food, Health and Nutrition Multi-sectorial Project (2014–2019). In communities where chronic child malnutrition rates are particularly high, elderly women have been mobilized to improve the healthy and nutritious upbringing of young children and to educate village communities about the importance of proper nutrition. More than 12,000 women have been trained to develop a better understanding of the nutritional value of local foods and the role of hygienic food preparation. Furthermore, approximately 18,000 mothers received training on the benefits of exclusive breastfeeding. As a result, more than 5,000 children aged 0–59 months who were previously suffering from moderate malnutrition and 222 children who were suffering from acute malnutrition showed signs of improved nutrition.<sup>4</sup>

Since 2009, the government has also implemented a food fortification program aimed at sustainably reducing malnutrition and infant and child mortality caused by micronutrient deficiencies. The Beninese Fortification Commission was set up by ministerial decree, which defined standards aligned with regional and international standards for the fortification of oils with vitamin A and flours with iron, folic acid, B-group vitamins, and zinc. Local companies are engaged in the process of vitamin-A fortification of oil and others have committed to fortifying the wheat flour they produce with iron, zinc, folic acid, and B-group vitamins.<sup>5</sup> The goal of fortification is to cover at least 30 percent of the daily vitamin A needs of the population through the consumption of fortified foods..

Biofortification is another component of government efforts to combat malnutrition in Benin by increasing the nutrient content of foods. An assessment of the potential of iron-biofortified millet to improve the intake of iron among women with marginal iron status was carried out in Natitingou, Northern Benin, in 2013. The study reported that children 12–36 months of age, who consumed an average of 32 g of iron-biofortified millet<sup>6</sup> per day, could satisfy 46 percent of the 0.5 mg absorbed-iron required daily compared to only 13 percent for those who consumed regular-iron millet. The results showed that total iron absorption by young women from iron-biofortified pearl millet composite meals was double that from regular millet meals, indicating that iron-biofortified millet has potential to overcome iron deficiency in largely millet-consuming populations.<sup>7</sup>

There is evidence to suggest that the interventions and programs implemented by the government of Benin have contributed to an overall improvement of children's nutritional status. The effectiveness of education and communication on best nutrition practices, food fortification, and biofortification show that it is possible to tackle malnutrition in Benin. This progress can be accelerated through government commitment to scale up interventions in the agriculture and health sectors, which have proven to be effective so far.

Preferred citation: Malabo Montpellier Panel (2017). Country case study: Benin. Dakar. December 2017.

<sup>1</sup> Agbota, A., Mahy, L. and D. Hessou (J.D., 2009), Plan Stratégique De Développement De L'alimentation Et De La Nutrition (Partie A) Diagnostic De La Situation Nutritionnelle [https://extra-net.who.int/nutrition/gina/sites/default/files/BEN%202009%20Psdan\\_Panar\\_Part%20A\\_0.pdf](https://extra-net.who.int/nutrition/gina/sites/default/files/BEN%202009%20Psdan_Panar_Part%20A_0.pdf)

<sup>2</sup> UNICEF, 2012, Une étape nouvelle pour remplacer la nutrition au cœur du développement, accessed 13 november 2017, ., [https://www.unicef.org/benin/2509\\_6998.html](https://www.unicef.org/benin/2509_6998.html)

<sup>3</sup> Secrétariat Permanent du NCAN (Conseil National de l'Alimentation et de la Nutrition), 2014, Synthèse Projet Multisectoriel de l'Alimentation, de la Santé et de la Nutrition, [https://images.agri-profocus.nl/upload/post/Plaque\\_PMASN1454164751.pdf](https://images.agri-profocus.nl/upload/post/Plaque_PMASN1454164751.pdf)

<sup>4</sup> The World Bank, 2013, Au Bénin, les grands-mères mènent le combat contre la malnutrition, accessed 21 September 2017, <http://www.banquemondiale.org/fr/news/feature/2013/10/15/in-benin-grandmothers-lead-the-fight-against-malnutrition>

<sup>5</sup> UNICEF, 2009, Fortification des aliments : la situation au Bénin. [https://www.unicef.org/wcaro/wcaro\\_BEN\\_factsheet\\_fortification\\_dec2009.pdf](https://www.unicef.org/wcaro/wcaro_BEN_factsheet_fortification_dec2009.pdf)

<sup>6</sup> Cercamondi, C., Egli, I., Mitchikpe, E., Tossou, F., Zeder, C., Hounhouigan, J. and Hurrell, R., 2013, "Total iron absorption by young women from iron-biofortified pearl millet composite meals is double that from regular millet meals but less than that from post-harvest iron-fortified millet meals". *Journal of Nutrition* doi:10.3945/jn.113.176826

<sup>7</sup> Ibid.