West Africa Region Policy Brief

Closing inequality gaps: Prioritizing nutrition among women and adolescents in West Africa

The Challenge

The West Africa region is home to 348 million people, including 29 million children under the age of five, and 80 million women of reproductive age 15 to 49 years. Despite current efforts and progress, the population faces enormous challenges in fully realizing the optimal nutritional status required to develop and thrive.

In the region, more than 18 million women are anemic, and 6 million are obese. The situation is particularly difficult for children and women living in conditions of vulnerability and disadvantage, and even those relatively well-off face increasing health threats of obesity.

Under the Sustainable Development Goals (SDGs), all West African countries signed for effective food security, eradication of hunger, improvement of nutritional status and promotion of sustainable agriculture. Such aspiration cannot be achieved by 2030 unless stronger and accelerated actions are taken in prioritizing nutrition and addressing significant inequalities among children, adolescents, and women in each country and the region as a whole.

Malnutrition is a public health problem that is linked to a substantial increase in the risk of mortality and morbidity. According to the United Nations Population Division, 23% of the total population in the West African region comprises of women of reproductive age (15 - 49 years). The health and nutrition of adolescent girls and women are critical and a priority since they are linked with child health and survival. Healthier adolescents and adult women are more likely to have children with better nutritional status than those who are less healthy.

Measuring inequalities in nutrition

As a part of the Countdown to 2030 for Women’s, Children’s, and Adolescents’ Health, government nutritional analysts from the 15 ECOWAS countries conducted nutrition equity analyses using existing nationally representative data from the West Africa region. The analysis was conducted in collaboration with the West African Health Organization (WAHO), the African Population and Health Research Center (APHRC) and other experts. The data analyzed sub-regional variations in coverage and the equity of cost-effective nutrition interventions as well as nutritional status among children, adolescents, and women of reproductive age.

This brief describes inequalities in nutritional status between adolescents (aged 15-19 years) and adult women (aged 20-49 years). It proposes actions that may accelerate progress towards ensuring optimal nutritional status and food security among adolescent girls and adult women in the region, regardless of their age and where they live. The findings here provide policy-makers a reliable source of information and update knowledge about the status of malnutrition and disparities that exist among women.

Health and nutrition among adolescent girls and women in West Africa

A. Underweight

An underweight person is someone whose body weight is considered too low to be healthy. This is often the result of under-nutrition and can expose the individual to complication or infections leading to death.

1. Overall situation in West Africa

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<tr>
<td>16%</td>
<td>highest underweight prevalence in Senegal in 2010</td>
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<tr>
<td>8%</td>
<td>of women aged 15-49 years in West Africa Region were underweight 2010 - 2017</td>
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<tr>
<td>4%</td>
<td>lowest underweight prevalence in Ghana in 2014</td>
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2. Underweight prevalence among women aged 15-49 in West Africa

Underweight in women aged 15 - 49 years in the ECOWAS Region is 8.4%, with evidence showing significant disparities between countries. Countries with the lowest underweight prevalence are clustered together.

Legend:
- < 5%
- 5 -10%
- >10%

3. Urban vs. Rural Inequalities

There are marked disparities in the prevalence of underweight between women living in the capital or largest cities, other urban, and rural areas, with the rural areas being disadvantaged by 5.4 percentage points on average. However, there is no disparity between the capital cities and other urban areas.

Legend:
- capital/largest city
- other urban
- rural

4. Inequalities among women by age

There has been a gradual reduction in regional inequalities from 12 percentage points to 4 percentage points between 1993 and 2017. This is attributed to a steady decrease in underweight among adult women, whereas a slight increase in underweight is observed among adolescent girls.

Legend:
- Country Estimate Adolescent
- Country Estimate Adult
- Regional Multilevel Prediction Adolescent
- Regional Multilevel Prediction Adult

60% of pregnant women in West Africa have anemia

Iron and folic acid supplementation is received by 36% of women on average during their last pregnancy

More than 18 million women aged 15-49 have anemia
B. Anemia

Anemia is a condition in which a person lacks enough healthy red blood cells to carry adequate oxygen to the body tissues. Anemia is often due to iron deficiency and can result in cognitive impairment in adolescents, low birth weight and perinatal mortality.

1. Overall situation in West Africa

Prevalence of Anemia in West Africa

More than half of the population of women in West Africa has anemia, with disparities observed between countries in the 2010 - 2017 period.

- 42.4% in Ghana in 2014
- 60.3% in the Gambia in 2013

Coverage of iron/folic acid supplementation during pregnancy

Iron/Folic acid supplementation is available in all countries, yet disparities in access can be seen across countries in the region.

2. Trends in regional inequality of anemia among women by wealth

Prevalence of anemia gradually decreases between 2001 and 2017 among both poor and rich people. Additionally, inequalities remained constant (8 percentage points) over the period, with no significant differences between the two groups.

3. Prevalence of anemia during pregnancy and coverage of IFA supplementation

Anemia during pregnancy is highly prevalent at 58.2% on average in the region, while the coverage of iron/folic acid supplementation remains very low at 36.1%. Senegal depicts a desirable scenario where the need for IFA supplementation coverage is being met. There are some significant data gaps, with countries such as Nigeria and Liberia lacking recent data on anemia and iron/folic acid supplementation.
Conclusion

Malnutrition among adolescent girls and adult women in West Africa is still rife even though multiple programs have been established to improve nutritional outcomes. There is an urgent need to address malnutrition in all its forms – under nutrition and obesity. Furthermore, accelerated efforts are required to close the evident inequality gaps to ensure that nobody is left behind.

Governments must renew their commitments and development partners should develop broader programs and interventions for adolescent girls and women if the region is to meet its nutrition targets by 2030.

Recommendations

- There is an urgent need to focus investment particularly in the poorest performing countries. Increased investment should not, however, mean shifting resources from better-performing countries. This recommendation is in alignment with WAHO’s multisectoral nutrition plan.
- Governments should develop guidelines for the screening and management of malnutrition in adolescent girls and adult women. Furthermore, countries need to make adolescent and women’s nutrition a top national priority to reduce incidences of malnutrition.
- Countries should increase efforts to make available recent data, especially from household surveys, to allow useful measurement and monitoring on nutrition intervention coverage and nutrition status indicators adolescent and adult women for countries with missing data.
- Stakeholders should support further studies of the causes of anemia.

About the Countdown 2030 Initiative

The Countdown 2030 Initiative for Women’s, Children’s and Adolescent Health is a global initiative that aims to improve the measurement and monitoring of health outcomes and to strengthen regional and national capacities in the production and use of scientific data.

In collaboration with the African Population and Health Research Center (APHRC) and the West African Health Organization (WAHO), the Initiative supported the establishment of a regional network of research and public health institutions and government agencies from 22 West and Central African countries to help them better monitor and analyze data and communicate research results on maternal, newborn, child and adolescent health and nutrition.

The Initiative calls for the accountability of governments and development partners, identifies knowledge gaps and proposes new actions for universal coverage of women’s, children’s and adolescents’ health.

It is expected that government authorities will use the research results to improve planning and increase resources for achieving national and global goals to reduce maternal, newborn, and child deaths.

For more information, visit http://countdown2030.org/.

Acknowledgements

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