



## Speaker Summary Note

**Session:** Learning from Country Case Studies

**Anna Lartey**

**Speaker:** Associate Professor, Department of Nutrition and Food Science, University of Ghana, and President-Elect, International Union of Nutritional Sciences (2009-2013), Ghana

**Title:** **Achieving the Millennium Development Goal 1 (MDG1) in Ghana:  
The role of agriculture**

Ghana will be the first country in Sub-Saharan Africa to achieve the MDG1 (Reducing by halve the proportion of people who suffer from extreme poverty and hunger). There are several factors contributing to the progress made by Ghana. The key among these is good governance and political stability. This is the bedrock of Ghana's progress. Agriculture, no doubt played a role, however it is difficult to tease out the proportional contribution of each factor to the overall progress. The policies and programs directly enhanced agricultural productivity, especially among poor rural households thus reducing poverty and food insecurity. Ghana's Poverty Reduction Strategy (GPRS) gave priority to the modernization of agriculture with strong emphasis on rural agricultural development. There was significant growth in Agriculture from 4% in 2000 to 6% in 2005. Nutrition specific programs such as national food fortification, promoting infant and Young Child Feeding Strategy, community based Nutrition and Food security programs directly impacted on child nutritional status. There were programs that directly impacted on poverty reduction. Ghana status as a Highly Indebted Poor Country (HIPC) in 2002 brought substantial debt relief as funds from HIPC were channeled into improving social amenities for the poor, National Health Insurance Scheme removed financial barriers to health care access, the Livelihood Empowerment Against Poverty (LEAP-2007) provided direct cash transfer to poor households; Free maternal health services encouraged women to deliver in health care facilities and to receive the needed health care to ensure safe pregnancy and delivery; the Government capitation grant made available funds available to cover all basic public school pupils (kindergarten to JSS). This fund can be accessed to improved facilities in the school. Despite the success of these programs wide disparities in poverty and hunger exist. For example, the Upper West region of Ghana reports 34% food insecure households against 1% in the Greater Accra region (the capital). The policies and strategic plans of the Ministries of Agriculture and Health do not reflect this integration. Each group has secured its territory and prevents the "encroachment" of other sectors. The link of Agriculture with nutrition and health must be seen as a continuum to be promoted to complement efforts being made to achieve the health related MDGs. Sector Ministries must re-examine their policies to encourage this integration where needed.