

60355

MALNUTRITION, AFRICA AND THE AFRICA BUREAU

David Eckerson  
AFR/TR/HN

## 1. Malnutrition in Africa

Malnutrition in Africa is increasing. See tables in annex for the nutritional state of the world today. In essence:

Africa has the highest child death rate in the world at 25/1000. The next highest world region has a rate of 18/1000. The mean for the world is 15/1000.

Africa ranks second in the world (Asia first) in terms of percent children below 80% weight/age.

The recent drought has exacerbated the nutritional state of Africa more than these figures reflect. In at least 8 countries (Chad, Ethiopia, Kenya, Mali, Mauritania, Mozambique, Niger and Sudan) levels of acute malnutrition in children under five in drought-affected regions are now greater than 10%. Ten million people are considered to be at risk of starvation.

(Data Source: Cornell University Nutritional Surveillance Program, April 1984; Interagency Task Force on African Hunger, May 1985)

TABLE 1. Prevalence of Child Malnutrition Estimated by WHO Region

WHO Region	Number of Developing Countries	Number of Children Aged 6-60 Months, 1980	Average Child Death Rate (deaths per 1000 per year)	Average kcals per person per day	Estimated Percentage of Children Below 80% Weight-For-Age			Estimated Number of Children Below 80% Weight-For-Age (millions)			Underweight Children in Region as Percent of Total (medium variant)
					Low	Medium	High	Low	Medium	High	
African	41	58	25	2183	24.1%	34.9%	45.7%	14	20	27	14%
Americas	26	55	6	2558	10.0%	21.0%	32.0%	5	12	18	8%
South-East Asia	8	160	16	2246	39.6%	51.9%	64.2%	63	83	102	59%
European	2	8	17	2531	15.5%	26.3%	37.1%	1	2	3	1%
Eastern Mediterranean	17	52	18	2444	22.0%	35.1%	48.2%	11	18	25	13%
Western Pacific	8	26	5	2317	12.0%	23.0%	34.0%	3	6	9	4%
World	102	359	15	2324	27.0%	39.3%	51.2%	97	141	148	100%

APPENDIX A. DATA SET FOR CROSS-NATIONAL COMPARISON

<u>Country</u>	<u>Year</u>	<u>% Children Below 80% Wt-For-Age</u>	<u>GNP, 1980 \$US (survey year)</u>	<u>Kcal/capita (2 yr avg around survey yr)</u>	<u>% Access to Safe Water (1975)</u>	<u>% Adult Women Illiterate (most recent survey)</u>	<u>IMR (1975-80)</u>	<u>Child Mortality Rate (c.1980)</u>
Bangladesh	1975	91.3	---	1789	3	87	140	19
Bolivia	1982	21.4	643	2086	38	49	138	23
Cameroon	1978	21.8	459	2451	26	76	114	25
Chile	1978	2.5	1302	2732	84	12	46	6
Colombia	1980	21.5	968	2529	64	20	59	8
Costa Rica	1978	18.7	1612	2630	77	12	29	3
Egypt	1978	21.9	691	2949	66	78	110	15
El Salvador	1978	24.8	703	2163	53	41	85	8
Guatemala	1977	49.6	---	2035	40	62	79	13
Haiti	1978	46.8	214	1882	14	82	121	21
India	1976	81.4	148	1993	33	81	129	15
India	1979	74.9	238	1998	33	81	129	15

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## APPENDIX A CONTINUED

Country	Year	% Children Below 80% Wt-For-Age	GNP, 1980 \$US (survey year)	Kcal/capita (2 yr avg around survey yr)	% Access to Safe water (1975)	% Adult Women Illiterate (most recent survey)	IMR (1975-80)	Child Mortality Rate (c. 1980)
Kenya	1982	24.3	312	2055	17	65	91	15
Lesotho	1976	22.0	255	2152	17	32	120	20
Liberia	1976	24.7	335	2347	20	91	160	16
Malawi	1981	31.0	201	2219	33	88	179	25
Nepal	1975	69.2		2025	9	95	156	25
Philippines	1978	38.0	518	2315	43	19	65	6
Sierra Leone	1978	31.9		2518	--	96	215	25
Sri Lanka	1976	59.1	212	2116	20	32	48	3
Sri Lanka	1980	53.6	254	2249	20	32	48	3
Togo	1977	24.2	303	2015	16	93	115	25
Trinidad & Tobago	1978	26.4	2288	2518	4	10	35	3
Yemen Arab Republic	1979	60.6		2272	4	100	170	41

FIGURE 8. Prevalence of Low Weight-For-Age - Africa

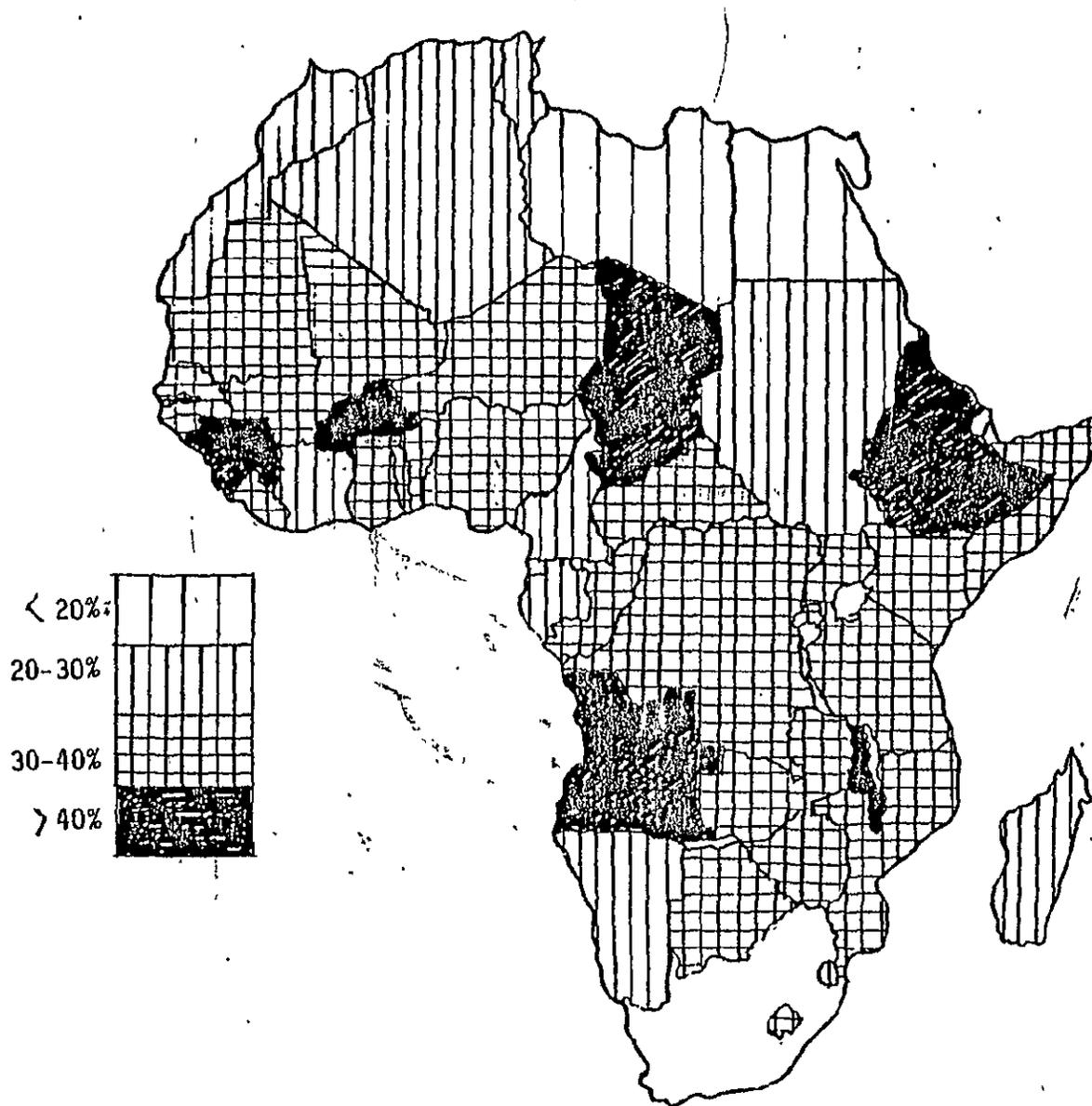


FIGURE 9. Prevalence of Low Weight-For-Age Asia

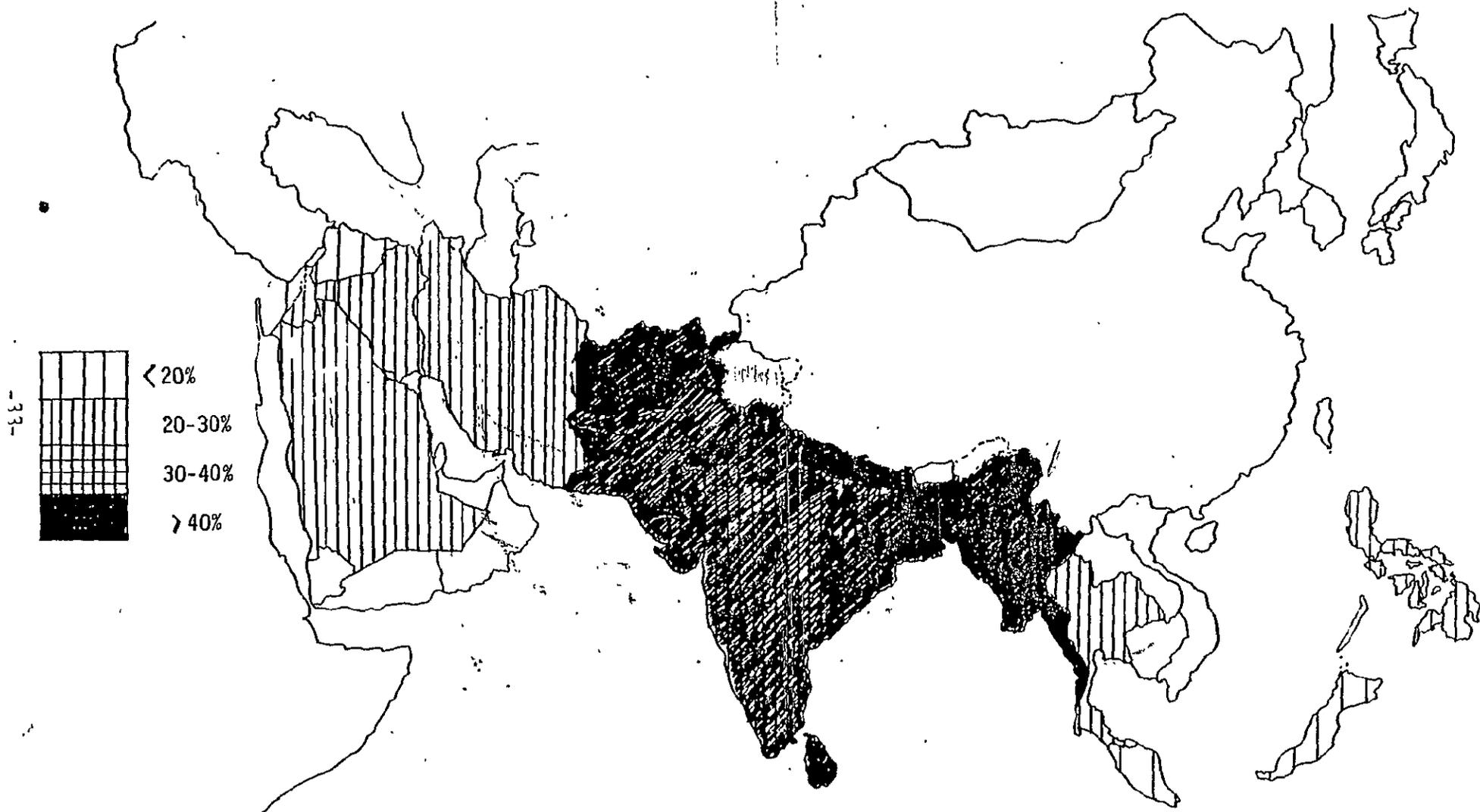


FIGURE 10. Prevalence of Low Weight-For-Age South America

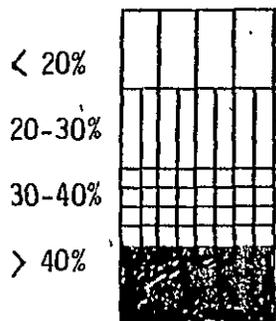
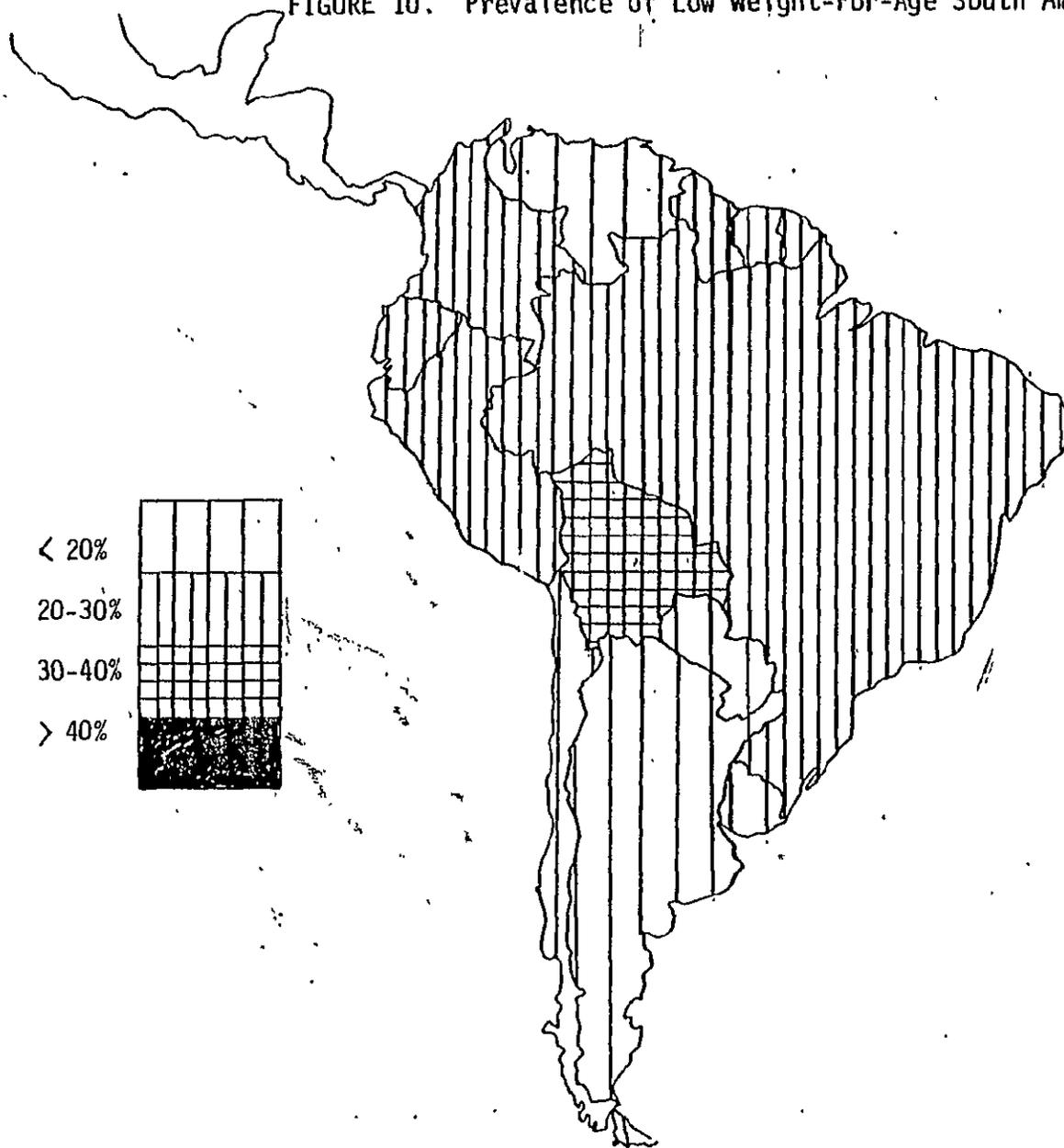
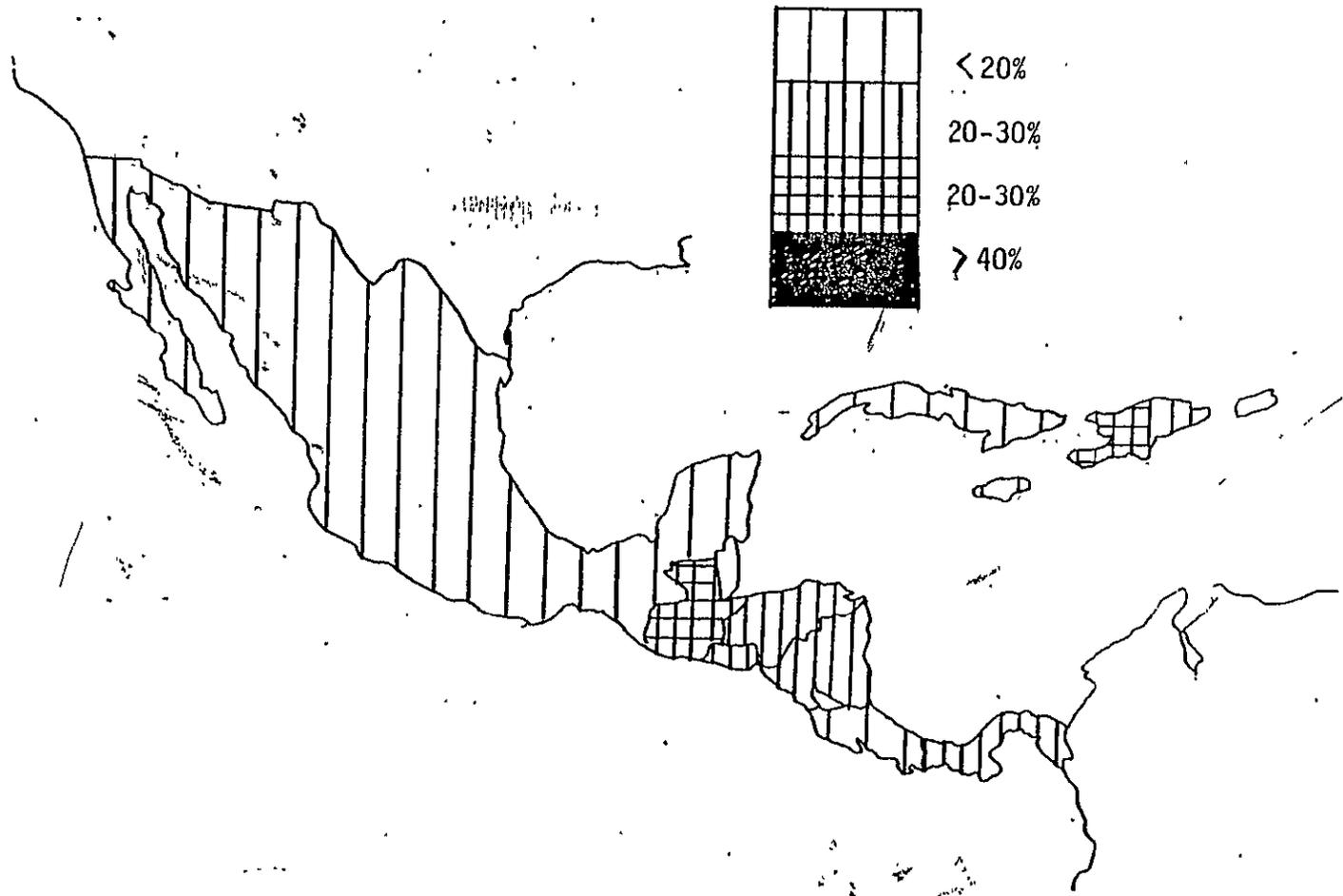


FIGURE 11. Prevalence of Low Weight-For-Age Central America



## 2. The Africa Bureau Nutrition Response

The Africa Bureau USAID nutrition response is essentially integrated within primary health care initiatives in Africa. There is one stand-alone nutrition improvement project in Zaire.

Major Africa Bureau health and nutrition initiatives are in 16 countries. They are concentrated in CCCD (Control of Childhood Communicable Diseases) and Primary Health Care. PHC projects have the most direct link to nutrition since most have nutrition components. (see attached list of AFR/TR/HN projects)

Primary Health Care countries: Somalia, Sudan, Zaire, Swaziland, Liberia, Senegal, Niger, Mauritania, Mali.

Total USAID PHC LOP investments: 75 million dollars

The nutrition advisor in AFR/TR/HN surveys this PHC portfolio, managing nutrition activities.

The nutrition advisor has sole responsibility for the Zaire Nutrition Improvement Project (6 million dollar LOP). The nutrition advisor also coordinates African nutritional activities associated with PVO's, PL-480, S&T/N, and S&T/H

A.I.D. FUNDED AFRICA HEALTH PROJECTS:

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COUNTRY	TITLE	PROJ. NO	BEG.	END	PACD	STATUS	APPR.	TOTAL COST	OTHER SOURCE
Benin	Onchocerciasis Control Phase II	6980399	74	85		O	HE	0	0
Benin	Comm. Fin. Alt. in PHC-Pahou Demom. (PRICDR)	9365920	83	85	06/26/85	O	HE	0	87
								SUBTOTAL	0 87
Botswana	Health Services Developaent	6330078	78	80	08/30/86	O	ES	4607	0
								SUBTOTAL	4607 0
Burundi	Family Health Proeotion	6950116	85	87		P	HE	1000	0
Burundi	Combatting Childhood Communicable Diseases	6980421	85	88		P	HE	0	0
								SUBTOTAL	1000 0
C. African Repub.	Public Health Training	6250510	71	73	03/07/76	C	HE	0	0
C. African Repub.	Duham Province Rural Health	6760002	77	80	09/30/79	C	HE	1473	0
C. African Repub.	Combatting Childhood Communicable Diseases	6980421	84	88		O	HE	0	0
C. African Repub.	Combatting Childhood Communicable Disease	6980421	84	90		P	HE	0	691
								SUBTOTAL	1473 691
Caeroon	Public Health Training	6250510	71	73	03/07/76	C	HE	0	0
Caeroon	University Center for Health Sciences	6250531	72	77	09/30/79	C	HE	5037	0
Caeroon	Practical Training in Health Education	6310009	77	82		C	HE	2040	0
Caeroon	Maternal and Child Health Support	63100XX	86	91		P	HE	4000	0
Caeroon	N. Caeroon Rural Health Services-OPG	6310201	75	82	12/31/82	C	HE	469	0
Caeroon	Strengthen Health Delivery System	6980398	77	85		O	HE	0	0
Caeroon	Health Constraints to Rural Production	6980408	83	87		O	HE	0	7353
Caeroon	Dental Health International-OPG	6980409	75	78		C	HE	0	0
								SUBTOTAL	11546 7353
Chad	Public Health Training	6250510	71	73	03/07/76	C	HE	0	0
Chad	Chad RR: Hlth Plan. Unit Restor. Activity	6770041	84	87		O	SH	2050	0
								SUBTOTAL	2050 0
Congo	Nutrition Education and Training-OPG	6790005	80	84	10/02/83	C	HE	227	0
Congo	Expanded Program of Immunization (AIP)	6980410	77	82	06/30/83	C	HE	0	500
Congo	Primary Health Care (AIP)-OPG	6980410	77	82	06/17/84	O	HE	0	50
Congo	Combatting Childhood Communicable Disease	6980421	84	88		O	HE	0	0
								SUBTOTAL	227 550
Djibouti	Primary Health Care Initiatives	6030018	85	89		P	ES	2000	0
Djibouti	Primary Health Care Initiatives	6030018	85	89		P	ES	2000	0
								SUBTOTAL	4000 0
Gabon	Public Health Training	6250510	71	73		C	HE	0	0
Gabon	Schweitzer Hospital Project-OPG	6250809	74	78		C	AS	1000	0
								SUBTOTAL	1000 0
Gambia	Program, Management and Review	6250929	85	85		O	SD	32	0
Gambia	Primary Health Care Training	9310070				O	HE	0	0
Gambia	Mass Media and Health Practices	9311918	78	85		O	HE	0	0
								SUBTOTAL	32 0
Ghana	Danfa Rural Health Family Planning	6410055	69	81	02/28/79	C	HE	6103	0
Ghana	Ghana-Mgmt of Rural Health Services	6410068	74	79	11/30/78	C	HE	2153	0
Ghana	Community Health Team Support	6410088	79	86	09/30/84	D	HE	3160	0

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COUNTRY	TITLE	PROJ. NO.	BEG.	END	PACD	STATUS APPR.	TOTAL COST	OTHER SOURCE
Ghana	Onchocerciasis Control Phase II	6980399	74	85		O HE	0	0
						SUBTOTAL	11416	0
Guinea	Guinea Integrated Eye Health-OPG	6750205	84	84		P HE	500	0
Guinea	Combatting Childhood Communicable Diseases	6980421	85	88		P HE	0	0
						SUBTOTAL	500	0
Ivory Coast	Onchocerciasis Control Phase II	6980399	74	85		O HE	0	0
Ivory Coast	Infl. of EPI on Svl. Model of Tgt. Chil. PRICOR	9365920	85	86	02/28/86	P HE	0	35
						SUBTOTAL	0	35
Kenya	Kenya Blindness Prevention-OPG	6150173	76	80	02/28/80	C HE	1214	0
Kenya	Kibwezi Primary Health Care-OPG	6150179	79	82	03/31/83	C HE	818	0
Kenya	Kitui Primary Health Care-OPG	6150185	79	83	03/31/83	C HE	413	0
Kenya	Kenya Health Planning and Information	6150187	79	84	01/31/86	O HE	7343	0
Kenya	Rural Blindness Prevention II-OPG	6150203	80	81	12/31/83	C HE	1870	0
Kenya	Family Planning Management Program-OPG	6150216	83	83	06/30/86	O HE	310	0
Kenya	Kitui Primary Health Care II-OPG	6150219	83	83	03/31/86	O HE	500	0
Kenya	Program Development and Support	6150510				HE	0	0
Kenya	Combatting Childhood Communicable Diseases	6980421				HE	0	90
						SUBTOTAL	12468	90
Lesotho	Rural Health Development	6320058	77	83	03/31/85	O HE	2902	0
Lesotho	Dental Health International-OPG	6980409	75	78		C HE	0	0
Lesotho	Combatting Childhood Communicable Disease	6980421	84	86	06/30/88	O HE	0	563
						SUBTOTAL	2902	563
Liberia	National Medical Center	6690054	60	78	12/30/78	C HE	16456	0
Liberia	Lofa County Rural Health	6690125	75	79	04/30/79	C HE	2652	0
Liberia	Health Management Planning	6690126	76	80	09/30/85	O HE	2371	0
Liberia	Primary Health Care	6690165	83	87	12/30/88	O HE	14700	0
Liberia	Strengthen Health-Delivery System	6980398	77	85		O HE	0	100
Liberia	Combatting Childhood Communicable Disease	6980421	83	87	07/15/87	O HE	0	655
Liberia	Planning/Eval. Fin. Schemes-Kolahun PRICOR	9365920	84	85	06/30/85	O HE	0	44
Liberia	Test. Eff. Adol. Chil. as Hth. Prom. in Lib. PRICOR	9365920	84	86	03/14/86	O HE	0	163
Liberia	ORT Treatment in Liberia (PRICOR)	9365920	84	86	02/28/86	O HE	0	74
						SUBTOTAL	36179	1036
Malawi	Malaaulo Hospital Development		80	84		O AS	1700	0
Malawi	Health Institutions Development	6120211	84	86		P HE	4500	0
Malawi	Combatting Childhood Communicable Disease	6980421	84	88		O HE	0	2000
Malawi	Mass Media & Health Practices	9311018	85			P HE	0	100
Malawi	Community Org. of PHC in Malawi (PRICOR)	9365920	82	87	09/30/85	O HE	0	47
						SUBTOTAL	6200	2147
Mali	Oral Rehydration Therapy	6250963	83	85		O SH	0	300
Mali	Rural Health Services Development	6880208	77	81	03/01/85	O SH	2705	0
Mali	Rural Health Services Development	6880208	77	82	06/30/82	C HE	985	0
Mali	MCH/FP	6880227	86	89		P SH	5000	0
Mali	MCH/FP	6880227	86	89		P SH	5000	0
Mali	Onchocerciasis Control Phase II	6980399	74	85		O HE	0	0
Mali	Community Financing (PRICOR)	9365920	84	85	09/14/85	O HE	0	36
						SUBTOTAL	13690	336

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COUNTRY	TITLE	PROJ.NO	BEG.	END	PACD	STATUS	APPR.	TOTAL COST	OTHER SOURCE/
Mauritania	Rural Health Services Project Amendment	6250929	84			D	HE	30	0
Mauritania	Expand.Prog.of Immunization (AIP)	6250937	80	83			SH	0	400
Mauritania	Rural Medical Assistance	6820202	79	79	10/31/84	C	SH	1662	0
Mauritania	Rural Health Services	6820230	83	83	09/30/88	D	SH	5000	0
Mauritania	RHS:River Valley Hlth.Control	6820230	85	88		P	SH	2500	0
							SUBTOTAL	9192	400
Niger	Improving Rural Health-OPG	6830208	78	78	09/30/84	C	HE	2000	0
Niger	Improving Rural Health-OPG	6830208	78	85	12/31/86	D	SH	12029	0
Niger	Rural Health Improvement II	6830208	87	90		P	SH	12500	0
Niger	Basic Health Services Delivery-OPG	6830214	76	80	03/31/81	C	SH	1468	0
Niger	Onchocerciasis Control Phase II	6980399	74	85		D	HE	0	0
							SUBTOTAL	27997	0
Nigeria	Strengthen Health Delivery System	6980398	77	85		D	HE	0	0
Nigeria	Comm.Partic.in Stblztn of Vill.Hlth(PRICOR	9365920	84	85	06/01/85	D	HE	0	24
Nigeria	Incr.Product.ofCHWs thru SupervisionPRICOR	9365920	84	85	06/30/85	P	HR	0	36
							SUBTOTAL	0	60
Regional	Private Sector Health							0	0
Regional	Gambia River Basin Development	6250012	88			P	SH	16400	0
Regional	Public Health Training	6250510	71	79	03/07/76	C	HE	2295	0
Regional	Meningitis Research	6250929	82	82		D	SH	107	0
Regional	Radio-Immuno Assay/Sporozoites	6250929	83	83		D	SH	16	0
Regional	Program Development and Support	6980110					HE	0	0
Regional	Maternal and Child Health Extension II	6980358	76	79	12/30/79	C	HE	1200	0
Regional	Private Operational Prog Grants-OPG	6980386	84			P	HE	3	0
Regional	Health Delivery Systems	6980398				P	HE	0	3100
Regional	Strengthening Health Delivery Systems	6980398	77	85	12/31/85	D	HE	26754	0
Regional	Health Constraints to Rural Production	6980408	81	87		D	HE	9522	0
Regional	Dental Health International-OPG	6980409	75	78		C	HE	139	0
Regional	Accelerated Impact Program	6980410	77	82	12/31/83	C	HE	3529	0
Regional	Health Institutions Improvement (1220)	6980412	78	84	09/21/85	D	HE	5100	0
Regional	Combating Childhood Communicable disease	6980421	78	87	09/30/89	D	HE	47000	0
Regional	Health Training Centers in Africa	6980460	86	90		P	HE	26000	0
							SUBTOTAL	138065	3100
Rwanda	Dental Health International-OPG	6980409	75	78		C	HE	0	0
Rwanda	Expanded Program for Immunization (AIP)	6980410	80	84	06/30/84	D	HE	0	495
Rwanda	Combating Childhood Communicable Diseases	6980421	84	88	07/01/88	D	HE	0	1072
Rwanda	Mugonero Hospital	9381306	80	83	09/30/83	D	AS	750	0
							SUBTOTAL	750	1567
SAHEL REG	Oral Rehydration Therapy	6250963	84	85		P	SH	3500	0
SAHEL REG	Onchocerciasis Control	6250966	85	90		P	SH	12500	0
SAHEL REG	Regional ORT	6250967	84	84		P	SH	1527	0
							SUBTOTAL	17527	0
Senegal	Casamance Regional Development	6850205	78	84		D	SH	855	0
Senegal	Bakel Irrigated Perimeters	6850208	80	83		D	SH	402	0
Senegal	Rural Health Services Development	6850210	77	83	03/31/84	C	HE	1494	0
Senegal	Rural Health Services Development	6850210	77	83	03/31/84	C	SH	2075	0
Senegal	Family Health Services	6850217	79	84	06/30/85	D	SH	2548	0

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COUNTRY	TITLE	PROJ. NO	BEG.	END	PACD	STATUS	APPR.	TOTAL COST	OTHER SOURCE	
Senegal	Rural Health Services II	6850242	84	85	04/01/89	P	SH	3514	0	
Senegal	Strengthen Health Delivery System	6980398	77	85		D	HE	0	0	
Senegal	Comm. Financing of PHC in Senegal (PRICOR)	9365920	83	83	11/13/83	C	HE.	0	31	
								SUBTOTAL	10888	31
Sierra Leone	Alt. Approaches to training Nurses in GRT (PRICOR)	9365920	84	85	10/31/85	D	HE	0	23	
								SUBTOTAL	0	23
Somalia	Rural Health Delivery	6490102	79	86	09/30/85	D	HE	15200	0	
Somalia	Op. Procedures to Imp. Availbly. of PHC drugs (PRICOR)	9365920				P	HE	0	0	
								SUBTOTAL	15200	0
Sudan	Northern Sudan Primary Health Care I	6500011	78	80	06/30/84	C	HE	5863	0	
Sudan	Southern Primary Health Care-OPG	6500019	78	81	06/30/83	C	HE	3686	0	
Sudan	Rural Health Support-OPG	6500030	80	86	08/26/87	D	HE	16182	0	
Sudan	Program Development and Support	6500510					HE	0	0	
Sudan	Health Constraints to Rural Production	6980408	81	87	09/30/87	D	HE	0	2122	
								SUBTOTAL	25731	2122
Swaziland	Health Manpower Training	6450062	77	82	06/30/84	C	HE	2442	0	
Swaziland	Rural Water-Borne Disease Control	6450087	79	83	02/28/86	D	HE	3297	0	
Swaziland	Health Planning and Management-OPG	6450215	81	81	08/12/85	D	HE	996	0	
Swaziland	Rural Health Development	6450220	85	88		P	HE	4000	0	
Swaziland	Rural Clinic Restoration	6450223	84	84		D	FD	135	0	
Swaziland	Combatting Childhood Communicable Disease	6980421	84	88		D	HE	0	703	
Swaziland	Approp. Method for Sustaining CHN (PRICOR)	9365920	84	86	01/31/86	D	HE	0	69	
								SUBTOTAL	10870	772
Tanzania	Manpower Training Program for MCH Aides	6210121	73	82	09/30/82	C	HE	524	0	
Tanzania	Manang District Village Health-OPG	6210138	77	82	11/30/81	C	HE	524	0	
Tanzania	Cancer Control-OPG	6210147	78	83	03/31/83	C	HE	550	0	
Tanzania	Tanzania School Health Program	6210150	79	83	09/30/85	D	HE	5744	0	
Tanzania	Continuing Educ. Ctr. for Hlth. Workers-OPG	6210154	80	83	04/30/85	D	HE	2206	0	
Tanzania	Zanzibar Malaria Control	6210163	81	81	01/29/88	D	HE	11771	0	
Tanzania	Role/Super. on VHWs Prfance, PHC Outreach (PRICOR)	9365920	83	85	05/31/85	D	HE	0	125	
								SUBTOTAL	21319	125
Togo	Family Health Center	6930212	77	78	03/31/85	D	HE	1278	0	
Togo	Strengthen Health Delivery System	6980398	77	85		D	HE	0	0	
Togo	Onchocerciasis Control Phase II	6980399	74	85		D	HE	0	0	
Togo	Combatting Childhood Communicable Disease	6980421	83	87	04/04/87	D	HE	0	1140	
								SUBTOTAL	1278	1140
Uganda	Oral Rehydration	6170117	84	86		D	HE	481	0	
								SUBTOTAL	481	0
Upper Volta	Combatting Childhood Communicable Diseases	6980421	86			P	HE	0	150	
								SUBTOTAL	0	150
UV (Burkina Faso)	Seguenega Integrated Rural Devel.-OPG	6860231	78	83	09/30/84	D	SH	0	0	
UV (Burkina Faso)	Rural Health Planning & Management	6860251	81	82	09/30/88	D	SH	4000	0	
UV (Burkina Faso)	Onchocerciasis Control Phase II	6980399	74	85		D	HE	0	0	
								SUBTOTAL	4000	0

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COUNTRY	TITLE	PROJ.NO	BEG.	END	PACD	STATUS	APPR.	TOTAL COST	OTHER SOURCE
Zaire	Health System Development	6600057	76	80	08/31/82	C	HE	610	0
Zaire	Health System Development	6600057	76	80	08/31/82	C	ES	667	0
Zaire	Endemic and Communicable Disease Control	6600058	76	78	12/31/83	C	ES	1380	0
Zaire	Basic Family Health Services-OPG	6600067	80	82	11/30/82	C	HE	50	0
Zaire	Karawa Health/Education Improvement-OPG	6600081	78	78	10/01/80	C	SD	500	0
Zaire	Imeloko Integrated Rural Development-OPG	6600082	78	81	07/31/81	C	SD	410	0
Zaire	Basic rural Health-OPG	6600086	81	83	09/30/86	O	HE	4864	0
Zaire	Commun.Hlth & Integ. Development-OPG	6600093	81	81	12/31/84	O	HE	489	0
Zaire	School of Public Health	6600101	84	87	03/31/94	O	HE	8315	0
Zaire	Health Infrastructure in Shaba	6600114	85	85		P	SD	2500	0
Zaire	Water Supply and Sanitation	6600116	85			P	HE	0	0
Zaire	Program Development and Support	6600510					HE	0	0
Zaire	Combatting Childhood Communicable Disease	6980421	82	87		O	HE	0	4100
Zaire	Comm.Financing of PHC in Zaire (PRICOR)	9365920	83	85	06/30/85	O	HE	0	132
							SUBTOTAL	19785	4232
							TOTAL	412373	26610

### 3. Managing the USAID Africa Bureau Nutrition Response

The Africa Bureau direct hire nutrition advisor slot no longer exists. Once an FS position, it became GS and then never came on line when the hiring freeze came into effect. Formerly, there were two nutrition advisors in the Africa Bureau. One was a direct hire working in AFR/TR/HN. The other was a RSSA with USDA in AFR/ARD.

At the Washington level, one RSSA in AFR/TR/HN is responsible for all nutrition activities in the Africa Bureau at the present time. The direct hire nutritionist left AFR/TR/HN and was not replaced. The USDA/RSSA with AFR/ARD is now with OFDA.

At the regional level, nutrition matters are handled by REDSO/WCA and REDSO/EA health staff. There are no people delegated for the nutrition portfolio per se. In the past, there was a REDSO/WCA direct hire nutrition advisor.

At the country level, an IDI with a nutrition background is in Zaire, charged with management of the major nutrition project in the Africa Bureau portfolio. Her technical nutrition backstop is from the RSSA in AFR/TR/HN.

#### 4. Constraints

The sheer number of countries in Africa makes the task of dealing with malnutrition more difficult than any other region of the world in an AID administrative sense. Asia, for example, has only 8 countries in the region. The Americas have 26. Africa has 41.

The major constraint at this time to the Africa Bureau's response to the nutrition problems in Africa is personnel. This is reflected in the following way:

A) There are many new nutrition initiatives in Africa (JNSP. for example). New technologies and approaches are coming on line. The Africa Bureau, with no permanent nutrition "personnae" (latin plural?) has no way of keeping abreast with the times.

In the past, with a regional nutrition advisor constantly on the move, and with backstop from Washington, AID was better able to disseminate new technologies and foster new nutritional initiatives within the AID development program and by other donor agencies.

B) A. RSSA: to handle African nutrition problems. For USAID is limiting. RSSA's cannot supervise direct hire staff, nor can they perform other management functions that will be necessary if hiring ceilings are closed and extra-agency mechanisms are utilized to address African nutritional problems.

In the past, direct-hires have been used to supervise nutrition project staff in Africa. (S&T/N Intermediate Nutrition Planning Project, 1976-1979). This increased the nutritional effectiveness of USAID in Africa, placing two nutrition contractors in Cameroon and Zambia to advocate, plan, develop, and lead to implementation new nutritional initiatives.

C) Nutrition advocacy is lost in the Africa Bureau, given the present staffing. Just handling the on-going nutrition portfolio is a burden on one person, given the other tasks required of a nutrition advisor in Washington.

(see above: technical assistance to the field, coordination of African PL-480, PVO, S&T/N, S&T/H activities, project technical reviews, on-going donor coordination, office management, ect)

Finally, the "Catch 22". Without adequate staff, the Africa Bureau is not able to justify increased resources in the nutrition sector, due to a lack of management capability.

UNITED STATES INTERNATIONAL DEVELOPMENT COOPERATION AGENCY  
AGENCY FOR INTERNATIONAL DEVELOPMENT  
WASHINGTON D C 20523

October 1, 1984

MEMORANDUM

TO: S&T/FA, J.S. Robins  
FROM: S&T/N, Nick Luykx *N. L.*  
SUBJECT: "Nutrition Advisor" Position in AFR/TR

1. The Africa Bureau had a Foreign Service "Nutrition Advisor" in the Health Division of the Office of Technical Resources up until the time of the departure of the incumbent (Ms. Mellen Duffy) from A.I.D. in April 1984.
2. Prior to the incumbent's departure, the Africa Bureau acted deliberately and expeditiously to recruit a replacement Foreign Service Officer. With the active assistance and cooperation of the Foreign Service Personnel staff in the A.I.D. Office of Personnel Management, the Africa Bureau was en route to obtaining formal authorization to recruit outside the Agency.
3. Concurrently, a highly qualified external candidate was identified informally. This potential candidate was made aware of the situation and indicated strong interest in the position.
4. The processing for the Foreign Service recruitment was terminated in June 1984, after the AID/W Foreign Service "Nutrition Advisor" positions were reorganized as GS/GM positions.
5. The Africa Bureau has now had to re-commence the recruitment process for a GS/GM "Nutrition Advisor" virtually from scratch (instead of being able to pick up and continue from the point of recruitment progress previously made for a Foreign Service "Nutrition Advisor"). This has resulted in the loss of the A.I.D. time and other resources already invested in the recruitment of a replacement for the previous incumbent. It has also risked the loss of the interest and commitment of the highly qualified candidate already identified as a possible replacement. As a short-term interim measure, the Health Division in the Africa Bureau has made use of short term services available under a RSSA arrangement with the Department of Health and Human Services.

6. I bring this matter to your attention, since it is possibly an important concern for the Agency Directorate for Food and Agriculture and for the Senior Assistant Administrator, in the oversight role regarding the amount, type, and quality of scientific and technical personnel resources available within the Agency.

Clearance:

(Draft) AFR/TR/H. C. Gurney (phone) C.G. date Oct. 1, 1984