Combating IDD in Ghana

Ebenezer Asibey-Berro, Rebecca Ahun, Tamar Schrofer and Ernestina Agyepong | CCIDD Ghana

Following the Dakar consultations on USI for West Africa in October 2004, the following objectives were set for progress on USI in Ghana:

1. Secure high-level political commitment to USI
2. Ensure all salt produced in Ghana is effectively iodised
3. Monitor and enforce the salt iodisation law
4. Increase national awareness of the benefits of iodised salt
5. Strengthen partnerships

Figure 1: Officers from the Ghana Food Research Institute teaching methods of salt iodization to producers

Securing high level political commitment

In this effort, The Ministry of Health and Ghana Health Services, worked in collaboration with the National Salt Producers Association, the office of the Presidential Special Initiative on Salt, UNICEF, the Ministry of Local Government and Rural Development, the Ghana Education Service and the Ministry of Environment and Science. Aliu Mahama, the Vice President of the Republic, launched Ghana’s USI program at the national level on February 9, 2005. It was well attended by the public, media and interest groups. This was followed by launches in four regions that had low rates of USI in a 2003 survey. Two more regional launches followed in the Upper East and Northern regions in October 2005. The UNICEF representative, Dorothy Rozga, and Prof. Badu Akosa, Chairman of the National Iodisation Committee and Director General of the Ghana Health Services, visited the office of the Vice President of Ghana to update him of progress towards USI.

Ensuring the iodisation of all Ghanaian salt

The Food and Drugs Board (FDB) is to lead in this activity with the support of the Ministry of Trade and Industries, Presidential Special Initiative on Salt, Ghana Standards Board and the Food Research Institute. The Food and Drugs Board developed and distributed a Code of Practice to all salt producers, traders, transporters and the country.

A shortage of potassium iodate (KI) in the country in January 2005 was a threat to progress, but arrangements were made for Mina Chemicals, a private chemical dealer, to import KI into the country. UNICEF also procured KI for a training program, run by the National Salt Iodization Committee, to iodize heaps of salt that had accumulated in parts of the country. Salt producers and National Disaster Mobilisation Organisation coordinators were trained in simple manual iodisation methods in six regions, using accumulated stocks of uniodised salt. After training, a free portable sprayer, iodised salt spot test kits, potassium iodate and other supplies were given to the trainees to allow them to go and iodize their heaps of salt. The free supplies were provided by UNICEF. Plans were also put in place to locate and iodise non-iodised salt awaiting sale at the markets.
Monitoring and enforcing the salt iodization law

The Food and Drugs Board was to lead this activity with the collaboration of the Ghana Health Services, the Customs and Excise Prevention Services, the Ministry of Local Government and rural Development, and the Micronutrient Initiative (MI).

Salt sampler distribution. Two hundred and forty salt samplers were procured for enforcement. They will be used to collect salt samples from salt sacks at road checkpoints to be tested for iodine.

Factory inspections. In December 2005, the Food and Drugs Board began factory inspections to ensure adequate salt iodization at the factories.

Permit for raw salt movement and checking of salt at road check points. The Food and Drugs Board developed a permit that must be completed to transport raw salt, and the quantity and final destination of the salt must be on the permit. Several national salt producers are already complying. Over 500 customs and police officers have been trained to check the iodization status of salt with spot-test kits and identify the movement of iodized and non-iodized salt. A ceremonial handing-over of 5000 salt spot-test kits to enforcement personnel took place in October, 2005.

Checks at production/refining plants. In December 2005, the Food and Drugs Board started visiting salt production plants to see their facilities. Samples of their salt was collected and sent to accredited laboratories for analysis of iodine content by titration.

Figure 2: Promoting iodized salt to women salt traders at a market in the Volta Region of Ghana.

Increasing awareness and mobilising for positive behavior change

The Ministry of Health led this activity, assisted by the Ghana Health Services, UNICEF and the Ghana Education Service.

KAP study. To identify knowledge gaps to target for public education, a KAP (Knowledge, Attitudes and Practices) study was conducted on the “Salt Habits of Ghanaians”, sponsored by Unilever Ghana.

Developing a communication strategy. Prototype campaign materials have been pre-tested, mass produced and distributed. The Food and Drugs Board is developing a documentary on USI for TV, and vans from the Ministry of Information will visit Ghanaian communities to show the documentary and educate the public.

IDD / USI education in schools. The Ministry of Education is training School Health Officers on the importance of salt iodisation at over 1500 schools in 4 regions.

Strengthening partnerships

The National Salt Iodization committee, with members from various stakeholder groups, held nine meetings in 2005. To ensure smooth running of salt committees around the country, guidelines for salt committees have been developed by the Ghana Health Services and the Nutrition Unit. A reorganisation of the National Salt Producers Association of Ghana is underway through the office of the Presidential Special Initiatives on Salt. This should increase government recognition of the group and make it easier for the group to import KI for its members.

Ghana was represented in July 2005 at a consultative meeting with ECO-WAS partners in Burkina Faso. The meeting discussed standardization of salt, quality control, trade and taxation within the framework of USI in West Africa. The meeting agreed on the following:

- To apply the standards of the Economic and Monetary Union of French West African Countries (UEMOA) for iodated salt, and use the same methods for assessing salt iodine content.
- To identify four laboratories in the sub-region (Ghana, Cote d’Ivoire, Nigeria and Senegal), and strengthen their capacities to serve the subregion. The office of the Ghana Presidential Special Initiative on Salt is to strengthen the capacity of the Ghana Reference Laboratory.
- To adopt the fiscal provisions of UEMOA in relation to iodised salt, KI, and salt iodisation equipment. UEMOA should in turn modify its tariff and suppress its taxes to facilitate iodated salt trade in the region.
Other Activities

The Micronutrient Initiative helped appoint for UNICEF a USI program officer, Rebecca Ahun, in Accra. A journalist has been engaged by UNICEF to report on the USI programme and prepare press releases.

Current Situation

In November 2005, a UNICEF consultancy reviewed the Ghana’s USI strategy. It noted a high (85%) population awareness of salt iodisation, but only limited (50%) access to iodised salt. Their main recommendation was for Ghana to quickly maximize production and market supply of iodized salt. To check the extent of household coverage at the end of 2005, a national survey was done by the Ministry of Health and Ghana Health Services. The survey covered all regions of Ghana, and its results will be available soon.