A Holistic Approach to Combating Vitamin A Deficiency is Needed in Tanzania

Vitamin A deficiency (VAD) is a serious public health problem, with 34% of Tanzanian children aged between 6-59 months deficient in this micronutrient.

VAD increases risk of disease, visual impairment and death in children, and night blindness in pregnant and lactating women. Like other forms of under-nutrition, VAD undermines the country's future economic and social development. Tanzania loses an estimated 2.65% of its Gross Domestic Product (GDP) due to vitamin and micronutrient deficiencies.

Strategies for Addressing VAD in Tanzania



Receiving a Vitamin A capsule

Vitamin A Supplementation

- Providing Vitamin A capsules twice a year to children under 5 is one of the most effective ways to increase child survival and reduce child mortality by an average of 24%
- High annual coverage, 90% since 2001¹
- Providing supplementation to the poorest and hard to reach areas is a challenge
- The benefits of supplementation in reducing VAD are temporary (2-3 months)

Food fortification

- Fortification of oil, wheat and maize flour with vitamin A, folic acid, vitamin B 12, and zinc is currently ongoing in Tanzania
- Fortification reaches the broad population consuming major staples. Up to 23 million Tanzanians consume vitamin A-fortified oil
- As young children can only eat small quantities of fortified foods, fortification should be combined with other interventions to reduce VAD

Food-based approaches

 Many Vitamin A rich foods such as mangoes, papaya, orange-fleshed sweetpotato (OFSP), pumpkins, dark green leafy vegetables, eggs,

¹ TDHS, Micronutrient Report, 2010

meat, and milk are available. However, meat and eggs are expensive for most Tanzanians

- One small root of most OFSP varieties can meet the daily recommended allowance for Vitamin A of young children
- Malnourished rural/resource poor populations can grow and eat bio-fortified crops such as OFSP, and sell surplus roots
- In Tanzania, OFSP is widely grown mainly by women, who also bear the responsibility for child feeding
- To create demand and scale up OFSP adoption, there is need for media campaigns, demonstrations, long-term investment in breeding, vine multiplication and nutrition education



Boy eating OFSP

Why is a holistic approach needed to combat vitamin A deficiency?

- Since each of the three approaches to addressing VAD has limitations when used in isolation, there is need to combine Vitamin A supplementation, fortification and food-based approaches to achieve greater success
- Other interventions for addressing VAD include exclusive breastfeeding of infants under 6 months, continued breastfeeding up to two years and beyond, and dietary diversification
- Improved health services is an important part of a holistic approach since illness contributes further to VAD







Contact:

Revelian Ngaiza, rngaiza@hki.org, Promotion Expert, HKI - Tanzania Margaret Benjamin, mbenjamin@hki.org, Senior Program Officer-Nutrition, HKI - Tanzania Nessie Luambano, nluambano@yahoo. com, National Agronomist, CIP – Tanzania Jonathan Mkumbira, J.Mkumbira@cgiar.org, Regional Agronomist, CIP - Tanzania