

The Concept: Women's Reproductive Health and Food Security

Adebowale Oluseyi

Dept of Agricultural Extension and Rural Development, University of Ibadan

E-mail:sharonzworld2000@gmail.com

Tel: +2348132965488

Adebowale Oluwawemimo Oluseun

Department of Veterinary Public Health and Reproduction

University of Agriculture, Abeokuta

E-mail:oluwawemimo1@yahoo.com

Tel: +2348069181481

Abstract

There is strong relationship between food security and the reproductive health of women which informs the current research interest in this area. Women account for more than half of labour force needed to produce food to be consumed in Africa and their health is a factor that must be considered in order to ensure and sustain food security. The four dimensions of food security-food availability, food utilization, food accessibility and stability-were discussed. This reproductive health issues are a very central concerns to African women throughout their entire lives. The conceptual framework in fig.1 points to the various variables that will improve the quality of life of women for good healthy living and consequently sustain household food security. The layout of the paper will make for adequate comprehension and guide future research interest.

Keywords: Reproductive health, food security, concept.

1. Introduction

Food insecurity, hunger and malnutrition are in the spread and increasing in Sub- Sahara Africa. Almost one half of the sub- Sahara African population is food insecure and about one- third of the preschool children die every year mostly from nutrition related illness. Food security and child nutrition will continue to deteriorate dramatically in the future unless special action is taken to avoid it (Oniango, 2005).

The dual roles that women play, in producing and preparing food, as well as in the bearing and raising of children, make the comprehension...between reproductive health and household food security crucial.* (FSSDD,1999). Women's lives are situated at the nexus of these two significant issues that underlie the sustainability of life in Sub-Saharan Africa. A more couple understanding of the strength and significance of relationship between women reproductive health and household food security is necessary to optimally develop policies that improve the quality of life of women and their families. Estimates from Food and Agriculture Organisation (FAO) show that women account for more than half or more of the labour required to produce the food consumed in the developing world (FAO, 1985). This point to the fact that women hold a significant position in food production and household food security. Hence the need to focus more attention on women and their roles in this respect. Not

* Food Security and Sustainable Development Division (FSSDD) of the United Nations Economic Commission for Africa (UNECA)

only are women noted to be the major provider of agricultural labour (for planting, weeding, watering, cultivating, and harvesting) in most of rural Africa, but they are also seen to play crucial roles in the processing and distribution of food (Sicoh, 1980).

WHO reported that, "although an overwhelming amount of research has been given to food security issues and to reproductive health, not as much attention has been paid to the relationship between the two. Indeed, there has been some attempt to illuminate how women's reproductive health status influences household food security (WHO, 1994), but not enough has been done in this direction, or to explicate the relationship between the various aspects of food security and childbearing. It is that we comprehend the relationships between food security and reproductive health needs to be more complete. This concept paper outlines a framework that will, hopefully, forward research proposal that will examine the significant effect of women's (or adolescents) reproductive health and food security.

2. Food Security and Concept Guide

The fundamental challenges the world faces is to ensure that the hundreds of millions of families living in poverty have access to enough food to maintain a healthy life (Wendy and Alex, 1995).

Fostering the growth of national and global food supplies is necessary for eliminating hunger and reducing poverty, but it is not enough. Today even in the midst of sufficient global food supplies 800 million people are hungry because they cannot afford to buy the food they need for a healthy life. More than 2 billion people are at the risk from micronutrient deficiencies (of, for example, Vitamin A, iodine, and iron), and more than 1 billion people are actually disabled by them—harmed by mental retardation, learning problems, and blindness. Ironically, nearly 75% of poor and undernourished people live in rural areas where food is grown.

Food security exists when all people, at all times, have physical and economic access to sufficient safe and nutritious food that meets their dietary needs and food preferences for an active and healthy life (WFS, 1996). USAID (2003), further defined it in terms of food availability, food access and food utilization. Food availability is achieved when sufficient quantity of food is consistently available to all individuals within a country. Such food can be supplied through household production other domestic outputs, commercial imports or food assistance. Such food can be supplied through household production, other domestic outputs, commercial imports or food assistance.

Food access is ensured when household and all individuals within them have adequate resources to obtain appropriate food for nutritional diet. Access depends upon income within the household and the household and on the price of food. Food utilization is the proper biological use of food requiring a diet providing sufficient energy and essential nutrients potable water and adequate sanitation. Effective food utilization depends in large measure on knowledge within the household of food storage and processing techniques, basic principles of nutrition and proper childcare.

Successful food security and poverty oriented programme not only assist poor rural population to produce more diversified products but to produce a surplus that can be marketed and thereby generate income for the purposes of improving quality of life through improved diet and nutrition. (Williams, 2003)

2.1. Basic Concepts of Food Security

According to food Security information for action practical guide. (FAO, 2008)

2.1.1. The Four Dimension of Food Security

Food Security exists when all people, at all times, have physical and economic access to sufficient safe and nutritious food that meets their dietary needs and food preferences for an active and healthy life. (WFS, 1996).

From this definition four main dimensions of food security can be identified:

1. Physical AVAILABILITY of Food

Food availability addresses the “supply side” of food security and is determined by the level of food production, stock levels and net trade.

2. Economic and Physical ACCESS to Food

An adequate supply of food at the national or international level does not in itself guarantee household level food security concerns but insufficient food access have resulted in a greater policy focus on incomes, expenditure, markets and prices in achieving food security objectives.

3. Food UTILIZATION

Utilization is commonly understood as the way the body makes the most of various nutrients in the food sufficient energy and nutrients in the food sufficient energy and nutrient intake by individuals is the result of good care and feeding practices, food preparation, diversity of the diet and intra household distribution of food. Combined with biological utilization of food consumed. This determines the nutritional status of individuals.

4. STABILITY of the other Three Dimensions Overtime

Even if your food intake is adequate today you are still considered to be food insecure if you are still having inadequate access to food on a periodic basis, risking a deterioration of your nutritional status. Adverse weather conditions, political instability, or economic factors (unemployment, rising food prices) may have an impact on your food security status.

For food security objectives to be realized, all four dimensions must be fulfilled simultaneously.

3. The Concept: Reproductive Health

Within the framework of WHO’s definition of health as a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity, reproductive health, or sexual health hygiene addresses the reproductive process, function and system at all stages of life. Reproductive health, therefore implies that people are to have a responsible, satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so. Implicit in this are the right of men and women to be informed of and to have access to safe effective, affordable and acceptable method of fertility regulation of their choice and the right of access to appropriate health care services that will enable women to go safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant.

According to the WHO “reproductive and sexual ill-health accounts for 20% of the global burden of ill-health for women, and 14% for men.

Health remains a vital aspects of human welfare in society. Particularly for women in Africa, reproductions have been seen as one of their fundamental responsibilities, if not obligation, to human society and indeed, households. Traditionally, African women have spent their entire lifetimes ensuring that their families are fed and also, literally, in a reproductive life span is between ages 11 and 50 and life expectancy (primarily because of HIV, War, and Famine) is now below 50years. This reproductive health issues are very central concerns to African women throughout their entire lives.

The International Conference on Population and Development (ICPD) was held in Cairo, Egypt, from 5th to 13th September, 1994. Discussion was made on variety of population issues such as infant mortality, birth control, family planning, and the education of women.

The ICPD achieved consensus on four qualitative and quantitative goals for the international community the final two of which have particular relevance for reproductive health:

1. Reduction of maternal mortality: A reduction of maternal mortality rates and a narrowing of disparities in maternal mortality within countries and between geographical regions, socio-economic and ethnic group.

2. Access to reproductive and sexual health services including family planning: family planning counselling, pre-natal care, safe delivery and post natal care, prevention and appropriate treatment of infertility, prevention of abortion and the management of the consequences of abortion, treatment of reproductive tract infections, sexually transmitted diseases and other reproductive health conditions; and education, counselling
3. As appropriate on human sexuality, reproductive health and responsible parenthood, services regarding HIV/AIDS, breast cancer, infertility, delivery and abortion should be made available. Active discouragement of Female Genital Mutilation (FGM).

The key to this new approach is empowering women and providing them with more choices through expanded access to education and health services and promoting skill development and employment.

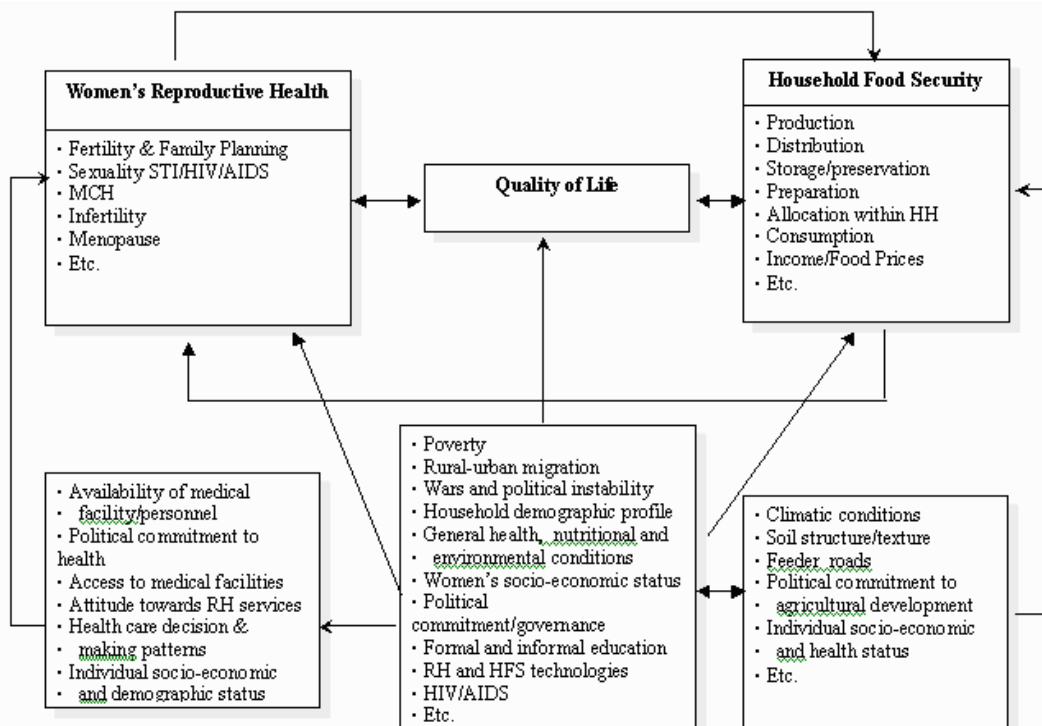
4. Millennium Development Goals

Achieving universal access to reproductive health by 2015 is one of the two targets of Goal 5-improving maternal Health- of the millennium Development Goals. To monitor global progress towards the achievement of this target, the UN has agreed on the following indicators:

1. Contraceptive prevalence rate
2. Adolescent birth rate
3. Antenatal care coverage
4. Unmet need for family planning

According to the MDG Progress Report, regional statistics on all four indicators have either improved or remained stable between the year 2000 and 2005. However, progress has been shown in most developing countries particularly in sub-Sahara Africa, which remains the region with the poorest indicator's for reproductive health. According to WHO in 2005 an estimated 55% of women do not have sufficient antenatal care and 24% have no access to family planning services.

Figure: Conceptual Framework for a Research Agenda on Women's Reproductive Health and Household Food Security in Africa



Source: Research agenda on the relationships between women's reproductive health and household food security in Africa 2000.

Reference

- [1] FAO, 2008. “An Introduction to the basic concepts of food security”. Food security Information for action practical Guides.Pp1-3. www.foodsec.org/docs/concepts_guidepdf.
- [2] Francis, N.D. and Ezeh, A.C. ,Undated.” Relationship between Women reproductive health and household Food Security in Rural Africa”. The Africa population and health Research Centre (APHRC), Nairobi. Pp1-16.pdf.
- [3] Oniy’o, R.R.,2005. ”Women are still the key in agriculture and Food security in Africa”. Women and food security.SAJCN.Vol.18.no2. Pp1-5.
- [4] Oniola, E.O,2009.” A framework for food security and poverty Reduction in Nigeria”. *European Journal of Social Sciences*.Vol8.No.1.Pp1-8.
- [5] Wendy, S.A. and Mccella,M.F.,1996. “Rural Development, Agriculture and food security”. Finance and Development.Pp1-4.
- [6] Wikipedia, 2009. Reproductive health. <http://www.wikipedia.html>
- [7] Williams, M.,2003.”Food Security, Agricultural Extension and the Food Security Challenge”. Sustainable Development department.FAO.Pp39-40.