



PRESS RELEASE

**For Immediate Release
November 17, 2008**

For more information, please contact IFPRI:
Michele Pietrowski, m.pietrowski@cgiar.org, +1-202-862-4630
Veronica O'Connor, v.oconnor@cgiar.org, +1-312-876-9025

Food Crisis and Health Go Hand in Hand **IFPRI Urges Greater Cooperation between Health and Agriculture Sectors**

Bamako, Mali—For the world's poor people, agriculture and health are inextricably linked: agriculture affects health, and health affects agriculture. Lack of cooperation between the two sectors hinders the fight against poverty and hunger in developing countries and rising food prices underscore the urgency to act.

High-level policymakers, researchers, and development practitioners from around the world gather here from November 17-19 at the Global Ministerial Forum on Research for Health to explore linkages in research and innovation for better health at the national, regional and global levels.

Agriculture is the primary source of livelihood for the majority of the world's poor people, who in turn, are the most vulnerable to ill-health. Agriculture contributes to healthy nutrition and provides income, which can be spent on health care and prevention.

Health conditions in turn have tremendous implications for agriculture. Malnutrition and disease can reduce agricultural workers' productivity and the demand for agricultural products. Successful health policies benefit agriculture: they protect workers from days (and income) lost due to illness, chronic disabilities or mortality.

“Good health and productive agriculture are both essential for poverty reduction,” said Joachim von Braun, director general of the International Food Policy Research Institute (IFPRI), which is participating in the forum. “The diets of poor people are getting worse because of the food

price crisis. At the same time, income and health risks among the poorest remain significant. Poor people are most affected by crop losses and health threats, such as malaria and HIV/AIDS, which underscore the importance of forging research partnerships across the agricultural and health sectors.”

People responsible for the agricultural and health sectors often wear “blinders”: agricultural policymakers tend to focus on natural resource management, farmers' livelihoods, food security, and food safety, while health officials mainly focus on providing preventive and curative care within clinic-based health systems. These narrow, sector-specific approaches limit the effectiveness of both agricultural and health policies, to the detriment of poor people.

“Instead of collaborating, agricultural and health officials often compete for limited resources,” said Stuart Gillespie, IFPRI senior research fellow and coordinator of the Agriculture and Health Research Platform (AHRP) of the Consultative Group on International Agricultural Research (CGIAR). “This lack of cooperation stems partly from little awareness about how problems and solutions in agriculture and health are linked, and partly from policy conflicts or institutional obstacles.”

“This problem also matters at the grassroots level,” added Joachim von Braun. “Rural caregivers in southern Africa, for example, have shared their frustrations with me because they receive little support from agriculture extension services that could enhance income-earning opportunities for their clients.”

The CGIAR, an alliance of 15 leading international agricultural research centers, formed the AHRP to encourage researchers and policymakers to engage in productive partnerships between the agricultural and health sectors. Coordinated by IFPRI in collaboration with other stakeholders, including the World Health Organization, the initiative strives to improve coordination of health-related agricultural research and maximize the impact of health research on agricultural development for the benefit of poor people. The AHRP has identified five key research priorities:

(1) agriculture, diet, nutrition, and health; (2) food supply and safety; (3) water management in agriculture and human health; (4) animal and human health and livelihoods; and (5) HIV/AIDS and agriculture. Significant programs are already underway in most of these priority areas.

“Pervasive child malnutrition, food- and water-borne diseases, and the AIDS epidemic are just some of the current health problems facing poor people today,” said Marie Ruel, director of the Food Consumption and Nutrition Division at IFPRI. “The challenge now is to research these issues and devise joint policies in agriculture and healthcare that are broadly and effectively implemented. We have to identify win-win solutions for poor people that capitalize on the synergies between the two sectors and document these lessons so that they can be replicated and scaled-up.”

Research and policy cooperation between the agriculture and health sectors is possible, provided an adequate policy environment, effective institutional arrangements, and the capacity and willingness of individuals from each sector to engage in dialogue. IFPRI recommends the following to promote synergies between the agriculture and health sectors:

- Governments should develop policies that create incentives for collaboration across sectors and that benefit the national good more than specific sectors.
- Countries should work across sectors to harmonize existing policies, identify opportunities for reciprocal action to address each other's concerns, and formulate new policies that support collaboration.
- Countries should undertake health impact assessments of any new agricultural development project or agricultural policy. Bilateral and multilateral development agencies should review their decision-making criteria for projects and incorporate health safeguards.

“Agriculture and health must move together,” said Gillespie. “This means policymakers and researchers in both sectors will have to take off their blinders and look beyond the boundaries of their traditional areas of action. Such partnerships will improve the well-being of millions of poor people.”

###