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Thank you Mr. President.

I shall address the Covid pandemic from a different direction. Just this morning, during our panel presentation, I noted at the onset of Covid-19, it struck me how in Africa we seemed to have terrific strategy with an enormous lack of capacity. In the West, there was an abysmal strategy with enormous capacity. That made me reflect on other differences and similarities during the evolution of the pandemic. As Madame Delapalme expressed, at the outset there were certainly very different patterns of the pandemic evolving between Africa, Europe and the US. Even now, with an increasing Delta and other variants in South Africa, morbidity levels remain low with mortality levels even lower; presenting in a somewhat different manner than in the West.

As a Public Health specialist and physician, my interest was piqued. Attending several roundtables and conferences where I and others spoke of the youthfulness of the continent, a mostly outdoors lifestyle, a majority have been bitten by malarial mosquitoes and had at least one dose of chloroquine and that in some parts, especially in nations with high levels of smokers, they appeared to suffer more, or as argued, that they might even do better with Covid as smokers etc.

My interest was also borne by facts from the work I do in West Africa. There is a quiet pandemic amongst our youth of early onset of high blood pressure. We have noted that our youth between the ages of 20 and 35 have relatively high blood pressure levels unbeknownst to them as they do not engage in routine health checks.

Having majored in Nutrition and having close relationships with nutritionists, I had access to an encyclopedia of local West African foods and their nutritional attributes. I observed how people were coping with Covid infection, in Ghana especially, by consuming certain foods more. People were engaging in certain antique nutritional practices that they had used when living in more rural villages and ate more in groups, but now we are engaging with such with

households. I noted how consistently there were certain foods, especially vegetables, consumed in the diets. Of even greater interest, my own family members in the US (Nigerian) would send me photographs of certain local plants (often the same ones in Ghana) being sold for horrendous amounts in the US because clearly some had discovered their nutritional strengths and possible impact on the whole Covid situation.

I grew up on a farm and do remember how, whenever there were certain illnesses, there were certain plants that were consumed. I realized that these remained the same plants that I grew

up seeing being used for various illnesses. In Ghana certainly many families were using them routinely. They were eating their normal meals, but adding these particular plants as additives. I had a very exciting, albeit brief, conversation this morning with one of my esteemed co-panelists about the importance of nutrition in Covid and keeping Covid at bay, using the theory of microbiomes, in which I have also been very interested in for many years. I jokingly reminded him of the old saying, “The more things change, the more they stay the same”, because it appeared that our trajectory, even in the Western world, of looking at diet and its protective role, returns to very basic home truths about what one eats or what one should eat to create the right intestinal microbes within one’s body to protect oneself and to facilitate and enhance one’s immune system against various illnesses and even parasites.

Returning to the high blood pressure issue, when one reviews how this has become a silent epidemic, one notes that most of these youth are engaged in sedentary office jobs; they eat from on/off site canteens rather than at home; eat Western foods rather than local foods, notwithstanding the occasional local food thrown in to ‘customize’ offerings. To me this is a silent epidemic that we really need to work at locally. As the Chair the world’s largest private NGO, United Way Worldwide, I have been an enormous advocate for the many food gardens around the continent of Africa that we support.

Madame Touré expressed earlier, that microfarms and backyard gardens where people have grown their foods, is something most Africans have grown up with. Every African child grows up engaged in some degree of local food production. Teaching and encouraging people, especially women and youth, how to grow lots healthy foods in their domestic gardens for their own consumption/ sale without pesticides, using organic fertilization techniques as much as possible, using natural sun,/solar energy, that we have in abundance, with water sometimes in supply and sometimes not, but that is one of the few but major challenges that need to be addressed, we have found has not only been an income generator for women, market women, particularly in South Africa, but their children have grown up a lot healthier for it.

Madame Delapalme mentioned death registries exist in only four of Africa’s 55 countries. The same also goes for birth registries. We really have no idea of how many people are born, let alone how many are dying. This should be seen within a cultural context. Africans have traditional ways of announcing death and often can describe what happened to the person at the time of death, from which one can sometimes elucidate what the cause of death was. Deaths therefore do not go entirely unnoticed, and certainly in a country like Ghana, where death is roundly celebrated, they really do not go unnoticed, even where it is a modest celebration. Likewise, naming ceremonies always acknowledge the presence of a live birth.

I feel that in developing our strategic workforces as a result of the Covid pandemic we need to be looking not just at MDs but also looking at cadres of nutritionists to start really working at what we can salvage from our traditional food products that relate to health. I really do. I think this is an area that should be researched and data should be produced. This is not something the West is going to provide for us. This is something we have to do for ourselves. In so doing, the West may learn a great deal from us for future pandemic strategies. I believe the Covid pandemic gives us a chance to reset some of our habits that have been adopted or adapted from other countries.



Youth remain our strength and we must continue to work toward bettering their health/nutrition. A strength, as well as potentially a problem, and I think their health, through their nutrition, must be supported and protected. Labor and health policies must create recreational spaces and office gardens in those large office buildings that are going up so that there can be an emphasis on physical exercise and fresh foods for our young men and women who are otherwise 'encapsulated' in these buildings.

So, a somewhat different take on Covid19; reflecting my growing interest and concerns. As my last word, I wish to reinforce an earlier speakers concern about the growing insecurity in West Africa. One cannot grow food gardens in backyards with marauding armed persons damaging and stealing from them in the name of terrorism/counter terrorism! How is it, that even at the UN Africa does not have a permanent presence on the Security Council after all these years of our independence, and yet what do we talk about at the UN if not Africa's problem with security? We have enough influential countries, as Madame Touré had indicated. There is Nigeria, South Africa and Egypt. There are people who can fill that position and we need to think seriously about this. Thank you.

Robert Dossou

Thank you, Ms. Tuakli.