

*directing council*

PAN AMERICAN  
HEALTH  
ORGANIZATION

XXVII Meeting

Washington, D.C.  
September-October 1980

*regional committee*

WORLD  
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XXXII Meeting



INDEXED

Provisional Agenda Item 23

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8 August 1980  
ORIGINAL: ENGLISH

PRELIMINARY EVALUATION OF THE  
CARIBBEAN FOOD AND NUTRITION INSTITUTE

Because of financial strains at the Institute of Nutrition of Central America and Panama (INCAP), it was decided to review the PAHO nutrition program, and the roles of the two nutrition Centers in it, as a first priority. Accordingly, an Evaluation Team<sup>1</sup> was assembled to evaluate CFNI in the context of the Caribbean nutrition program, as part of primary health care and the goal of health for all by the year 2000.

Following the meeting of the CFNI Advisory Committee on Policy in late 1979, where the views of several representatives of governments and other participating agencies were expressed, the Center Director and his staff carried out a comprehensive evaluation and updating of the Institute's objectives, strategies and programs. These were set out in detail by objective, the strategy to be applied, and relevant programs in individual countries. Following a review of the CFNI documents by the Team and PAHO staff, the Team visited the Institute on 11-15 February 1980.

A preliminary report was submitted to the 84th Meeting of the Executive Committee (Document CD27/23, ADD. II). Twelve key issues were identified by the Team (Annex I) and these were sent to the 17 participating countries, CARICOM, and the University of the West Indies by the Director of PASB, for study and response. At the time of preparation of this document, two Governments (Guyana and Montserrat) had replied.

The experience with CAREC has shown that obtaining the responses from participating governments and institutions is difficult, time consuming, and delays the preparation of the final evaluation report. Nevertheless, these inputs are crucial to the success of the evaluation process. Therefore, in an effort to facilitate these inputs, the Evaluation Team was invited by CARICOM to attend the Meeting of Ministers Responsible for Health in the Caribbean, held on 15-17 July 1980, as observers. Any elaboration of the Team's report as a result of these contacts and additional country responses will be made available to the Directing Council.

The Directing Council is invited to examine the report and to determine the role of PAHO in the future development of the Institute.

Annex

<sup>1</sup>The Evaluation Team consisted of Dr. K. Standard, University of the West Indies; Dr. T. K. Murray, Food and Nutrition Consultant, Ottawa, Canada; and Dr. A. B. Morrison, Health and Welfare Canada, Ottawa, Canada.

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84th Meeting  
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June 1980

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PRELIMINARY EVALUATION OF THE CARIBBEAN  
FOOD AND NUTRITION INSTITUTE

A. BACKGROUND

The Caribbean Food and Nutrition Institute (CFNI), one of 10 PAHO Centers, serves 17 countries: 16 in the English-speaking Caribbean and Suriname. Most are small; the total population served amounts to approximately 5 million. CFNI currently has 14 professional staff, of which eight are located in Jamaica, four in Trinidad and Tobago, and one each in Barbados and Guyana.

In keeping with the global goal set by the World Health Assembly, the Institute has identified the following general objective: "to collaborate with Member Governments in their efforts to achieve health for all by the year 2000." To achieve the Institute's general objective, four "impact objectives" have been identified: undernutrition (especially protein-energy malnutrition), anemia, obesity (especially in adult women), and maldistribution of the food supply, both between countries and within countries and households. These objectives are to be achieved by five process objectives or strategies: policies, strategies and action plans; institutional development; education and training; public understanding; and diagnosis and surveillance. A matrix style of management is planned, which can be visualized by placing impact objectives along one axis of a grid and process objectives along the other. Work plans are being developed for each "cell" of the matrix.

## B. EVALUATION OF THE WORK OF THE CENTER

The role and work of CFNI are being evaluated as part of a more general review of the work of all the PAHO Centers, as directed by the XX Pan American Sanitary Conference. In general, the following format for the evaluation is being used:

- a) Self-audit by CFNI Director and his staff;
- b) Review of documents by PAHO Headquarters staff;
- c) Site visit by Evaluation Team;
- d) Identification by the Team of the principal issues to be considered by the Governments serviced by the Institute;
- e) Request, by the Director of PASB, for the views of the Governments on these issues;
- f) Preparation by the Team of the final report and recommendations to the Director of PASB.

Item (a) was completed in February 1980. The Institute was visited by the Evaluation Team<sup>1</sup> from 11 to 15 February 1980. The following comments constitute the preliminary report of the Team.

## C. PRELIMINARY REPORT

1. After four days of intensive review and discussion, the Team concluded that if CFNI did not exist it would have to be invented; if dismantled, it would have to be reassembled. The important services provided by the Institute could not be supplied by individual countries given present and projected status of development during the next decade.

### 2. The Staff

As noted previously, the Institute is staffed by 14 professionals: eight in Jamaica, four in Trinidad and two in one-man posts. The Team was favorably impressed by the caliber and competence of the professional staff of the Institute. A high level of motivation and professional

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<sup>1</sup>The Evaluation Team consisted of Dr. K. Standard, University of the West Indies; Dr. T. K. Murray, Food and Nutrition Consultant, Ottawa, Canada; and Dr. A. B. Morrison, Health and Welfare Canada, Ottawa, Canada.

dedication was evident. The Director made an excellent impression as a wise and thoughtful manager. He clearly had the full confidence of his colleagues, and meetings between CFNI staff and the Team were characterized by candor, frankness and goodwill. The Team was particularly impressed by the Director's participative management style, which encouraged initiative and cooperation between staff members. The staff members shared with their Director a clear view of the role of the Institute. The Team noted with great satisfaction the extensive amount of objectives setting and planning which had been conducted by CFNI staff.

### 3. Physical Facilities

3.1 The physical facilities of CFNI are far below standard, and can only be described as deplorable. The building, erected as a "temporary" building during World War II, is badly infested with white ants, cannot economically be repaired, and must be replaced as soon as possible. The highest priority should be given to obtaining new quarters.

3.2 A new building could appropriately be sited on a medical school campus, or in conjunction with a national nutrition unit. There would be some advantage in terms of prestige for CFNI if the building were located on a campus. Access to library and computer facilities is essential; at present these are located in Jamaica, Trinidad and Barbados. Although alternative sites were considered, the present location in Jamaica, on balance, is considered most desirable. Land is available and relationships with the University of the West Indies (UWI) are long established and work well.

### 4. Geographic Distribution of Staff

4.1 The Team was of the view that the staff of CFNI should not be dispersed. The Team recommends that a core group be maintained at Headquarters in Jamaica, with small outreach units of appropriate staff members temporarily posted to geographic locations within the Caribbean region for short periods of time.

4.2 The outreach units should contribute to the development of integrated health services in the region. Short-term consultants should be utilized by the outreach units as appropriate.

4.3 The Trinidad component of CFNI should be reduced to the minimum acceptable, and be associated with the National Nutrition Center or the medical school projected for Trinidad and Tobago.

## 5. The Program of the Institute

5.1 The Team concluded that CFNI is making a major contribution to the work of PAHO in the Caribbean. Given the current state of development of food and nutrition services and programs in the Caribbean, CFNI should be retained as a PAHO Center for at least the next decade.

5.2 The Institute is highly service oriented, and its objectives and programs are highly relevant to the needs of the region. The Team noted with satisfaction that CFNI has not become involved with research programs which are not relevant to its role and objectives. Institute staff should be encouraged to continue their interest in applied mission-oriented research. This should be conducted collaboratively with already existing institutions; there is no need for CFNI to develop its own laboratory facilities. Maximum use should be made of students, medical interns and residents, and visiting scholars in planning and conducting collaborative research programs with non-core budget funds.

5.3 The countries served by CFNI should be encouraged by PAHO to take more responsibility for the work of the Institute, including financial support. The Team noted with approval that the work of the Institute and the strategies adopted to achieve its objectives contribute positively to the attainment of self-reliance on the part of Member Countries.

5.4 The Team was of the view that interaction between CFNI and the Caribbean Epidemiology Center (CAREC) should be strengthened in areas of mutual interest, such as food-borne diseases and nutritional surveillance. The Team noted with satisfaction progress towards such cooperation in the recent nutrition survey in Belize. CFNI should be given responsibility for evaluating and commenting to the Director of PASB on the nutritional implications of Caribbean regional programs within the UN system, or under the aegis of the Caribbean Development Bank. If a continuing nutritional input is needed, it should be provided by program budgets. Broad, intersectoral collaboration with UWI should continue. Formal links should be established between CFNI and the Caribbean Agricultural Research and Development Institute (CARDI), perhaps by each providing a member to the other's policy advisory council. Similarly, formal links should be established with the Caribbean Agricultural Development and Advisory Service of CARICOM.

5.5 The Team noted with satisfaction the generally high level of cooperation between the PAHO Technical Divisions, Country Representative(s) (CR's), and CFNI staff. It recommends, however, that the linkages between the CR's, CFNI national governments and the PAHO Caribbean Program Coordinator be clarified and codified further.

5.6 The Team examined in detail the current balance between food and nutrition activities in the Institute, and concluded the balance is appropriate, considering the raison d'etre for CFNI. It noted that, of the four impact objectives identified by CFNI, three (undernutrition, obesity, anemia) deal primarily with nutritional matters, while the fourth (maldistribution) deals primarily with food. The Team agreed that CFNI should not develop programs in food microbiology and sanitation, food safety, or food legislation. Food technology programs, as required, should be conducted on a collaborative basis, with short-term consultants or UWI staff. Continued emphasis should be placed by national governments on collection of data on food supplies and health status. Such information must be available both to national governments and to CFNI for food and nutrition planning.

5.7 The Team noted the important contribution which the social sciences can make to nutrition programs, and recommends that steps be taken to add a qualified nutritional anthropologist to CFNI staff. The nutrition educator post should be established on a permanent basis. The education and public awareness programs of CFNI would benefit greatly from having access to curriculum development expertise.

5.8 The Team recommends that PAHO urge national governments to give high priority to the development of national nutrition councils. Such councils must be highly action oriented. The approach of CFNI in working with national governments in the development of nutrition councils is to be commended. The development of the Council in Belize is a good example of what can be achieved by cooperative efforts.

5.9 PAHO should encourage national governments to support long-term career development programs for nutritionists and related health scientists. This would not only strengthen national programs in nutrition, but would also provide a cadre of trained professionals familiar with the needs of the Region, upon whom CFNI would call. Professional associations and UWI can play important contributory roles. PAHO should encourage short-term secondments to CFNI from national governments and regional agencies. The Team recognized it is impractical to expect that senior policy makers in national governments will be experts in nutrition. CFNI should be encouraged, however, to continue efforts aimed at sensitizing senior policy makers to the importance of nutrition, and in providing them with sound scientific and technical inputs into the development of health and food policies.

5.10 The Team recommends increased collaboration between CFNI and the school of dental hygienists in Trinidad. For example, collaborative studies between CFNI, the school of dental hygienists and UWI on the fluoridation of salt as a means of combatting dental caries should be encouraged. A nutritional component should be included in the training of dental hygienists.

5.11 The Team recommends that PAHO, in consultation with national governments, consider structural and administrative changes in the bodies which are advisory to CFNI. Clear terms of reference should be developed for each advisory group.

5.12 A Scientific and Technical Advisory Committee (STAC) should be set up, composed of 5-7 members, most of whom should be from the Caribbean region. The Director of CFNI should serve as Secretary ex officio to the STAC. The members of STAC should be selected on the basis of their personal expertise and should meet as required (perhaps every other year) for an in-depth, independent and critical evaluation of the broad scientific and technical aspects of the program of CFNI. Observers should be invited from UWI, CAREC, CARDI and other regional technical and scientific agencies as appropriate.

5.13 An in-depth technical audit of the specific work plans of the Institute should be conducted every five years, and ad hoc groups of expert consultants should be appointed by PAHO.

5.14 The Policy Advisory Committee should meet annually to consider the policies, program management and budget of the Institute and make appropriate recommendations to PAHO. The Team recommends that this Committee be composed of 10 members, including six selected by the national governments served by CFNI, in conjunction with PAHO. Committee members should be of senior rank, able to represent their governments or organizations on policy issues. Care should be taken to ensure that ministries of health, agriculture and education, as well as UWI and CARICOM, are represented on the Committee. In order to ensure continuity, members should serve for three years, and the Chairman should be chosen by PAHO in consultation with national governments.

5.15 The Team reviewed in detail the current agreement between national governments, UWI, and UN agencies under which CFNI operates. The agreement is clearly out of date and should be reviewed and amended as necessary. The de facto role of PAHO as the executing agency should be clarified.

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September-October 1980

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Provisional Agenda Item 23

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Corrigendum  
26 August 1980  
ENGLISH AND SPANISH

PRELIMINARY EVALUATION OF THE CARIBBEAN  
FOOD AND NUTRITION INSTITUTE (CFNI)

Supplementary Report

Corrigendum

The third paragraph on page 2 should read:

"In light of item a) above, the Evaluation Team plans to visit at least two of the LDC's and Trinidad and Barbados before the end of 1980, in order to obtain information needed to produce its final report."



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PRELIMINARY EVALUATION OF THE CARIBBEAN  
FOOD AND NUTRITION INSTITUTE (CFNI)

Supplementary Report

All members of the Evaluation Team attended the Sixth Conference of Ministers Responsible for Health, held in St. George's, Grenada, 15-17 July 1980, in order to discuss issues relating to CFNI with senior officials. Frank and detailed discussions were held with officials from five countries and with a Senior Representative of the Caribbean Community Secretariat.

A summary of the views expressed is as follows:

- a) There was broad agreement that, in order to get a wide perspective of the Regions' needs, the Evaluation Team should plan to visit several representative countries, including lesser developed countries (LDC's) in the eastern Caribbean;
- b) In developing a preferred future for CFNI, the Evaluation Team should consider the issue of an active program of training designed to prepare Caribbean personnel for senior positions in the Institute;
- c) Careful attention should be paid by the Evaluation Team to ways and means by which the presence of the Institute in the LDC's can be enhanced;
- d) The Evaluation Team should discuss with national governments the appropriate involvement of governments in the planning process utilized by CFNI. The view was

expressed that CFNI should involve national governments early in the development of plans for its activities, so that its programs will more accurately reflect and be responsive to country views and priorities;

- e) The Evaluation Team should discuss with national governments the need for increased emphasis on training of governmental personnel, including teachers, nurses and community workers, for the provision of technical and advisory services to national nutrition councils, and for surveillance of nutritional status in the region.

In light of item a) above, the Evaluation Team plans to visit at least two of the LDC's (Trinidad and Barbados) before the end of 1980, in order to obtain information needed to produce its final report.

Annex

KEY ISSUES REGARDING CFNI IDENTIFIED BY THE STUDY TEAM  
REQUIRING INPUTS FROM PARTICIPATING GOVERNMENTS AND ORGANIZATIONS

<p>1. The Team concluded that the important services provided by CFNI could not be supplied by individual countries given present and projected states of development during the next decade and that the Institute should continue as a PAHO center for at least the next ten years.</p> <p><i>What are your views on a preferred future for CFNI to best serve your needs and those of the Caribbean in both food and nutrition?</i></p>	<p>Greater decentralization of staff, e.g. 1 PHN in Windward and 1 in Leeward Islands. Concentrate on LDC's.</p>	<p>Training of country personnel at various levels for country programs. Develop and distribute materials for education of the public. Nutrition surveys. Help develop and evaluate country programs</p>	<p>Resource center Capability to respond to requests more speedily.</p>	<p>Fact finding surveys Advisory services esp. policy and planning. Dissemination of information. Education and training (Value depends on usage)</p>
<p>2. The physical facilities of CFNI are very inadequate and must be replaced.</p> <p><i>Should a new facility be erected on the present site, as recommended by the Team?</i></p>	<p>Consider future role before deciding. Greater emphasis on LDC's &amp; therefore locate where can best serve them.</p>	<p>Yes, with closer ties with UWI's several faculties.</p>	<p>Yes</p>	<p>If done, building will automatically become UWI property.</p>
<p>3. The Team was of the view that the staff should not be dispersed, but a core group should be maintained at headquarters with small outreach units temporarily posted to other geographic locations as needed to provide service for short periods of time.</p> <p><i>Does this proposed distribution of staff meet your needs?</i></p>	<p>Agree. But in final analysis will depend on the needs of each country</p>	<p>Yes, provided staff visits not just for a few days. Increase personnel in Eastern Caribbean to better serve countries.</p>	<p>Adequate. But responses need to favor most needy, not necessarily in order of requests</p>	<p>No comments.</p>
<p>4. The Team recommended that PAHO encourage countries served by CFNI to take more responsibility for financial support of the Institute.</p> <p><i>What mechanisms do you propose whereby this may be achieved during the next decade?</i></p>	<p>Greatest need is for financial assistance to enable LDC's to establish nutrition posts. Ex-budg. funding with specified time limitation for country to fund.</p>	<p>Countries will need to know more about cost data. If CFNI were better known its value would be better emphasized.</p>	<p>No comments at this time.</p>	<p>PAHO objective for formal CFNI association with local/regional bodies(UWI);PAHO provide some lesser, flexible financial support. WI staffing increased.</p>
<p>5. <i>Should CFNI be given responsibility for evaluating and commenting to the Director of PAHO on the nutritional implications of Caribbean regional programs within the UN system, or those under the aegis of the Caribbean Development Bank?</i></p> <p><i>How should bridges be developed or strengthened between the Institute and other Caribbean regional institutions and agencies?</i></p>	<p>Yes. CFNI representation on committees of other Caribbean regional institutions.</p>	<p>Yes. Develop close relationships with agencies concerned with food and nutrition. Develop close contacts at staff level, joint approaches.</p>	<p>Yes. Stress coordinating role. Share information on planning.</p>	<p>Yes. Help governments negotiate for support for valid national projects.</p>
<p>6. The Team was of the view that national governments should place strong emphasis on collection of data on food supplies and health status.</p> <p><i>How do you propose this be accomplished?</i></p> <p><i>Does your government require consultant services in food legislation and marketing?</i></p>	<p>Requires commitment of decision-makers to improving nutritional status of the people.</p>	<p>CFNI has role in assisting Agriculture, Trade and Health collect data by: training personnel, develop suitable forms, carrying out surveys. Requires consultation in legis. &amp; mktg.</p>	<p>Assist countries set up system to collect, use and add to data. Existing CFNI systems can be introduced into territories. NC on consultation.</p>	<p>Governments accept responsibility for own nutrition monitoring "Once-off" surveys not very valuable. CFNI advise how to set up system. CFNI a clearing house.</p>

7. Would availability to CFNI of expertise in curriculum development be of assistance to you in introducing a nutritional component in educational programs?	Yes	Yes. Greatly.	Yes. Collaborate with CARICOM's present effort.	See (9) for change in level of courses
8. What mechanisms do you propose for the further development and greater effectiveness of national nutrition councils?	Greater commitment by regional decision-makers.	Have permanent staff statistician, administrator, nutritionist. Multisectoral linkages close contact with central planning.	Secretariat with full time technical and secretarial staff. Some executive power.	No comments.
9. Do you agree that long-term career development programs for nutritionists and related health scientists are needed in the Caribbean region?  If so, what mechanisms do you propose?	Agree, but must go hand-in-hand with creation of necessary posts.	CFNI should provide governments with guidelines, help train & retain personnel.	Very much so. With help of UWI faculties of Nutri., Home Eco., PH., EH. - training with Caribbean orient.	Reinstitute Diploma (UWI) course in nutrition to supplement M.Sc., B.Sc. not profitable. CFNI & UWI collaboration
10. By what mechanisms can government policy-makers be sensitised to the importance of nutrition in social and economic development?	Cost/benefit & cost effective techniques have failed so far. Establish nutrition care is human right.	Direct attention to economic benefits of sound nutrition practices, food production. Active participation of policy-makers.	Must demonstrate hard cash benefits. Document cost/benefit.	Indirectly, through advisory services and development of outside support.
11. The Team recommended that PAHO, in consultation with national governments, consider structural and administrative changes in the bodies which advise CFNI. In this regard, what are your views on:				
a) redefinition of the terms of reference of the Policy Advisory Committee, such that				
(i) it would meet annually to consider the policies, program management and budget of the Institute and make appropriate recommendations to PAHO;	Agree	Agree	No comments at this time.	"Eminently sensible"
(ii) it would consist of ten members, including six selected by national governments;	Agree	Number not specified		
(iii) members would be of senior rank, able to represent their governments or organizations on policy issues;	Agree	Agree		
(iv) members would serve for three years and the chairman would be chosen by PAHO in consultation with national governments.	Agree	Serve 3 years.		
b) establishment of a Scientific and Technical Advisory Committee of 5-7 members to provide an in-depth and critical evaluation of the broad scientific aspects of the program of CFNI.	Agree	Agree. Numbers not mentioned.		
c) detailed technical audits of the specific work plans of the Institute, to be conducted periodically by <u>ad hoc</u> groups of expert consultants appointed by PAHO.	Agree	Yes, making sure activities relate to governments' goals.		
12. The current agreement under which CFNI operates clearly is out-of-date.  In amending it, should the <u>de facto</u> role of PAHO as the executing agency be clarified?	Yes	Yes. Clarify relationship with CARICOM Secretariat.	No comments at this time.	No comments.