



# Partnership for Sustained Elimination of Iodine Deficiency

Report of Board Meeting  
November 29-30, 2001  
Amsterdam

Hosted by the European Salt  
Producers Association (ESPA)

Present:

Jan W.F. van Ingen (Chair), Bernard Moinier (ESPA)  
Walter W. Becky, Richard L. Hanneman (Salt Institute)  
Bruno de Benoist (WHO)  
Jack C.S. Ling, John T. Dunn (ICCIDD)  
Glen F. Maberly, Bob J. Baldwin (Emory/CDC)  
Shahnaz Kianian-Firouzgar, Gregory Gerasimov (UNICEF)  
Bill A. Brown, Dan P. Borba, Eddie Sigurdsson (Kiwaniis International)  
David P. Haxton (MI)  
Frits van der Haar (Secretariat)

Absent with apology:

J. Werner Schultink (UNICEF)  
M.G. Venkatesh Mannar (MI)  
Lin Jiahua (Chinese National Salt Industry Association)

1. Approval of Agenda

The agenda was agreed with minor rearrangement

2. Approval of report of previous meeting

The report of the teleconference, dated 24 September 2001, was accepted.

### 3. Actions arising from previous meetings

#### a. *MOU (Replacing a By Law)*

A new and shortened version, shared by the Subcommittee (Mannar, Brown and Becky), was much appreciated. There was consensus that the Partnership requires a written framework that accurately reflects what it aims to accomplish.

Adjustments to the new text were discussed. Reference throughout the document to “signatories” should be changed to “participants”, and reference to funding sources (two paragraphs) should be removed. The list of activities should specifically include “evaluation” and the list of potential Partners should include “civic organizations”. The Board decided to rename the document to a “Statement of Intent” among Partner organizations.

Bruno de Benoist offered to provide inputs from WHO perspective for consideration by the Subcommittee within 2 weeks time. The Subcommittee was requested to finalize the draft Statement of Intent before mid December and share it by Email. The next Board meeting would agree on the final text.

#### b. *Communication on the Partnership*

As discussed at the previous meeting, Partners have started communicating to their constituents about the existence of the Partnership exists and what it stands for. Several examples were cited of such information sharing through the regular dissemination channels and in special events and meetings. It was agreed that consistent information sharing is vital to foster better understanding of the need for Partnership work in achieving global success and permanent progress of elimination efforts.

#### c. *Report of China experience*

Upon request by the Board in its teleconference of 24 September 2001, Lin Jiahua had shared a report of the experience in China in IDD elimination (see Attachment A). Jack Ling –Senior Advisor CNSIA- had been asked by CNSIA to speak to the subject.

Jack Ling stressed the outstanding progress made in a short time frame in China, citing three essential success factors that had been underlying the rapid increase in household use of iodized salt: (a) Political commitment at the highest possible level; (b) Mobilization of all mass organizations; (c) A national review of progress in 2000 led to a re-formulation of the national IDD elimination policy, shifting the emphasis on goal achievement to periodic renewal of commitment by all walks of life. The new policy emphasis on enhancing the sustained elimination was proclaimed by the Minister of Light Industry in a 7-point agenda.

Despite the successes already obtained in China, some problems remain, particularly in 7 Provinces where USI has not been fully accomplished yet. Authorities see problems in some parts of the country where decision-making is decentralized and at cross-purposes with the USI concept. Jack Ling reminded the Board that the basic reason for the high-level political commitment to IDD elimination is that the Leaders realized the importance of IDD elimination for national economic development.

In discussion, the Board noted that China Salt is planning to introduce a larger logo linking the current non-duplicable hologram logo with brain development. China also has developed a field instrument for the quantitative test of iodine in salt. A first performance evaluation of the instrument at the University of Toronto, sponsored by MI, was reported to be excellent. Validation of the instrument's performance by members of SI and by CDC is planned, as part of the preparations for a Side Event at the annual SI meeting in Miami.

The Board thanked Lin Jiahua and Jack Ling for their contribution.

#### *d. Reviews of National Progress*

ICCIDD Executive Director John Dunn reported. UNICEF New York has requested proposals for Partnership reviews in 3 countries. The experience would serve as an input for future national assessments. John Dunn had submitted a proposal for Panama and is awaiting UNICEF's response. Proposals for Zimbabwe and Bhutan are being considered, while Madagascar and Cameroon might also be considered. The process was slow and complex because coordination is required for generating the initial request, for consultation by ICCIDD Regional Coordinators with counterparts and prospective mission members, and for proposal development and approval. John Dunn emphasized that the process was not exclusive of any inputs by other Partners. ICCIDD has started stimulating the formation of National Coalitions in Thailand, Indonesia, South Africa and India.

In discussion, the Board recommended that existent networks of expertise should be involved, for example the Africa Micronutrient Task Force for verification work in African countries. The Board noted that a Subcommittee had worked on a guideline for the conduct of such reviews, and it requested that ICCIDD would ensure that all Partnership members played their full role as and where possible, including the salt industry and Kiwanis. Readiness – subject to Government approval - in the CEE/CIS/BS region was cited: Yugoslavia, Macedonia, Croatia, Armenia, Bulgaria, Czech Republic, Slovakia and Poland were identified at a regional UNICEF management meeting. The feeling by the Board was that the overall progress was too slow and too limited. The Board proposed that in CEE/CIS/BS, Gregory Gerasimov (Regional ICCIDD Coordinator) with UNICEF should take a lead role, while inviting contributions by all Partners. UNICEF stated the need for sharing the existent guidelines with country counterpart organizations.

The Board agreed that the Subcommittee for guideline development should be revived. Materials for guideline development had been posted on the Emory University Web site (sph.emory.edu/PAMM) and progress with this work would require inputs from ICCIDD and other interested members. The Board requested that the Subcommittee would finalize the draft guidelines by end December in close collaboration with ICCIDD. Next steps would include sharing of recommended methods and procedures with lead organizations in countries ready for such work.

*e. Global Score Card*

On request by the Board in its teleconference on 24 September 2001, the Secretariat had produced an Update of the Global Score Card (dated November 2001). UNICEF had presented a preview at the Board meeting in Chicago, 16-17 July 2001. The present Update was developed using the global database, maintained in UNICEF (see ChildInfo.org), including 71 end-decade reports of % household use of adequately iodized salt. The GSC Update has used UN population estimates and birth rates for 2001. Frits van der Haar presented key findings in the Update.

Based on the available data, it is estimated that 62% of households in the developing world use adequately iodized salt (>15 ppm iodine; all surveys using a single batch of test chemical). For the 71 countries with most recent data (1998 onwards), the availability is 67%, which reflects the improvement that continues being made. The analysis excludes 31 industrialized countries. Large countries (>15 million population) with a significant decrease in reported USI include India, Viet Nam, Kazakhstan, Egypt, Algeria and Myanmar.

As previously, an approximation of the numbers of newborns protected against possible brain damage from iodine deficiency was obtained by combining the population and birth rate data with the % households using iodized salt. Of all newborns not protected, the largest numbers are in South Asia (India, Pakistan), East Asia/Pacific (Philippines, Indonesia) and East Africa (Ethiopia). A map was provided of countries that might be considered for “Confirmation of Progress” in view of the documented progress and in consideration of other information from Partner sources (see Attachment B). The presentation ended with suggesting countries where external reviews might be considered to influence policy and accelerate the progress towards USI (see Attachment C).

In discussion, the Board re-confirmed that universal salt iodization was the agreed-upon strategy for reaching the goal of IDD elimination. The scientific validity was discussed whether newborns being counted as “protected” would otherwise have suffered brain damage. In light of the advocacy and public information nature of the issue, however, it was felt that the statement is acceptable as an index of progress in eliminating iodine deficiency. The background to acceptance of the USI policy was that no country should accept the risk that a child might be born with brain damage due to iodine deficiency.

4. Special Session: Iodine Nutrition in Europe

In a special session arranged by ESPA with special guests invited, the Board considered next steps in addressing issues on the iodine nutrition situation in Europe. UNICEF has shared a report prepared by Gregory Gerasimov (Attachment D).

The Board was concerned about the apparent lack of political will and priority for elimination efforts in some countries of Europe where the literature clearly shows that IDD prevails. The proliferation of iodized food products with the subsequent threat of weak focus on USI in some countries also was reason for concern. The Board encouraged ESPA to continue its data collection on iodized salt penetration rates in key countries through its membership.

The Board invited a Subcommittee consisting of ESPA, UNICEF and Kiwanis with participation by ICCIDD, WHO and MI to prepare an initiative for advocacy on IDD elimination through USI in Europe. Kiwanis indicated their preparedness to host a planning meeting of Partners in Ghent in January 2002 to start the planning. Other interest groups should be co-opted once the plans were firmed up among leading Partners. An event could be held in Fall 2002.

#### 5. Partnership Launch

The dates 8-10 May 2002 are being considered for a Special Session on Children at the UN General Assembly, and an official confirmation is awaited. UNICEF indicates that a Partnership Side Event would be appreciated. The Board noted that a Subcommittee had finalized a program for the side event previously planned for 19 September 2001. It is assumed that largely the same program might be appropriate.

The Board agreed to revive the Subcommittee and to ask UNICEF to take a lead among Partners. The consensus was not to wait until the new dates for the UNGASS were made official.

#### 6. New information shared by Partners

Walter Becky reported on an initiative among SI, MI and Emory/CDC for a meeting among salt producers from the Western Hemisphere during the SI annual membership meeting in Miami, March 2002. SI would encourage their members to participate and it offered to collaborate with Partners to draw in key significant salt producers from the region to a special session on March 10-11. The purpose would be to strengthen the commitment by the salt industry to USI and to consider their specific roles in sustaining the success. A list was shared of activities to be undertaken in preparation for the event.

On discussion, the Board embraced the proposal and considered contributions that could be made by Partners. Kiwanis, WHO and ICCIDD stated their agreement to collaborate in the event and its preparation. SI (Dick Hanneman) would be leading these efforts.

Jack Ling reported of his recent trip to Mongolia and China and John Dunn reported on ongoing work by ICCIDD. Progress in Mongolia is very difficult because of weak physical infrastructure, long distances and a dispersed population. The government has recently shifted the lead public responsibility to the Ministry of Agriculture. In China, progress is slow in Xinjiang and Tibet. In coastal areas the sales of non-iodized salt is hard to curtail. A special effort will be launched with funding from the Gates grant to mobilize the China Salt network of 750,000 licensed salt retailers for dissemination of information on IDD and iodized salt. The iodine group at University of Semarang, Indonesia, has been designated as a national Center of Excellence. This may grow out to be the nucleus for forming a National Coalition.

Glen Maberly presented on his recent trip to the Philippines on Early Child Development, which emphasizes IDD elimination. The Kiwanis/Sister Cities model of harbor town protection, successful in Davao, is being replicated throughout the country. Bob Baldwin presented on progress in building the worldwide network of reference laboratories. Next steps include a selection of laboratories to take a lead QA role in their respective regions, and holding an initial training course to strengthen capacity in QA service provision. John Dunn requested that ICCIDD be included in the decision process.

David Haxton mentioned the efforts in UNICEF to strengthen corporate commitment to USI and IDD elimination. Recent regional management meetings in Bangkok and Istanbul had addressed the next strategic steps in UNICEF support to countries in achieving and sustaining the elimination goal. Werner Schultink, David Haxton and Jack Ling had participated in both meetings and David Haxton is providing specific follow-up through the UNICREF country offices.

Bob Baldwin informed the Board on the progress in building a global network of iodine laboratories. The CDC lab has collected responses and nominations for an initial network of leading reference labs in the regions, and it is preparing a proposal for lab capacity training in QA methods and procedures. A teleconference among the principal co-sponsoring agencies is planned before the end of 2001 to discuss these next steps. On discussion, Board members recommended the iodine laboratory in China for inclusion in the network. John Dunn requested that he be consulted on behalf of ICCIDD in advance of the final selection of initial regional reference labs. Bob Baldwin responded that he would relay this request to the Network Co-sponsors in the upcoming conference call.

Frits van der Haar reported on ADB-UNICEF support in Central Asia. A multi-sector Roundtable meeting in Almaty recently ended with agreements on national salt (iodine) and flour (iron complex) fortification strategies in Kazakhstan, Uzbekistan, Mongolia, Kyrgyz Republic and Tajikistan, with approx. US\$6 million from the Japan Fund for Poverty Reduction. Azerbaijan was expected to follow soon. A major effort will be to accelerate USI. UNICEF is hiring national officers in each of the country offices as a "Fortification Task Force". CDC and UNICEF are planning for hands-on operational training.

## 7. Information from the Secretariat

In the recent period, major activities included the assistance in Central Asia, the Global Score Card Update, assistance to the Miami meeting initiative and the preparations for the Board session on Iodine in Europe. A weakness of the Secretariat is in its communications capacity. Partners were invited to share their data and information for the Secretariat to disseminate. A website URL, IodinePartnership.net has been registered and the Secretariat is preparing to post Partnership information soon.

## 8. Next Board Meetings

A next meeting is planned for Miami, on Monday afternoon 11 March 2001, possibly with some members participating by teleconference. The UNGASS in New York, 8-10 May 2001 would be a next opportunity. In Fall 2002, a Board meeting might be held along with the Europe Advocacy meeting (see separate report in Attachment D).