



“It started as a small lump on my throat and gradually swelled to the size of a melon”



Nura Hamid now sells *Annapurna* iodised salt from her stall in Saltpond's weekly market.

“It wasn’t painful but it made me feel very uncomfortable socially, so I tended not to mix with other people”

Says Nura Hamid, a 40 year old mother of two living in Saltpond, a fishing town in Ghana’s central region.

Nura’s lump was a symptom of goitre, one of a number of disorders caused by iodine deficiency. She is now fully recovered from the condition that made her life so difficult for so many years but her condition is by no means unusual. According to UNICEF, 740 million people, more than the combined population of Europe and the USA, suffer from iodine deficiency and it is most acute in developing countries.

As well as goitre, it also causes mental retardation, brain damage and, in pregnancy, still births, abortions and congenital abnormalities.

“The real impact of iodine deficiency isn’t physical, it’s mental”, explains Rosanna Agble, head of nutrition at Ghana Health Service.

“Iodine is a key micronutrient in the early stages of brain development, so children born to iodine-deficient mothers often have a lower IQ. This not only limits the child’s individual potential, it also has wider social and economic implications”. UNICEF calculates it costs

“It costs just five cents a year to provide someone with sufficient iodine”

just five US cents a year to provide someone with sufficient levels of iodine to prevent these disorders and believes the best way of achieving this is to add iodine to the nation’s diet through the salt that it buys for cooking. Iodised salt – salt that has had iodine added

to it – has long been a way of doing this. Over the past decade Ghana Health Service has run numerous public awareness campaigns on the need for iodine, but these have had limited success.

The challenge in Ghana, as in other countries where much of the population lives on less than a dollar a day, is persuading people to switch to iodised salt when historically it has cost twice as much as the raw, non-iodised salt they are used to buying.



Ernestina Agyepong (left) nutrition project officer, UNICEF, talking to Rosanna Agble, head of nutrition, Ghana Health Service, and Herbert Smorenburg, head of the Unilever Health Institute, Ghana, as she sets out from UNICEF's offices in Accra.

“To put real tangible things in place you need the private sector”

UNICEF has done much to raise awareness of the importance of iodine in the diet but, as Ernestina Agyepong, UNICEF's nutrition project officer in Ghana with responsibility for control of micronutrient deficiencies explains, “we at UNICEF can push things so far but to put real tangible things in place you need the private sector”.

Unilever has been in Ghana since 1963 with brands like *Sunlight*, *Omo* and *Blue Band* margarine. It is keen to build its market share in sub-Saharan Africa, but selling brands profitably to people with such low incomes at a price they can afford to pay represents a formidable challenge. According to Raphael da Silva, head of Unilever's Popular Foods team in Africa, “the only way you can persuade people to switch to an iodised salt is if you can sell it at or close to the price people are used to paying for raw, non-iodised salt. And the only way you can do this is by rethinking the business system and the way brands are normally developed and sold”.

And that's exactly what the Popular Foods team has done. To get prices as low as possible, Unilever scrutinised the cost of everything. Where something did not add value, it was taken out. To keep capital costs down, they outsourced production of iodised salt, creating over 200 jobs. They developed partnerships with local manufacturers, investing time, resources and training to help them raise quality standards. The company was able to save on brand development costs by drawing on its experience in India, where Unilever had developed a low-cost iodised salt called *Annapurna* – the first brand in the world to be endorsed by the International Council for Control of Iodine Deficiency Disorders. This had proved popular in urban and rural parts of the country. As in India, Unilever has made this available in sachet sizes as small as 100 grams and at prices as low as 500 Ghanaian cedis a packet – the equivalent of six US cents – to place it within the price reach of some of Ghana's poorest families.

Manufacturing, packaging and pricing were not the only challenges they faced. Seventy per cent of Ghana's population lives in rural areas and some of the places where iodine deficiency is greatest are in the most remote parts of the country, where roads and transport are poor and retail distribution channels are almost non-existent.

Even after finding ways to address these obstacles, there was still the challenge of persuading consumers to try this new product. A series of roadshows was organised to raise awareness of *Annapurna*, with the brand's health messages aligned with those of Ghana Health Service to build consumer confidence.

Since its launch in 2000, *Annapurna* has helped to nearly double the use of iodised salt in Ghana, from 28% of the population in 1998 to around 50% of the population in 2002. The product became profitable for Unilever after just 18 months, nearly two years ahead of schedule, and now accounts for around half the market for cooking salt in Ghana.

“This really has been a win-win-win situation”

“This really has been a win-win-win situation”, says Raphael da Silva. “Unilever has developed a successful business, UNICEF and the Ghana Health Service have achieved much greater take-up of iodised salt, and our decision to outsource production has had a big impact on local employment and manufacturing”.

UNICEF's Ernestina Agyepong agrees. “Before we teamed up with Unilever it took a lot of advocacy getting all the salt producers to understand the importance of iodine and quality standards. Unilever knew all this already and had the production and marketing know-how to promote an iodised salt. Above all, they had the willingness to do things and weren't bogged down by bureaucracy”.

For Paul Victor Obeng, owner of a large solar evaporation salt production plant outside Accra, the business partnership with Unilever has also brought benefits.



Christian Asante (left), former business manager of Unilever's Popular Foods Team in Africa with Paul Victor Obeng, owner of Ningo Salt Production, a solar evaporation salt plant outside Accra that supplies Unilever with iodised salt.

“Since we started working with Unilever we've been able to produce a higher quality product, accelerated sales and probably saved four years in our development plan”.

In fact, it has proved such a successful model that Unilever is planning to introduce *Annapurna* salt to other countries in Africa and is launching new products enriched with micronutrients, such as biscuits fortified with vitamin A and zinc to boost children's immune systems.



Krrunchy, a biscuit fortified with vitamin A and zinc to boost children's immune systems, which Unilever has launched in Ghana following the success of *Annapurna* salt in helping to tackle iodine deficiency.

Above all, this initiative has been a success for the millions of people who now have access to affordable iodised salt and the hundreds of people involved in distributing *Annapurna* salt in the towns and villages of Ghana. Among their number is Nura. Although she never suffered from the worst effects of iodine deficiency, her experience of goitre and her recovery from it have made her an enthusiastic advocate of iodised salt. An enthusiasm she is now putting to good use by selling *Annapurna* salt from her stall in Saltpond's weekly market.



Members of Unilever's Popular Foods team take their roadshow on tour with the message that *Annapurna* iodised salt is 'for growing minds'.

Unilever believes that one of the best and most sustainable ways it can help to address global social and environmental concerns is through the very business of doing business in a socially aware and responsible manner.

This is one in a series of occasional articles called **Global Challenges – Local Actions** that looks at how Unilever companies are tackling global social and environmental concerns by working in partnership with local, national and international agencies, governments, business organisations and NGOs.

For more details of how Ghana Health Service is working to improve the health of people living in Ghana, visit www.moh-ghana.org

Following the success of their collaboration in Africa, Unilever and UNICEF decided to formalise their partnership in December 2004, to work

together to make a measurable contribution to the United Nations Millennium Development Goals and, in particular, MDG 4: "the reduction by two-thirds, between 1990 and 2015, of the under-five mortality rate".

If you would like to know more about UNICEF's nutritional priorities and the work it is doing on the ground to deliver essential micronutrients, visit www.unicef.org/nutrition/index_action.html

If you would like to know more about Unilever's social and environmental activities, please visit www.unilever.com/ourvalues/environmentandsociety. There you will find copies of our latest social and environmental reports and copies of previous articles in this series. Subjects of other articles include:

Global Challenges – Local Actions

- River pollution in Indonesia
- Diarrhoeal diseases in Asia
- Climate change/refrigeration in Europe
- Rural micro-entrepreneurs in India
- Sustainable fishing off Africa

We would like to hear from you. If you have any questions about this publication or any other aspect of Unilever's environmental and social policies, please contact: csrcomment@unilever.com

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