

low proportions (0.8%) and (0.7%) of the teachers were taking alcohol and cigarette respectively. Roots and tubers, cereals and legumes were their main staple. Meat and fish, as well as fruits and vegetables were not regularly consumed. The teachers had medium dietary diversity and 41.1% had normal weight while 3.5%, 34.8% and 20.5% had underweight, overweight and obesity respectively. Majority (58.8%) of the teachers were malnourished. The female teachers were significantly more overweight or obese than their male counterparts ($p < 0.05$).

Conclusion: High levels of overweight and obesity among the teachers confirmed the importance of nutrition education programme among the teachers.

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IRON DEFICIENCY ANEMIA AMONG INFANTS AGED SIX TO NINE MONTHS IN KEIYO SOUTH DISTRICT, KENYA

Introduction: The increased prevalence of iron deficiency anemia among infants can be attributed to the consumption of an iron deficient diet or a diet that interferes with iron absorption at the critical time of infancy, among other factors.

Objectives: The objectives of the study were: to establish the proportion of infants positively screened for iron deficiency anemia and to determine the factors associated with iron deficiency anemia among infants aged 6 to 9 months.

Methods: Hemoglobin values and peripheral blood smears of the 244 infants, interviewer schedules administered to 244 mothers generated data over a 3 months period, using the cross sectional study design. Relationships were established by use of chi-square and factors predicting IDA were obtained by linear regression.

Results: The mean hemoglobin values were 11.3 0.84 g/dl. The infants who had anemia were 21.7% and further all peripheral blood smears indicated iron deficiency anemia. The mean dietary intake was 8.31.90 g/day a mean deviation of -2.611, below the recommended RDA of 11. Predictors of iron deficiency anemia in this study were; iron intake ($t = -3.138$; $p = 0.01$), proper waste disposal ($t = 3.005$; $p = 0.03$), available fuel ($t = -2.870$; $p = 0.04$), hygienic hand washing ($t = -2.000$, $p = 0.047$).

Conclusion: Anemia was evident among the infants and proved to be a proxy for iron deficiency anemia.

Keywords: IDA, infants, screening, factors, dietary iron, hemoglobin, peripheral blood smears

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URBAN AND PERI URBAN HORTICULTURE IN NAMIBIA UNDER THE FRENCH EMBASSY'S SOCIAL FUND FOR DEVELOPMENT

The French Ambassador to Namibia, Mr. Jean-Louis Zoël has made available N\$250,000.00 under the Social Fund for Development (SFD) in support of Judea Harvest Namibia (JHN) in June 2011. The money is used to improve food security and nutrition to vulnerable people living in the urban and peri urban areas of Windhoek, Rehoboth and Okahandja. The SFD is dedicated to social micro-projects.

- To contribute to food security and income generating activities, for poor and vulnerable communities.
- To build the capacity of the communities in urban horticulture and entrepreneurship skills.

The project was implemented in a joint venture between UPH and JHN. The UPH is coordinating the project, providing all the horticulture training whilst JHN is doing the administration of the project.

The beneficiaries of the project are orphans, HIV orphans and poor people as part of a feeding program by JHNs members and the Hope Village HIV hospice.

Most of the training was done on site. The project also received visits from the UPH coordinator on a regular basis.

All the champions (super gardeners) and administrators who are involved in a horticulture project received a two days workshop on topics such as production, micro-gardening, good agriculture practice, the installing and repairing of vegitunnels, the cost to run a vegitunnel, the income from a vegitunnel and planning to administer a vegitunnel. This workshop was concluded after a written examination to test skills and understanding. Hydroponic techniques are used in the vegitunnels to produce vegetables in 8 liter plastic bags filled with sand as a medium. A nutrient solution was used to feed the plants. Five communities are involved with this project since the date of implementation. Hope village proved to be the show case. This HIV hospices vegitunnels provide vegetables to 250 to 300 kids. The garden produces Swiss chard, carrots, beetroot, lettuces, onion and parsley.

Children with HIV/AIDS have their immune system boosted by eating fresh vegetables on a regular basis. They even started to go to school after their medication and a good meal.

Bank Windhoek donated N\$15,000.00 for the installation of a fence around the garden at Hope Village after one of their site visits. This fence was needed to keep out the little ones from the planting operations in the vegitunnels.

The Hope Village project was visited by the ambassador of France to Namibia with his team on Friday the 28th of October 2011 to update themselves with the general progress of the SFD project.

Hope village plans to approach the Municipality of Windhoek for extra land to expand their gardening project in order to make extra income.

All the SDF projects were closed at the end of March 2012. The administrators and champions will then have to continue to sustain their projects in future.

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INTERNATIONAL REFERENCES AND STANDARDS METHODS IN THE DEFINITION OF THINNESS, OVERWEIGHT AND OBESITY IN A SAMPLE OF URBAN CHILDREN AND ADOLESCENTS IN CAMEROON

Background: Childhood nutrition in Cameroon have been associated with stunting, wasting and underweight, however evidence highlights increasing overweight and obesity among urban population. We examined the prevalence of thinness, overweight and obesity in children ranging from 8 to 15 years according to several published data.