

Biomass Energy Conservation –

a „*health(y)*“ issue?



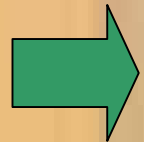
Health

HIV/AIDS

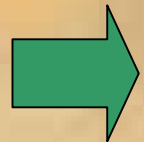
Presented by:

Dr. Christoph Messinger
SADC – ProBEC North
Regional Co-ordinator





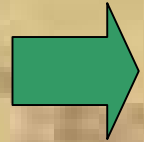
- What is Pro**BEC**? (Background information)



- Two direct links of **BEC** to the **health sector**



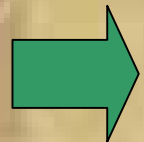
- What do we perceive as **health issues**?



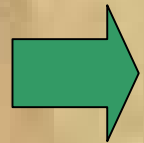
- What do villagers perceive as **health issues**?



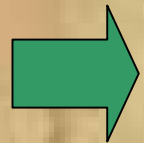
- Mitigation of common **health issues** in villages



- **BEC** support to mitigate village **health issues**



- „**Health** and **Fuel**“ promotion approach



- Mainstreaming **BEC** – the general approach

What is ProBEC ?

SADC - ProBEC

*Programme for
Biomass Energy Conservation
in Southern Africa*

Vision

All population should be able to **satisfy**
their **energy needs** in an **affordable**
and **sustainable manner**



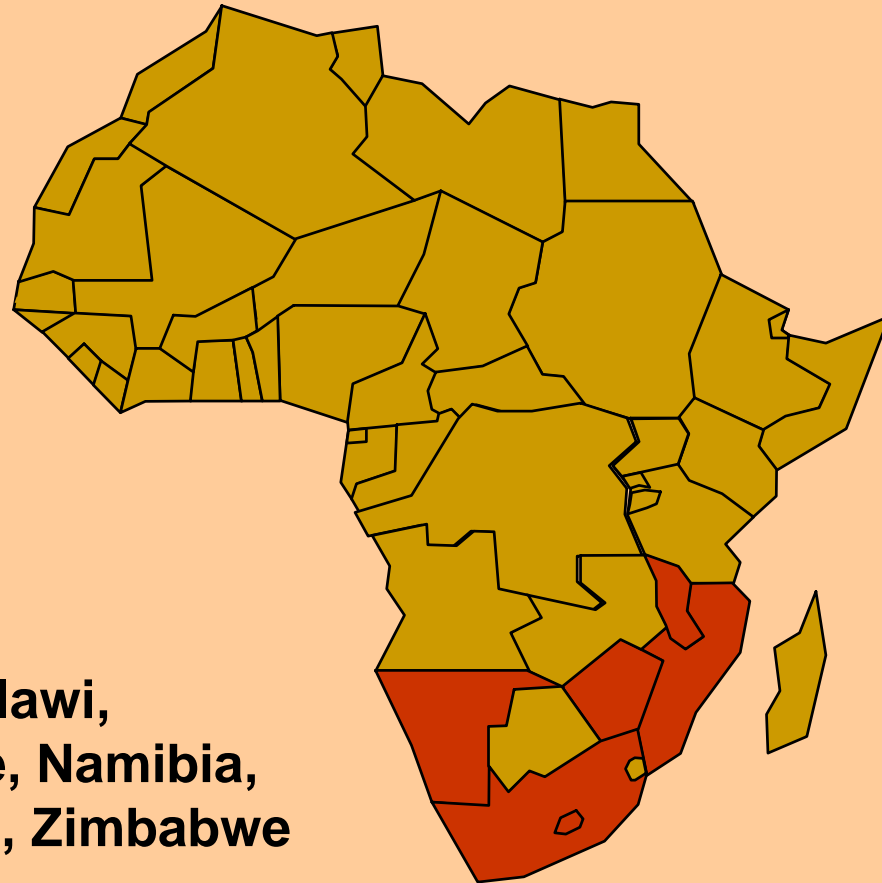
What is ProBEC ? Cont.

What is Biomass Energy Conservation ?

economical, efficient and sustainable use of biomass energy

- Energy efficient technologies (improved stoves)
- Energy efficient techniques (fuel, fire and kitchen management)
- Shifting to other sources of energies which are affordable (e.g. other renewable fuels)
- Sustainable Natural Resource Management

SADC ProBEC so far



**Lesotho, Malawi,
Mozambique, Namibia,
South Africa, Zimbabwe**

Orientation Phase: 97 – 98 (financed by BMZ and EU)

1st Implementation phase: 99 –02 (financed by BMZ and EU)

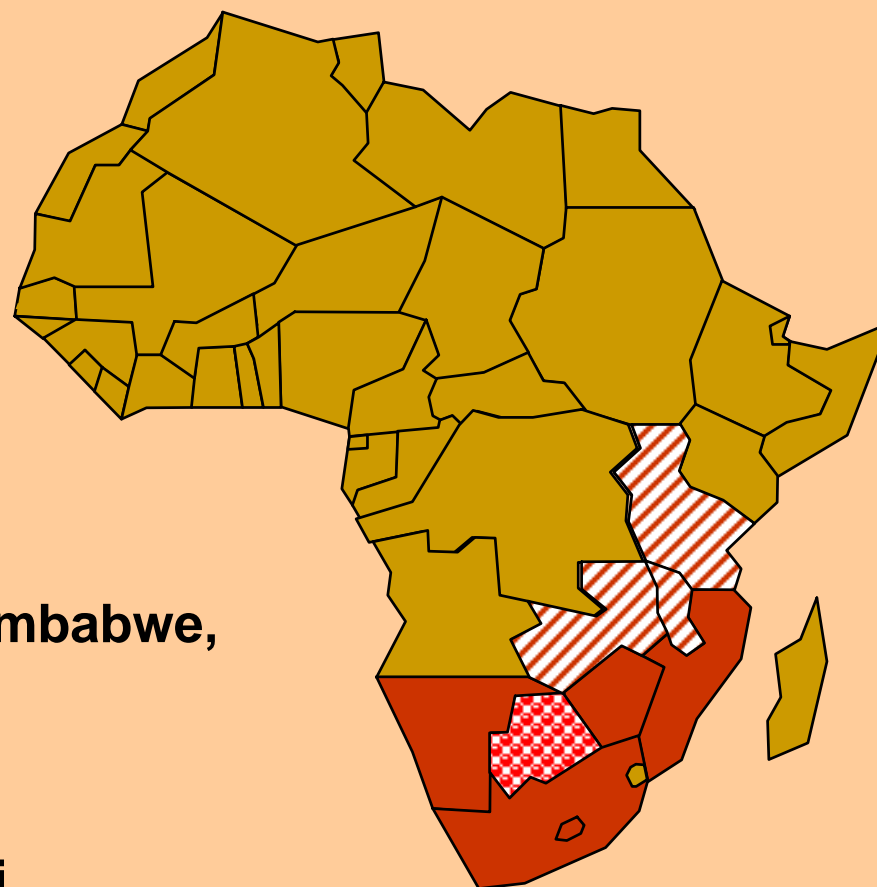
2nd Implementation phase: 02 –05 (financed by BMZ)

SADC - ProBEC

partner countries as from July 2004

ProBEC SADC South:
Lesotho, Mozambique,
Namibia, South Africa, Zimbabwe,
Botswana (forthcoming)

ProBEC SADC North:
Zambia, Tanzania, Malawi



Two direct links of **BEC** to the **health sector**

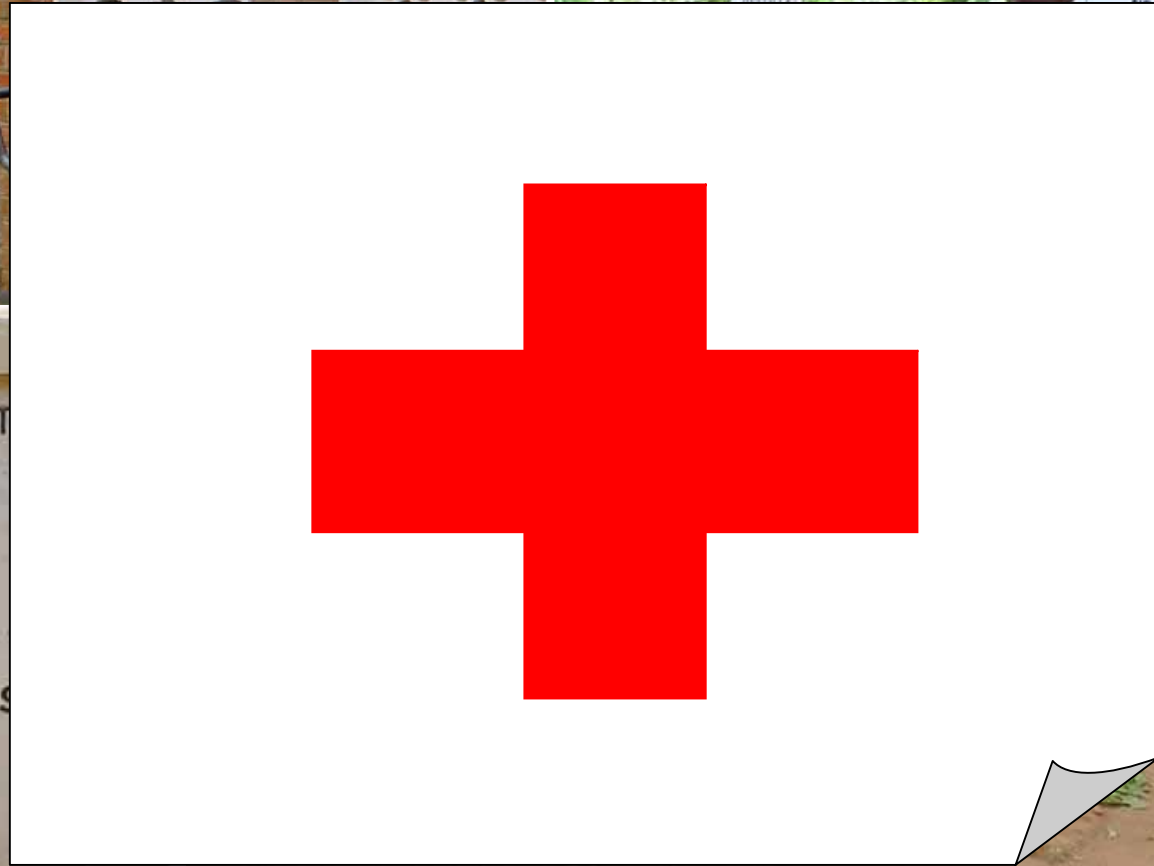
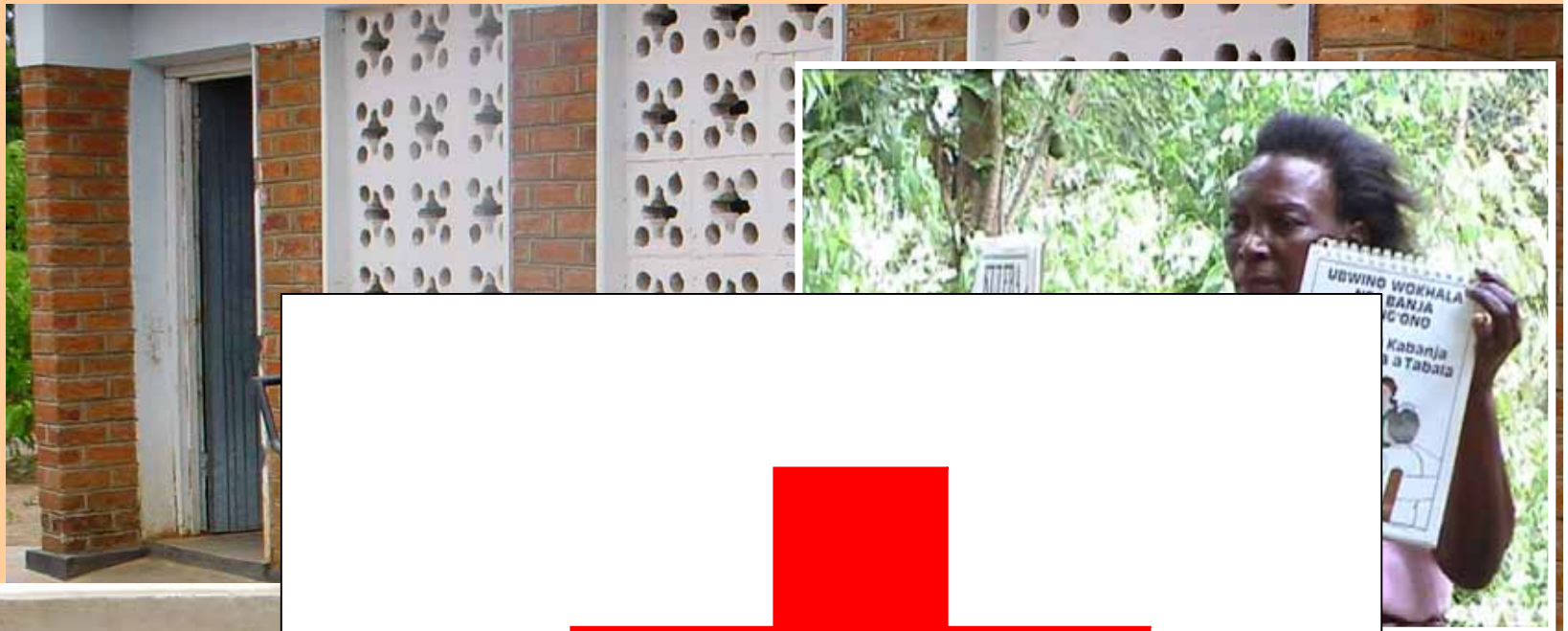


Indoor air pollution

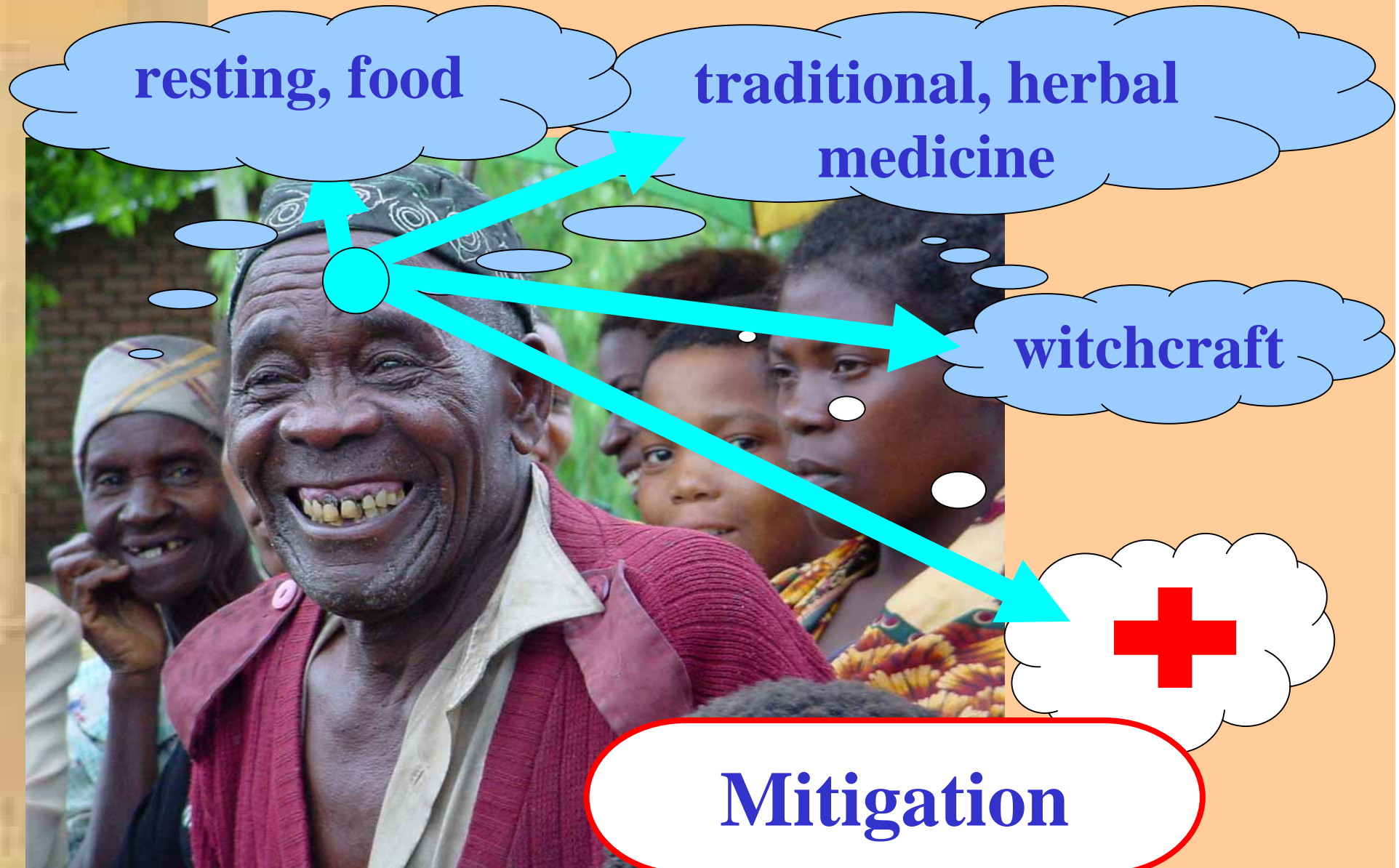
Prevention of burns

Rocket stove

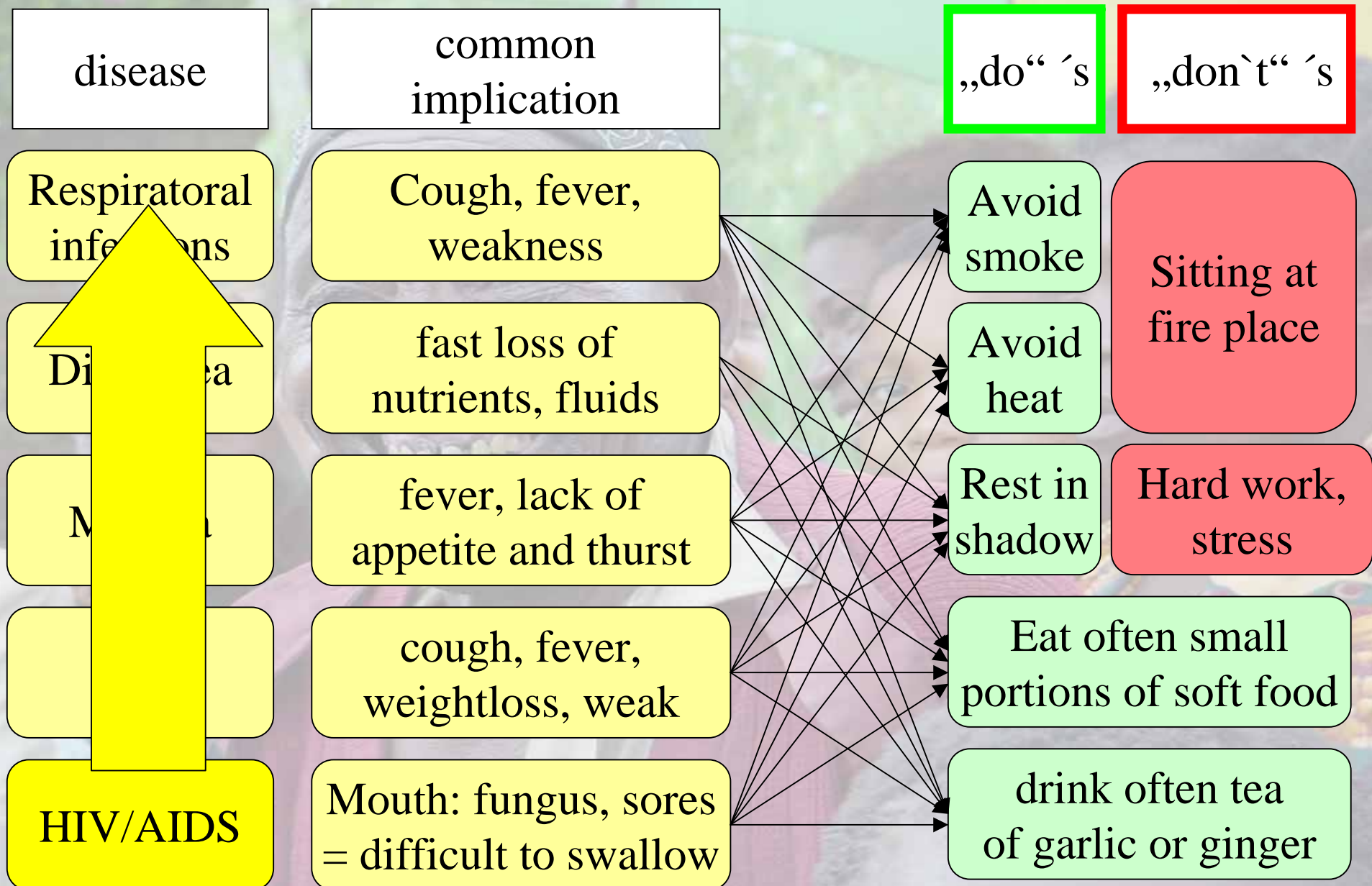
What do we perceive as **health issues**?



What do villagers perceive as **health issues**?



Mitigation of common **health issues** in villages



BEC support to mitigate village health issues



Clay stove

„do“ 's

„don`t“ 's

Smoke reduction

less ash in kitchen

Sheltered fire

Fast cooking less wood

Small twigs

avoid smoke and ash

avoid heat

rest in shadow

Sitting at fire place

hard work, stress

BEC support to mitigate village health issues

Food warmer

(basket, dry banana leaves)



less fire time

less fire wood
(rice, beans, boiled
sweet potato
for mashing)

less water, no fat
for cooking

Simmering
and keep warm
without flame

„do“ 's

Avoid
smoke,
heat

Rest in
shadow

Eat often small
portions of soft food
(nutritious food,
no fat if diarrhoea)

drink often
boiled water, tea
of garlic or ginger

„don` t“ 's

Sitting at
fire place

Hard work,
stress

„Health and Fuel“ promotion approach

Participatory Analyses of Health, Food and Fuel situation

Step 1

„We want to learn about better
stoves and low maize recipes
in order to take better care
for our sick people!“

„Health and Fuel“ promotion approach **Cont.**

Step 2

Promotion of health, food and fuel knowledge by extension

Mbaula (new clay stove)

DEMAND for
stoves

Sweet Potato
and Beans

Cassava and
Cow Peas

Green Banana with
Pigeon Peas

Mafua (trad. 3-stone stove)

„Health and Fuel“ promotion approach

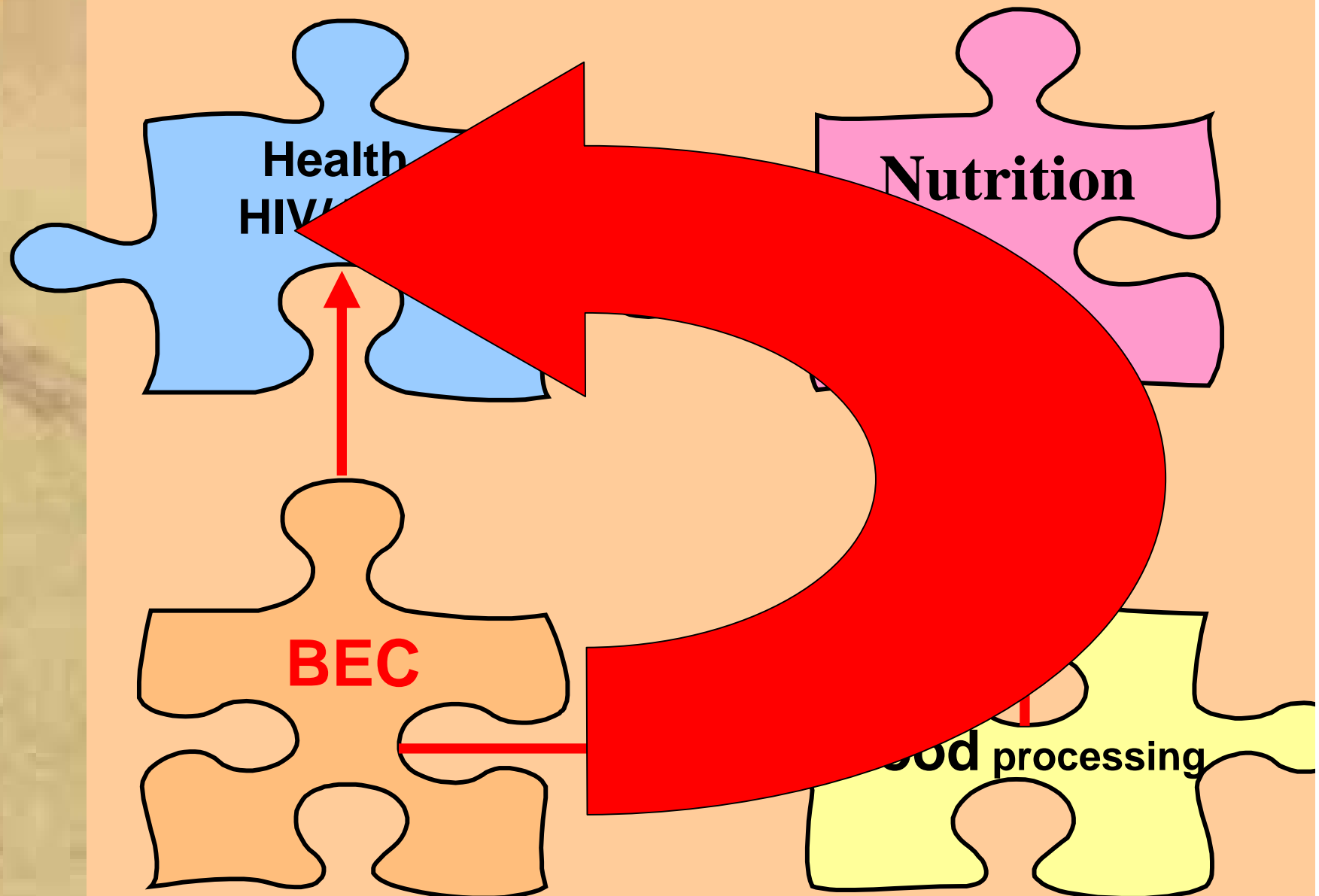
Training of commercial clay stove producer (-groups)

Step 3



**Commercial
SUPPLY of
clay stoves**

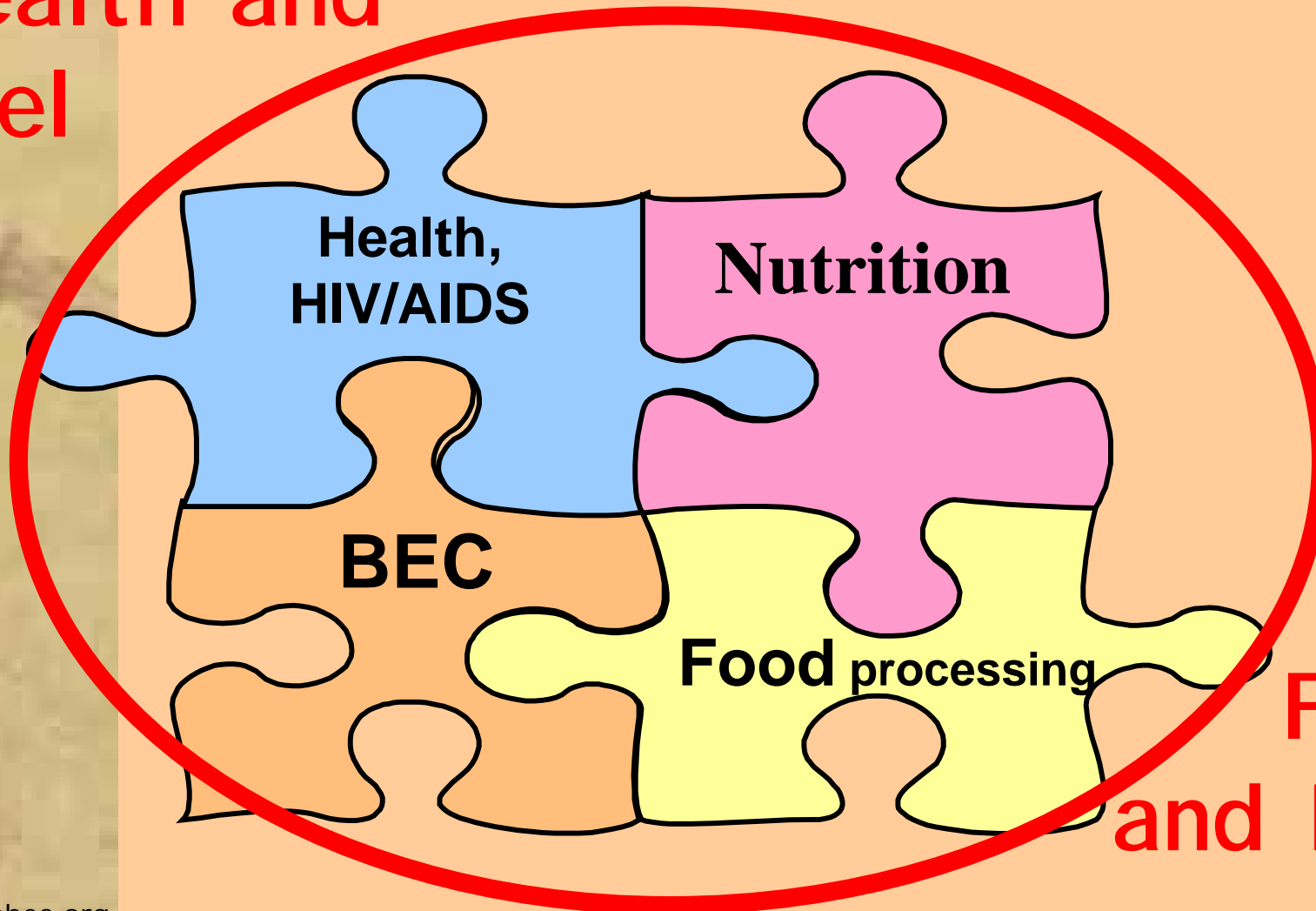
Mainstreaming **BEC** – the general approach



Mainstreaming **BEC** – the general approach **Cont.**

MAIN - STREAMING

Health and
Fuel



Food
and Fuel

Thank You!

