

Preventing and Treating Under-nutrition to Strengthen Resilience: the Continuum of Care

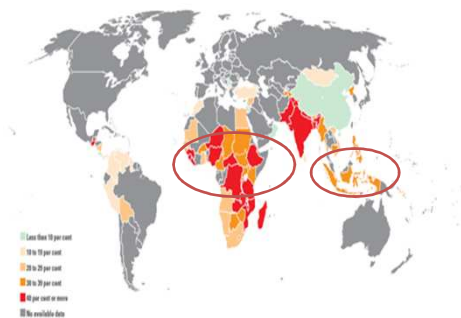
Dolores Rio



Under-nutrition and Crisis Prone Areas

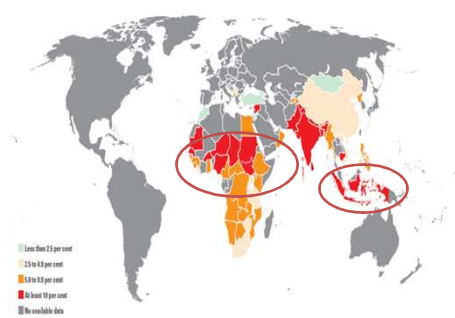
Stunting and Wasting Prevalence in Children < 5yrs

FIGURE 4 Stunting prevalence is highest in sub-Saharan Africa and South Asia
Percentage of children under age 5 who are moderately or severely stunted



Note: Data are from 2007 to 2011, except for India.
This map is stylized and not to scale. It does not reflect a position by UNICEF on the legal status of any country or territory or the delimitation of any frontiers. The dotted line between Jammu and Kashmir represents approximately the Line of Control agreed upon by India and Pakistan. The final status of Jammu and Kashmir has not yet been agreed upon by the Parties. The final boundary between the Republic of the Sudan and the Republic of South Sudan has not yet been determined.
Source: UNICEF Global Nutrition Database, 2012, based on Multiple Indicator Cluster Surveys (MICS), Demographic and Health Surveys (DHS) and other national surveys.

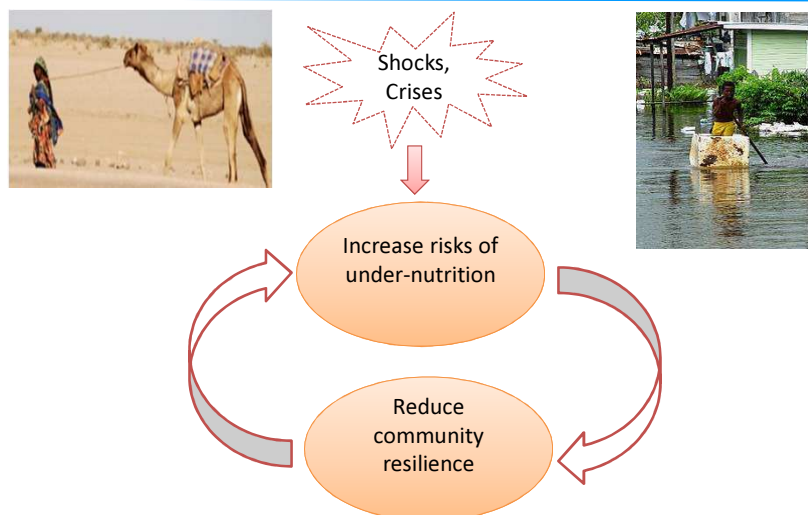
FIGURE 14 Prevalence of wasting is high in sub-Saharan Africa and South Asia
Percentage of children under age 5 who are moderately or severely wasted



Note: Data are from 2007 to 2011, except for India.
This map is stylized and not to scale. It does not reflect a position by UNICEF on the legal status of any country or territory or the delimitation of any frontiers. The dotted line between Jammu and Kashmir represents approximately the Line of Control agreed upon by India and Pakistan. The final status of Jammu and Kashmir has not yet been agreed upon by the Parties. The final boundary between the Republic of the Sudan and the Republic of South Sudan has not yet been determined.
Source: UNICEF Global Nutrition Database, 2012, based on MICS, DHS and other national surveys, 2007-2011.

★ **Overlap and close relation between crisis prone areas and under-nutrition**₂

Resilience and Nutrition... A Vicious Cycle

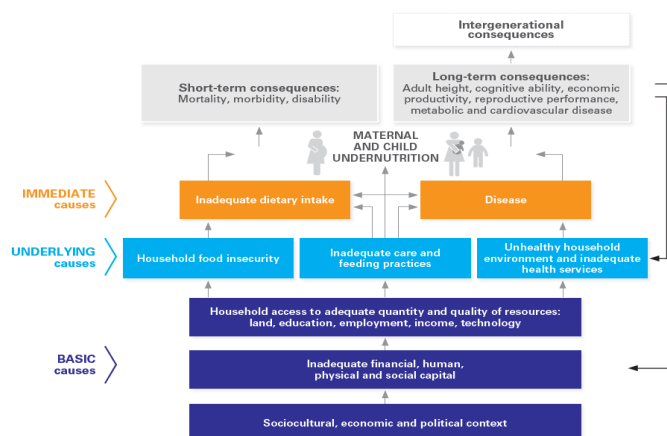


★ Good nutrition is essential to strengthen resilience.
Nutrition is an input to and output of Resilience.

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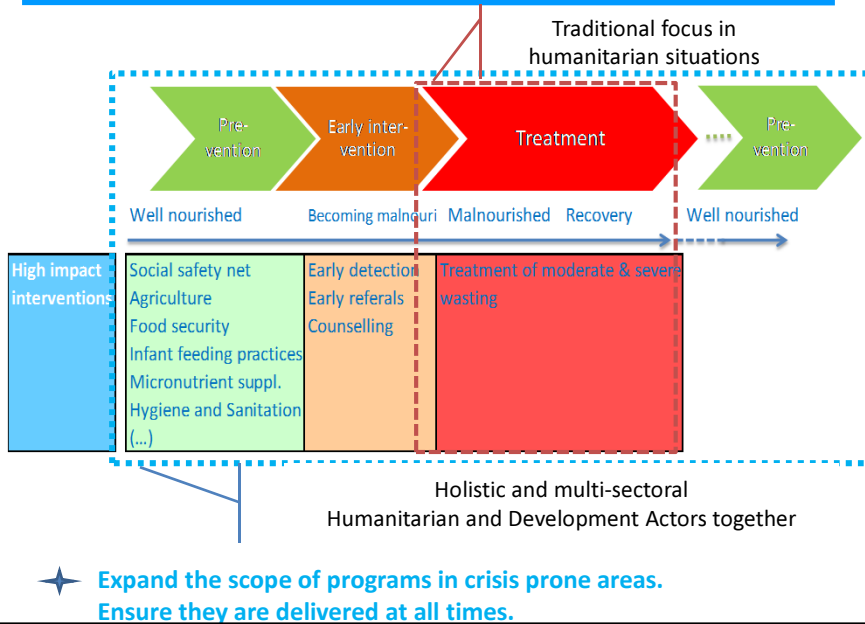
Addressing Underlying Causes of Under-Nutrition

FIGURE 1 Conceptual framework of the determinants of child undernutrition

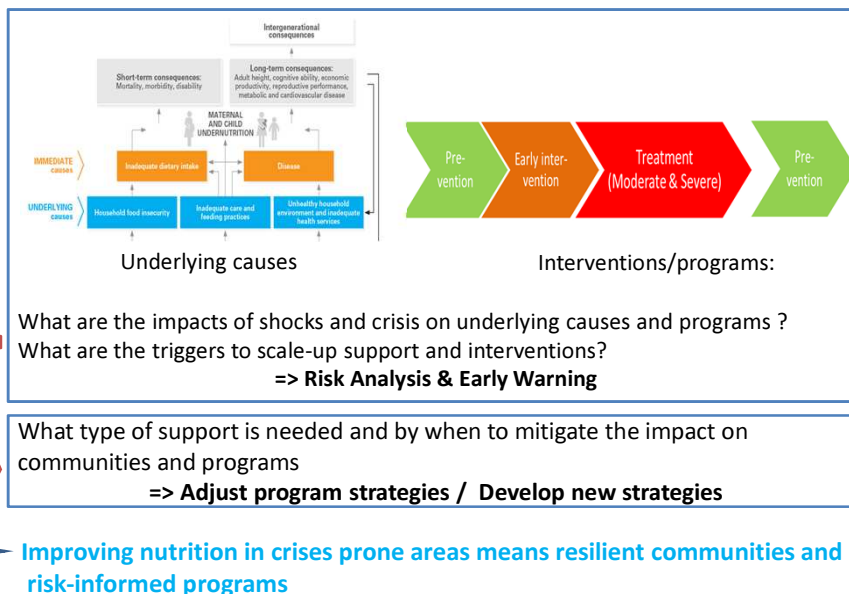


★ Improving nutrition means addressing underlying causes in crises prone areas
Require a multi-sectoral approach.

Continuum of Care: Prevention and Treatment



Understanding the impact of shocks and crises



Resilience & Nutrition

Resilience and Nutrition = good programming to address under-nutrition in crises prone areas which:

- ⇒ Address underlying causes through multi-sectoral approaches
- ⇒ Ensure continuity between prevention and treatment and between short-term and long-term interventions
- ⇒ Strengthen humanitarian-development linkages
- ⇒ Are risk-informed by integrating risk-analysis and early warning systems
- ⇒ Are flexible/adaptable to the contexts

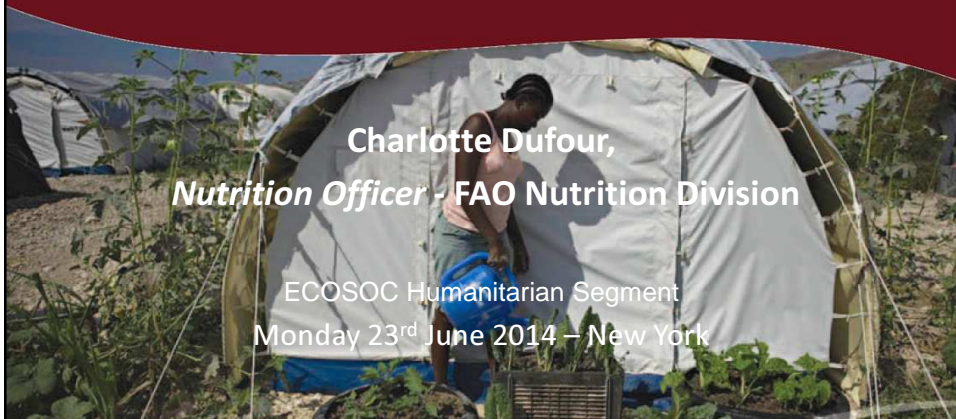


NUTRITION AND RESILIENCE: A COMMON AGENDA

Challenges, lessons learnt and opportunities

Charlotte Dufour,
Nutrition Officer - FAO Nutrition Division

ECOSOC Humanitarian Segment
Monday 23rd June 2014 – New York



Convergence between nutrition and resilience programming

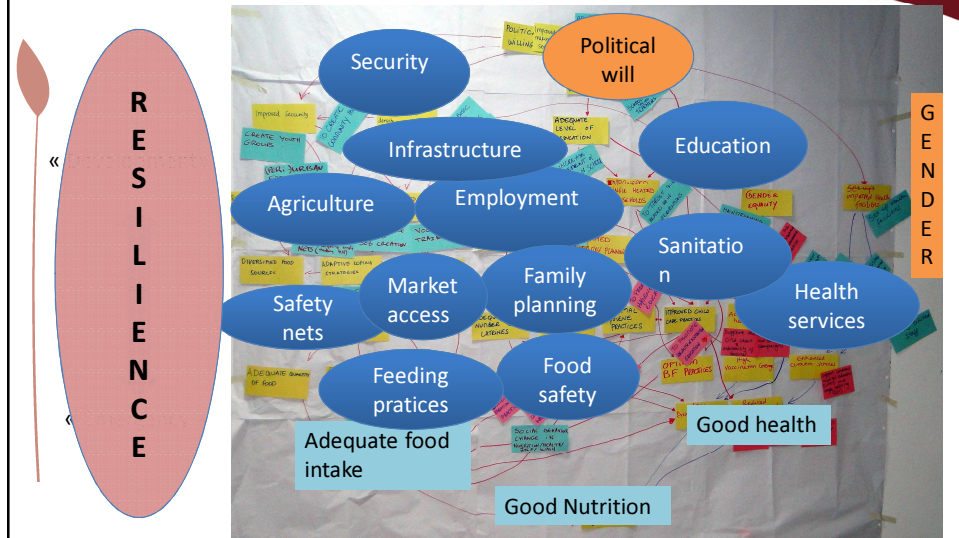
Effective resilience and nutrition programming both call upon:

- People centered
- A systemic approach (multi-sectoral, multi-level and multi-stakeholder)
- A twin-track approach, linking emergency and development
- Context-specific approach
- Strong local/country/regional ownership and political leadership
- Mutually reinforcing agendas
- Lessons learnt and tools on nutrition can be useful for resilience programming

Lessons learnt: challenges of multi-sectoral and multi-stakeholder efforts

- Establishing a common language*
- Institutional silos across and within institutions:
 - Between “food security” and “nutrition”
 - Between “emergency” and “development”
- Limited capacities for joint programming and action (organisational skills vs. technical skills)
- Tension between “systems approach” and “what to prioritize?”

Tools for building a common language and capacity for joint planning...



...as well as ownership



Building joint and effective delivery platforms

- Building on SUN and Resilience momentum to link FSN/resilience policy frameworks and coordination platforms (e.g. Niger – 3N)
- From an intervention-based approach to strengthening delivery platforms that can deliver multiple interventions and achieve multiple outcomes:
 - School nutrition programmes (ex. Cape Verde)
 - Farmer Field Schools: sustainable agricultural practices, gender and nutrition promotion
 - Women's groups
 - Leveraging private sector interests
 - Social protection programmes (Zero Fome; PSNP...)

Strengthening women's resilience and nutrition security in Kanem, Chad

- Negotiate access to « ouaddis » for women's groups for 5 years
- Fruit and vegetable production
- Small-scale irrigation
- Kitchen gardens
- Processing
- Marketing
- Nutrition education



▪ Link to WFP FFW/CFW and UNICEF nutrition



Looking forward

- Maximizing nutrition impact of resilience-building programmes
- From concepts to action
- Community empowerment
- Investment in capacities (institutional and technical) and delivery systems
- Creating *incentives* to go from:
 - Short-term quick fixes to building resilience
 - Intervention focus to delivery systems/platforms
 - commodity-based to eco-system / food system approach



DRC & KENYA FIELD EXPERIENCE : **LEVERAGING COMMUNITY ORGS** **for INTEGRATED ACTION** **on NUTRITION SECURITY & RESILIENCE**

23 June 2014
ECOSOC Humanitarian Affairs Segment
Nutrition & Resilience Side Event
New York , NY
Muriel Calo, Senior Food Security & Livelihoods Advisor

ACF MISSION STATEMENT



Our mission is to save lives by eliminating hunger through the *prevention*, detection and *treatment* of malnutrition.

From crisis to sustainability, we tackle the underlying and basic causes of malnutrition and its effects.

By integrating our programmes with local and national systems we further ensure that *short-term interventions become long-term solutions.*



Mother to Mother Support Groups in Kenya

Community groups are formed in **high burden & high risk areas** to complement treatment activities with a platform for **nutrition education, MIYCN messaging & training**, with support from MOH and ACF

→ addressing immediate causes of malnutrition



Delivering key messages on complementary feeding practices





A community health worker demonstrates how to wash hands using a leaky tin & soap



CELLULES COMMUNAUTAIRES DE BASE pour la NUTRITION (CCBN) OR COMMUNITY NUTRITION FORUMS IN DRC

Community Nutrition Forums in DRC

Groups become local participatory forums for mothers to **exchange around good practice** (diet, hygiene, care...)



Groups evolve to **identify & discuss a range of local socio-cultural issues** important to them e.g. Nutrition, Health, Hygiene, Food Security, Economic Development

→ developing local ownership





Presence of groups also enables
more effective outreach &
follow-up from local MOH on
prevention activities e.g.
supplementation, pre and post
natal care services

→ health systems
strengthening approach





Complementary advocacy actions with local government encourage appropriate budgetary allocations for health systems

→ developing political leadership & cementing impact

ACTION HUNGER

ACF Action Newsletter

Issue: December 2013

Nutrition Advocacy Workshop Report

West Pokot County

14th November 2013

Held at Kiroto Lodge, Nakuru

Support to Mother Support Groups

West Pokot County, during an outbreak season.

ACF

UNICEF

EUROPEAN UNION

Remarks	P
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The next big challenge is developing ways to effectively **monitor & evaluate impact** of nutrition resilience programming

CCBN and MTMSG are just two examples that illustrate ACF's **nutrition security approach** to prevent and address malnutrition over the long term using **holistic**, **coordinated** and **multisectoral** ways of working



THANK YOU





ACF Talking points (1)

1. Community groups such as MTMSG and CCBN are formed in areas of chronically high undernutrition prevalence to complement treatment activities with a platform for **nutrition education, MIYCN messaging & training**, with support from MOH and an NGO → **addressing immediate causes of malnutrition**
2. Groups become local participatory forums for mothers to **exchange around good practice** (diet, hygiene, care...)
3. Groups evolve to **identify & discuss a range of local socio-cultural issues** important to them e.g. Nutrition, Health, Hygiene, Food Security, Economic Development → **developing local ownership**

ACF Talking points (2)

4. Groups may mobilize to address these issues on their own initiative by supporting community development projects e.g. poultry keeping, vegetable gardens, seed multiplication → addressing basic causes of malnutrition
5. Presence of groups also enables more effective outreach & follow-up from local MOH on prevention activities e.g. supplementation, pre and post natal care services → health systems strengthening approach
6. Nutrition education becomes an entry point to development and resilience-building activities → twin track approach

ACF Talking points (3)

7. Complementary advocacy actions with local government encourage appropriate budgetary allocations for health systems → developing political leadership & cementing impact
8. The next big challenge is developing ways to monitor & evaluate impact of these and other nutrition resilience programming approaches
9. CCBN and MTMSG are just two examples that illustrate ACF's nutrition security approach to prevent and address malnutrition over the long term using holistic, coordinated and multisectoral ways of working

ACF Talking points (4)

10. In summary, **key principles** of ACF nutrition security approach are:

- ✓ Prioritize **high burden areas** & **nutritionally at risk** populations
- ✓ Base programming on **multisectoral nutrition-sensitive analysis**
- ✓ Design **holistic, integrated, at scale & long term** response strategies
- ✓ **Do No Harm** to nutrition
- ✓ Mainstream **gender sensitive** approaches
- ✓ Assess & document nutrition **impact**
- ✓ Build & foster adequate **skills and capacity**
- ✓ Align to **local priorities** and realities
- ✓ Advocate for **lasting changes in policies, practices and capacity**