



Food and Agriculture Organization
of the United Nations

GUIDANCE NOTE

Nutrition in protracted crises

Breaking the vicious circle of malnutrition



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This guidance note is part of a series on improving food security and nutrition in protracted crises. Drawing on FAO technical experience, the guidance notes series supports implementation of the Framework for Action for Food Security and Nutrition in Protracted Crises (CFS-FFA), endorsed by the Committee on World Food Security (CFS) in October 2015.



KEY MESSAGES



- ▶ While malnutrition is one of the biggest challenges to development and human well-being in many countries, rates of malnutrition, especially stunting, are **significantly higher in countries in the throes of protracted crises**.
- ▶ Malnutrition and crises go hand in hand: **malnutrition both impacts on and is affected by crises**.
- ▶ Protracted crises **impact negatively** on people's **lives and livelihoods** and the factors responsible for malnutrition: food insecurity, inappropriate care and feeding practices, poor health environment.
- ▶ **Understanding the causes** of malnutrition involves a **multisectoral overview**, drawing on both quantitative data and participatory assessment and planning methods.
- ▶ Based on CFS-FFA Principles and the accompanying set of broad key recommendations, **advocacy and capacity development** measures should be put in place to support greater nutrition-sensitive policies and actions that improve the underlying factors of nutrition: food security, care and health.
- ▶ Diversification of food production and livelihoods coupled with **food and nutrition education** are key to promoting diverse and healthy diets alongside ensuring appropriate care and feeding practises.
- ▶ **Diet-related indicators** are key **early warning** indicators. They also provide a good way of estimating the nutritional outcomes of food security and agriculture programmes.
- ▶ **Nutrition needs to be integrated in resilience-building programmes** to support a people-centred approach and build a bridge between short-term crisis management and longer-term development.
- ▶ Malnutrition cannot be tackled by one sector alone and needs multisectoral and multi-stakeholder solutions. **Synergies** can be promoted between partners and coordination mechanisms working on food security, nutrition and resilience for an integrated food security and nutrition response.
- ▶ Applying a **nutrition lens to social protection** policies and programmes holds great potential for improving the nutrition situation of vulnerable populations.





The many facets of malnutrition in protracted crises

What is malnutrition and why does it matter?

INFO BOX 1. What is malnutrition?

Malnutrition refers to an abnormal physiological condition caused by deficiencies, excesses or imbalances in the energy and/or nutrients necessary for an active, healthy life. The term encompasses undernutrition including micronutrient deficiencies, overweight and obesity.

Undernutrition – too little food intake relative to nutrient requirements – can manifest in the form of acute malnutrition or wasting (low weight for height), chronic malnutrition or stunting (low height for age) and underweight (low weight for age).

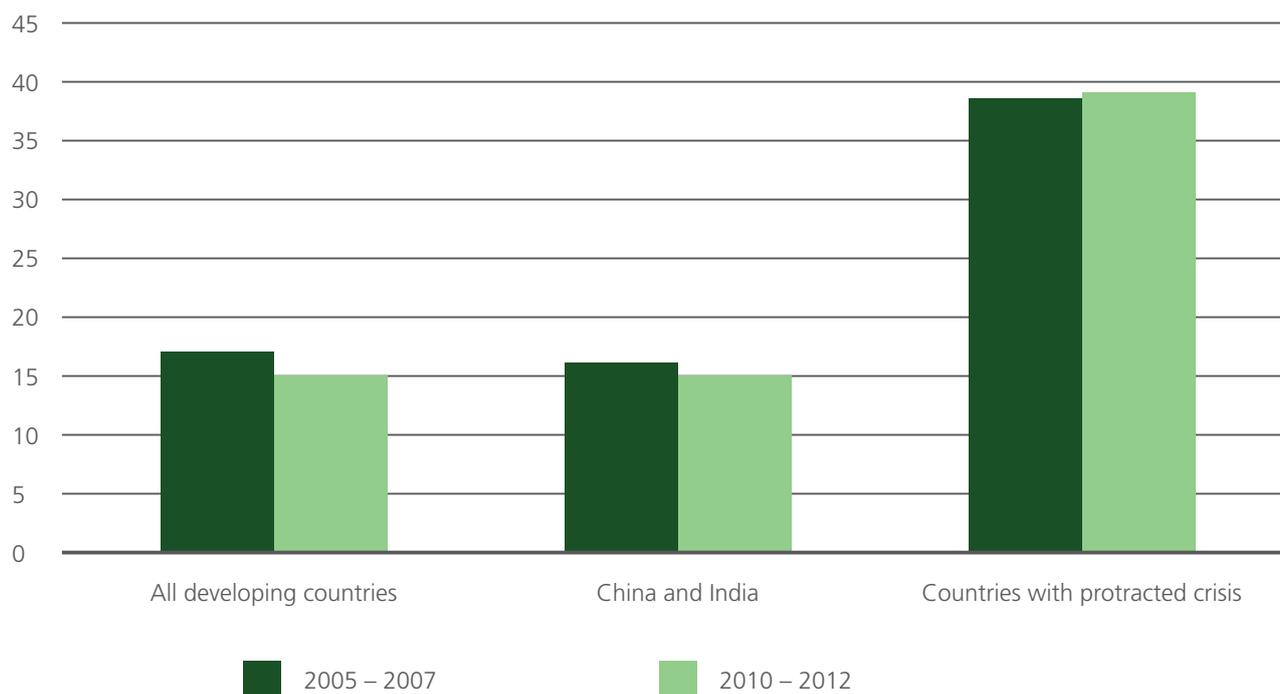
Overweight and obesity are a result of excessive food intake relative to dietary nutrient requirements. Overweight and obesity can coexist with **micronutrient deficiencies** (shortage of minerals or vitamins) and stunting.

The World Health Organization (WHO) considers poor nutrition as the single most important threat to the world's health. In many developing countries, malnutrition is an underlying cause of at least one-third of all child deaths and 20 percent of maternal mortality every year.

At the same time, countries are increasingly exposed to crises and shocks (i.e. economic upheavals, high and volatile food prices, demographic pressure on natural resources, climate change), which impact food security and nutrition and increase vulnerability to future risks.

In protracted crises, the factors responsible for malnutrition are exacerbated. The proportion of people who are undernourished is almost three times as high in countries in protracted crisis as in other developing countries (see Figure 1).

Figure 1: Prevalence of undernourishment (%)



Source: FAO, IFAD and WFP, 2015.

In most cases, national malnutrition averages mask strong subnational variations, with most crisis-exposed regions showing significantly higher rates. Of particular concern are sub-Saharan African countries which have shown comparatively low progress in reducing chronic malnutrition over the last decade.

Such trends point to fundamental structural problems that trap populations in a state of constant precariousness, and help explain why emergency situations resulting in alarming increases in acute malnutrition regularly arise in such populations (e.g. Niger and Somalia) or why, in protracted displacement contexts, chronic malnutrition rates often remain unacceptable despite aid assistance.

▼▼ *Malnutrition undermines economic growth. Well-nourished children perform better in school than malnourished children and this can add at least 10 percent to their personal lifetime earnings and contribute to a more productive labour force – resulting in a 2–3 percent increase in annual GDP for the country.* ▼▼

World Bank. 2006. Repositioning nutrition as central to development, a strategy for large-scale action. Washington, DC, USA

In addition, obesity and overweight are rising dramatically, with more than 1.9 billion adults and 42 million children under 5 years of age overweight or obese worldwide. This concerns not only developed countries, but also an increasing number of people living in middle- and low-income countries, including countries in protracted crisis (such as refugees). Nearly half the world's countries suffer from the double burden of malnutrition: undernutrition and overweight/obesity, often side-by-side within the same country, the same household and even the same individual.

The impact of crises on nutrition

Protracted crises have a negative impact on individual nutritional status, particularly in vulnerable population groups (including children under 5, pregnant and lactating women, adolescent girls, the elderly and disabled people), affecting peoples' lives and livelihoods and entire households' access to food, health and care in many ways:

- Families lose members, are forced to migrate and are separated from their relatives and supportive networks; adults are traumatized or too busy trying to cope with the crisis to provide support to spouses or offspring; violence can result, especially against women – who are the cornerstone of household care and nutrition – with a negative impact on their nutritional status as well as on the household's;
- Food security is undermined by natural disasters and conflicts: productive activities are disrupted, food stores are destroyed or looted, livestock are stolen, killed or die, people lose access to land (through natural degradation, landmines, asset depletion and/or migration), access to markets is reduced and prices increase, and better-off families are required to share scarce resources with displaced relatives and orphans;
- This reduced access to food, combined with reduced access to water and fuel for cooking, results in changes in feeding practices, food preparation and food allocation within households; and
- People may be forced to live in unhealthy surroundings and overcrowded shelters, and/or health services may no longer be available or used.

The vicious circle of malnutrition in crises

Malnutrition – especially if experienced in early years – is a life-threatening condition, which increases the risk of premature death, morbidity and permanent physical and cognitive damages. The direct consequences of malnutrition (ill health, low productivity) can exacerbate problems of income inequality and thus fuel social conflict. It seems to play a key role in inducing armed conflicts in poor countries, creating or perpetuating a vicious circle of malnutrition in crises.



Rwanda - Karambo. Vestine Nyiazaminani (31) feeds her two young children Ishimwe Obed (3) and Nuzuyishimwe Samuel (6 months old) in the yard of her house. ©FAO/Marco Longari.

Nutrition in the CFS Framework for Action for Food Security and Nutrition in Protracted Crises (CFS-FFA)

The aim of this paper is to illustrate – including through case studies - how FAO work in nutrition plays a prominent role in supporting the CFS Framework for Action for Food Security and Nutrition in Protracted Crisis situations. While the term “nutrition” appears as a free-standing element of Principle 2 only, in reality nutrition issues are interwoven with all 11 principles of the CFS-FFA. This document more specifically presents how FAO work in nutrition contributes to the following principles:

Nutrition in the CFS-FFA	
Is a core objective of CFS-FFA principle	Principle 2: Focus on nutritional needs
Also contributes to CFS-FFA principles	<p>Principle 1: Meet immediate humanitarian needs and build resilient livelihoods</p> <p>Principle 5: Empower women and girls, promote gender equality and encourage gender sensitivity</p> <p>Principle 6: Ensure and support comprehensive evidence-based analyses</p> <p>Principle 7: Strengthen country ownership, participation, coordination and stakeholder buy-in, and accountability</p> <p>Principle 9: Contribute to peacebuilding through food security and nutrition</p>

KEY FACTS

The proportion of people who are undernourished is almost three times as high in countries in protracted crisis as in other developing countries.



FAO support for implementation of the CFS-FFA from a nutrition perspective

Recommendation 1: Understanding the causes of malnutrition

Any analysis of the causes of malnutrition must start with a multisectoral overview of the factors affecting nutritional status within a given community. Ideally, such an analysis should apply to each livelihood group, as livelihoods determine many features of a household's access to food, caring practices, and health and water services.

The analyses should also exploit both data collected through surveys and comprehensive assessments (including data on nutrition, food security and livelihoods, food consumption, health, care, water and sanitation), and participatory assessment and planning methods.

To support governments, humanitarian and development partners in conducting such an analysis, FAO runs workshops entitled *Agreeing on Causes of Malnutrition for Joint Action*, using problem and solution trees. The workshop methodology sets out to understand the causes of malnutrition, build consensus among workshop participants and strengthen ownership of nutrition issues (see FAO in action - Box 1). It has been widely used for many crisis contexts including Afghanistan, South Sudan, Somalia, Kenya, Niger, Mauritania, Chad, and Syria.

Conversely, food security interventions (food aid, food or cash for work, agriculture support) tend to focus on the community and household levels, with limited attention to intra-household dynamics. The interventions may improve families' access to food, but if their young children are not breastfed and provided with the appropriate complementary food, or if they are sick, or if gender roles are not properly addressed, rates of child malnutrition will not decrease. Clearly, malnutrition needs to be addressed through a comprehensive set of nutrition-specific and nutrition-sensitive policies and programmes that address the underlying and basic causes of malnutrition. This is where food security and agriculture can play a key role.

Following extensive consultation, FAO has formulated a set of *Key Recommendations for Improving Nutrition through Agriculture and the Food System*, consisting of 10 recommendations (see Info box 2 below) for strengthening the nutrition impacts of agriculture and food system programmes followed by 5 policy-oriented recommendations for creating the necessary conditions for effective, sustainable and scalable programmes. The recommendations focus on the most nutritionally vulnerable groups, with special reference to pregnant and lactating women (PLW), Infants and Young Children. They also include agricultural and food system-based strategies for both nutrition and risk mitigation, resilience building and adaptation to climate change, such as production diversification and management of natural resources. While recognizing the inherent challenges of operating in protracted crisis situations, these recommendations are particularly relevant to reaching the objectives of the CFS-FFA.

INFO BOX 2. Key recommendations for improving nutrition through agricultural programmes and investments

1. Incorporate explicit nutrition objectives and indicators into the design of programmes and investments;
2. Assess the context at the local level, to design appropriate activities to address the types and causes of malnutrition;
3. Target the vulnerable and improve equity;
4. Collaborate and coordinate with other sectors;
5. Maintain or improve the natural resource base;
6. Empower women;
7. Facilitate production diversification, and increase production of nutrient-dense crops, small-scale livestock and sustainable fisheries;
8. Improve processing, storage and preservation;
9. Expand markets and market access to vulnerable groups, particularly for marketing nutritious foods;
10. Incorporate nutrition promotion and education.

In addition, FAO advises to improve food and agriculture policies through 5 recommendations:

11. Increase incentives for availability, access and consumption of diverse, nutritious and safe foods through environmentally sustainable production, trade and distribution;
12. Monitor dietary consumption and access to safe, diverse, and nutritious foods;
13. Include measures that protect and empower the poor and women;
14. Develop capacities;
15. Support multi-sectoral strategies to improve nutrition.

Recommendation 3: Diversifying food intake, crop production and livelihoods

Food and agriculture programmes too often focus on staple crops rather than on providing or producing a wider range of nutritious foods to meet individual nutritional needs. However, promoting diversification of food intake, of crop production and of livelihoods helps prevent both chronic and acute malnutrition through both direct consumption and income generation.

Persuading people to grow and consume (not just sell) more nutritious crops (including fruits and vegetables), rear animals and poultry for meat, milk and eggs, or catch fish for high quality, easily digestible animal proteins, micronutrients and vitamins (like calcium, vitamin A, iron, and zinc), (see Info boxes 3 and 4), is particularly relevant in protracted crisis contexts, in which access to market and diversified foods, especially fresh foods (fruits, vegetables, meat, fish, milk and dairy products) is a challenge – due to loss of productive assets, displacements, insecurity issues, and disruption of linkages across different agro-ecological zones.

Ensuring a balanced dietary intake for people affected by forced displacements, living in camps or informal settlements, as well as to host families and relatives, is essential in order to avoid any type of malnutrition, including micronutrient deficiency.

FAO in action - BOX 2. Nutrition voucher – Warrap State, South-Sudan

In Warrap State, South Sudan, high rates of malnutrition are reported. In order to prevent malnutrition problems in IDP camps, FAO implemented a food voucher scheme to complement the general food distribution. The specific objectives of the “Nutrition vouchers” were to improve the availability of and access to complementary nutritious food sources for IDPs and to guarantee a market for traders from the host communities. Traders for particular sets of items were thus identified. Markets for fresh foods were organized twice a week; using their nutrition vouchers, 1 600 IDPs could purchase from traders a variety of locally produced fresh food items (e.g. tomatoes, onions, okra and dried fish). The programme also includes training on business and quality preservation of fresh foods for traders.

Positive impacts on beneficiaries’ dietary diversity and nutrition were reported even though the programme did not directly collect nutrition-related indicators. The beneficiaries appreciated the choice, quality and quantities of provided food items, as well as the intervals (twice a week) at which the voucher-based market was held. Thanks to the food vouchers, they no longer needed to sell part of the general food aid ration to buy vegetables and fish. This intervention also increased the income and improved the business skills of traders who supplied fresh food to IDPs. The cash injected boosted the local economy and encouraged others to engage in trading. One of the programme challenges is to ensure provision and availability of fresh foods for IDPs all year round, whereas vegetables are generally home-grown from September to November.

INFO BOX 3. What contribution do animal-source foods make to diets and nutrition?

In countries where undernutrition remains a widespread and persistent problem, animal-source foods (ASFs - dairy products, meat, eggs, organs and fish) can play a key role in improving micronutrient deficiencies. ASFs are particularly good quality sources of vitamin A, iron, calcium, vitamin B2 (riboflavin), zinc, and practically the sole source of vitamin B12. The consequences of deficiencies of these nutrients range from faltering growth to increased susceptibility to diseases and death and can have a profound impact on the capacity to learn and work of children and adults. Protein-energy malnutrition, iron-deficiency anaemia, and vitamin A deficiency are three key causes of reduction in disability-adjusted life years, which could be prevented with sufficient ASFs in the diet. Iron and calcium deficiency in pregnancy are risks factors for mortality, via haemorrhaging or increased risk of pre-eclampsia respectively, which are the leading causes of maternal deaths. Appropriate complementary feeding practices (i.e. rich in nutrient-dense foods) and zinc supplementation have also been shown to have a protective effect against stunting.

INFO BOX 4. Focus on nutritional value of fish products including small fish

Fish products are very good sources of micronutrients, particularly if the most nutrient-dense parts – such as heads, bones, and guts – are eaten. In these parts of the fish, levels of iodine, iron, zinc and vitamin A are exceptionally high, adding significant nutritional value to the proteins and long chain omega-3 fats found in fish.

Small fish, eaten whole in many cultures, are a unique source of micronutrients. Levels of nutrients such as vitamin A, calcium, iron and zinc can be 10, 100 or even 1 000 times higher in fish eaten whole compared to eating only the fillet. These small indigenous fish species are often available in large volumes, but only seasonally. They are frequently low-cost and can be dried and stored for longer periods by using simple and locally available technologies. Dried small fish are a valuable source of nutrients, particularly micro-nutrients, during periods when food availability is low.



Ethiopia - Chiffra Woreda. A female farmer milking a cow while her husband restrains the calf.
©FAO/Giulio Napolitano.

Recommendation 4: Adopting healthy food and nutrition practices

Nutrition education makes an essential contribution to the prevention of malnutrition as it builds individual and institutional capacity to adopt healthy food and nutrition practices. Food taboos, cultural beliefs and traditions in care and feeding practices can run counter to general recommendations for better nutrition. Moreover, in protracted crisis contexts, reduced access to food often results in changes in feeding practices (in particular, reduced consumption of vegetables, fruits and animal-source foods), food preparation and food allocation within households. Incorporating nutrition education in food security and agriculture programmes is thus crucial.

FAO-supported programmes help households decide what foods to produce or purchase and how to store, process, prepare and consume them for optimal nutrition, including infant and young-child feeding (IYCF) practices. When designing nutrition education activities, the following elements should be considered:

- The focus should be on behaviour change and overcoming cultural barriers while promoting existing good feeding practices;
- The content must be adapted to the context and to the previously identified local beliefs;
- The use of locally available foods should be promoted to improve complementary feeding practices;
- Demonstration sessions have been found to be effective in raising women's awareness about healthier cooking practices; and
- Men, grandmothers, and community or spiritual leaders play an important role in the household and decision-making about health, feeding child care and household expenses. Care must therefore be taken to include them in the awareness campaign.

By piloting community-level projects that combine food security activities with IYCF nutrition education sessions, FAO promotes a sustainable strategy that preserves local food cultures and biodiversity and can be easily replicated by households at low cost (see FAO in action - Box 3).



Uganda - Iganga area. Lesson in nutrition education with a demonstration of vegetable preparation and cooking.
©FAO/Roberto Faidutti.



FAO in action - BOX 3. Improving the dietary intakes and nutritional status of infants and young children in Malawi

Malawi is affected by recurrent crises such as annual dry spells and flooding, and macroeconomic instability. Even though Malawi is not classified as a country in protracted crisis according to SOFI 2010 criteria, its context offers good opportunities to learn promising practices that could also be of great relevance for protracted crisis contexts. However, chronic undernutrition continues to be a major problem, as 47.1 percent of children under five are stunted. Major causes of childhood stunting include inadequate complementary feeding and care practices. Agricultural production focuses largely on maize and family diets rarely cover all recommended six food groups, including fresh foods.

The 2008-2018 FAO project “Improving food security and nutrition policies and programme outreach” (IFSN), aims to enhance the quality of complementary foods and feeding practices, using locally available and affordable foods. In parallel, a 5-year research/advocacy project set out to assess the effectiveness of project activities on children’s dietary intake, micronutrient status and growth, and determine the nutrition impact of combining food security with nutrition education interventions.

The project focused on improving food security and nutrition for vulnerable households (extremely poor; child or female-headed; caring for orphans or caring for people living with HIV/AIDS or other chronic diseases; households with pregnant women; children less than two years of age; widows, and elderly people living on their own). Agricultural production was combined with nutrition education activities. The project included income generation, water and sanitation. Training sessions explored improved infant and young child feeding practices, along with participatory cooking sessions promoting the preparation of local and seasonally available foods, including diversified staple foods, vegetables, fruit, legumes, nuts, and animal source foods. The findings from the research showed that there was increased knowledge and skills among mothers and caregivers, resulting in statistically significant improvements in the dietary quality and quantity of children’s diets in the intervention villages.

Recommendation 5: Monitoring diet-related indicators before, during and after the crisis

Along with health status and care practices, an appropriate dietary intake – both in terms of quantity (calories) and quality (nutrient content) directly influences an individual’s nutritional status. Household access to diverse foods and diet quality are therefore critical dimensions to monitor in order to predict the risk, and assess the determinants of malnutrition.

When monitoring threats and predicting crises, diet-related coping strategies are early indicators of a pending crisis. People do not wait until food is in short supply before changing their consumption behaviours. Such changes reflect the best judgment of household decision-makers about the foreseeable future. Their measurement, including indicators of food consumption in early warning systems, can increase the ability to detect forthcoming shocks.

When assessing vulnerabilities and identifying those most at risk of malnutrition, the following should be borne in mind:

- Malnutrition rates are important to assess the vulnerability of households and individuals to malnutrition following a crisis. However, collecting information on malnutrition rates through anthropometric surveys at individual level can be challenging in protracted crises both in terms of logistics and because of frequent shocks and volatility. Moreover, depending on the crisis and pre-shock context, it can take some time for the clinical symptoms of malnutrition to become visible.
- Other nutrition-related indicators such as food consumption indicators (e.g. reduction in the number of meals or drastic changes in consumption patterns) can be useful in identifying which groups need urgent help.

When monitoring nutrition outcomes:

- Again, nutrition data may not be the best indicators: given its slow onset, stunting (indicating chronic malnutrition) can take time to reverse (at least two years); the prevalence of wasting (indicating acute malnutrition) tends to vary seasonally and is strongly determined by health status and disease trends.
- Food consumption indicators, especially at individual level, provide a good way of estimating the nutritional impact of a food and agriculture intervention. Household dietary diversity indicators measure household access to and consumption of a variety of foods but do not capture intra-household food repartition. Individual food consumption indicators however measure dietary quality and micronutrient adequacy, and therefore help link information on household access to diverse foods with the nutritional status of household members.

FAO is thus working with other nutrition stakeholders to develop household and individual dietary diversity indicators. In particular, based on recent research findings, a new indicator of diet quality focusing on women of reproductive age (WRA) (15-49 years) – has been endorsed (see Info box 5).

INFO BOX 5. Minimum Dietary Diversity – Women (MDD-W), a new indicator of women's diet quality

The Minimum Dietary Diversity – Women (MDD-W) was designed to respond to the need for simple yet valid indicators of women's diet quality, with a specific focus on micronutrient adequacy. Women of reproductive age (WRA) are often nutritionally vulnerable because of the physiological demands of pregnancy and lactation, resulting in higher requirements for most nutrients compared to adult men (National Research Council, 2006; WHO/FAO, 2004).

Insufficient nutrient intakes before and during pregnancy and lactation increases the chances that children will be born malnourished, perpetuating the intergenerational cycle of malnutrition. In many resource-poor environments, the diet quality of WRA is very poor, and there are gaps between intakes and requirements for a range of micronutrients (Arimond et al., 2010; Lee et al. 2013).

This new indicator replaces the WDDS (women's dietary diversity score) previously developed by FAO and the Food and Nutrition Technical Assistance III Project (FANTA). It covers 10 food groups and, unlike former measurements, offers a threshold for women's micronutrient needs. Micronutrient adequacy among women of reproductive age is considered satisfactory when consuming at least five food groups out of 10. The new tool is easy to administer and can be used in large-scale surveys for nutrition assessment, monitoring and evaluation, target setting and advocacy.

Recommendation 6: Integrating nutrition in resilience-building programmes

In protracted crises, poor nutritional status undermines individuals' and households' capacity to cope, as well as their resilience to future shocks. Good nutrition is therefore essential to build resilience. However, a nutrition lens should be applied to ensure optimal impact, so as to encourage a people-centred and pro-poor approach to response analysis and planning.

Applying a nutrition lens means supporting affected and at-risk populations through, for example:

- input distribution of nutrient-dense crops and varieties to meet nutrient requirements;
- vegetable gardening including in urban settings to increase consumption of nutrient-rich foods;
- development of small livestock schemes to diversify livelihoods and improve consumption of nutritious foods;
- promotion of community-managed fisheries for sustainable harvesting of fish as a source of animal proteins, micronutrients and vitamins;
- promotion of post-harvest conservation techniques and adequate cooking practices to improve availability of diverse foods year round and preserve the nutritional value of foods;
- nutrition education to increase the consumption of diverse foods and the probability that additional resources are spent on supporting healthy diets and appropriate health and care;
- creation of saving groups/mechanisms to allow vulnerable people to access diverse foods, and care and health services year round;
- gender-sensitive targeting to improve access to, and control over, resources and inputs for women who are the cornerstone of household care and nutrition; and
- synergistic links with other sectors that address all other determinants of malnutrition (health, water and sanitation, social protection, education).

To this end, the FAO Caisses de Résilience (CdR) approach provides a good example of an integrated community-centred initiative designed to boost household resilience. The CdR approach is particularly relevant to countries in protracted crisis situations where people's livelihoods have been gradually eroded. It builds a bridge between short-term, humanitarian assistance and longer-term development (see FAO in action - Box 4).



Yemen. Vegetable garden in the centre of old Sana'a town. ©FAO/Rosetta Messori.

FAO in action - BOX 4. The 'Caisse de Résilience' (CdR) in Karamoja, Uganda

Relative to the rest of Uganda, Karamoja has the highest prevalence of malnutrition: 32 percent of children are undernourished, 7 percent wasted and 45 percent stunted. The causes of malnutrition in Karamoja are poor care and feeding practices, the education level of the mother, household access to life skills and information on nutrition and poor levels of hygiene, with limited access to improved water sources.

The CdR helps to improve FAO programming on nutrition, and provides a link between gender and social protection activities, through targeting the most vulnerable, especially women with little or no access to financial services. It links social, technical and financial dimensions in a synergistic way. It is being delivered through the Agro-Pastoral Field Schools (APFS) which develop community capacities through a combination of participatory learning activities on agricultural and environmental good practices (technical dimension) with saving and loan schemes to trigger income generating activities (financial dimension), while strengthening social dynamics and addressing social challenges (such as nutrition, health, conflict) at group and community level (social dimension).

The introduction of new nutritionally rich varieties, coupled with the availability of a more regular and increased income has allowed beneficiaries to diversify their diet, and to consume more products such as beans, vegetables, maize, meat, milk, and sugar. An impact assessment based on interviews with farmer groups also reported production improvements, increased ability to access 1-3 meals a day, a day, and appeared to reduce negative coping strategies such as begging and consuming seed stocks.

Recommendation 7: Promoting synergies for integrated, multisectoral programmes and policies

Synergies between food security, nutrition and resilience planning processes in protracted crises are crucial. At present, these are often unconnected and managed from different perspectives (i.e. food security from a food assistance and livelihoods perspective; nutrition from a health perspective; and resilience from a disaster-management perspective). To this end FAO collaborates with other UN agencies on integrated programmes that tackle food insecurity, malnutrition and resilience.

Stronger links are also being built between food security and nutrition emergency-related coordination bodies (such as the Nutrition and Food Security clusters), and between emergency- and development-oriented coordination initiatives (e.g. the SUN movement – see Info box 6).

INFO BOX 6. The SUN Movement

The SUN movement is a global country-led movement that has brought together a wide coalition of nutrition stakeholders to advocate for greater action. Stakeholders are organized in global and national level networks, including civil society, donors, UN agencies and business networks to better coordinate their activities. The SUN movement primarily focuses on scaling up interventions that target the “window of opportunity” (1 000 days, i.e. from conception to 24 months of age), including efficacious nutrition-specific interventions (e.g. iodized salt, breastfeeding promotion) and investments in nutrition-sensitive development in various sectors including agriculture.

In recent years, effective progress has been made in this domain. FAO has taken an active role in this regard, as shown in Info box 7.

INFO BOX 7. The intercluster working group of the Global Food Security and Nutrition clusters

FAO is a member of the intercluster working group of the Global Food Security and Nutrition clusters. Formed in 2011, this working group aims to provide guidance on synergy and complementarity between the two clusters in support of the food security and nutrition needs of crisis-affected households and populations. It focuses on developing strategies to enhance the quality of food security and nutrition responses, in order to maximize nutrition outcomes through capacity development, sharing of best practices and joint advocacy efforts.

Recommendation 8: Applying a nutrition lens to social protection

Due to their wide scale and reach, social protection instruments (such as cash transfers, food transfers, public works, and school feeding programmes among others) are increasingly being employed by policy makers to combat the multiple dimensions of malnutrition. Social protection can positively impact nutrition by improving dietary quality, increasing income and improving access to health services (see FAO in action - Box 5). In addition to the direct links related to the diversity, safety and quantity of food consumed by individuals, social protection can also influence other determinants of nutrition, e.g. practices related to care, sanitation and education or basic causes of malnutrition, such as inadequate access to resources.



Zimbabwe - Dangarendove. Women farmers benefiting from the voucher system received improved access to agricultural inputs, adequate extension support and training in marketing and nutrition. This resulted in better agricultural practices, enhanced livelihoods and improved nutrition. ©FAO/Believe Nyakudjara.

In order to maximize policy and programmatic synergies between nutrition and social protection, the following points should be considered:

- targeting of social protection should also reach nutritionally vulnerable groups, especially women and children, for example through geographic targeting to overlap areas with high levels of poverty and malnutrition; and
- social protection alone is insufficient to combat malnutrition; however, when implemented with complementary interventions in nutrition education and promotion it can lead to long-term positive impacts on nutrition status.

Finally, social protection measures are conducive to multi-sectoral and multi-stakeholder alignment, capable of holistically addressing the immediate, underlying and basic causes of malnutrition. School Food and Nutrition programmes, which link local procurement of food from family farmers to schools, are a prime example of such an engagement between sectors – including agriculture, social protection, education and health – to improve the nutrition of vulnerable populations in household, community and school settings.

FAO in action - BOX 5. The “productive transfers” approach (CASH +), Sahel region, Burkina Faso and Niger

The “productive transfers” (CASH +) approach combines, in a flexible manner, unconditional cash transfers and transfers of productive assets in kind. This approach means that households’ urgent needs can be addressed and their assets protected from decapitalization, while, through the productive asset component, helping stimulate a positive cycle of production and income generation that supports economic empowerment, strengthens asset ownership, and contributes to the diversification of household diet.

Implemented in Burkina Faso and Niger, the CASH+ programme has helped increase incomes, savings, asset ownership by beneficiaries, improve their food security and diversify their diet (82 percent of beneficiary households in the country had an acceptable diet two years after the intervention). The project evaluation has also shown that coupling cash transfer with poultry distribution has a significant impact on household food security (greater than with distribution of goats or seeds).

In the wake of this success, FAO is currently reproducing the same approach in Mali and Mauritania. This approach holds great potential to be scaled up within the framework of broader national social protection programmes when provided in a timely, regular, predictable and reliable manner.

KEY FACTS

If scaled up to 90 percent coverage, nutrition-specific interventions could reduce stunting by 20 percent and severe wasting by 61 percent. This shows that these interventions alone are not sufficient to end malnutrition, and nutrition-sensitive programmes are also essential to address key underlying determinants of nutrition, and accelerate progress in both stable and protracted crisis contexts.



Remaining challenges and further recommendations

There is clearly a need to re-define nutrition interventions in protracted crises and to shift from a narrow focus on treatment of acute malnutrition to a broader approach which includes prevention of stunting and support to infant and young child feeding, as well as specific measures to ensure that food security responses explicitly address nutrition.

The CFS-FFA, with its call for “coherent and well-coordinated humanitarian and development programming to address food insecurity and undernutrition, to save lives and to build resilience”, represents the ideal framework for catalysing this shift.

However, challenges remain in ensuring that nutrition-sensitive programming becomes a norm rather than an exception. The following recommendations highlight some key objectives:

- **Addressing malnutrition in all its forms in protracted crisis**
More emphasis should be given to all forms of malnutrition in protracted crises and clear nutrition objectives should be set in food security programmes to ensure impact on nutrition, including on stunting and micronutrient deficiencies.
- **Shifting mindsets from emergency to resilience-thinking in nutrition programming**
Interventions addressing malnutrition in protracted crises should not be limited to the management of acute malnutrition, but accompanied by greater investments in addressing underlying causes, in particular through long-term programmes related to infant and young child feeding, household food security, water and sanitation, and social protection.
- **Creating a nutrition-sensitive culture and related capacities**
Investments are needed in capacity development for multisectoral nutrition programming and mainstreaming nutrition into various sectors, including those related to agriculture, food systems, water and sanitation, social protection, education. Field workers and programme planners need to be trained in the basic concepts of food and nutrition security, including how to conduct participatory causal analyses of malnutrition at the local level and devise appropriate solutions.



- **Building an evidence base to support nutrition-sensitive programming in protracted crises**
Effective capacity development, improved programming and mobilization of financial and human resources require the development of an evidence base for the strategies most likely to improve food security and nutrition while contributing to strengthening resilience in protracted crises. This also includes understanding how interventions with a proven impact on stunting can be applied to protracted crisis situations.
- **Measuring the linkages between nutrition, agriculture & food systems and resilience**
One key research area involves developing and promoting tools and methods to measure the contribution of good nutrition to resilience-building programmes and the nutritional impact of resilience-strengthening programmes. To this end, data concerning the quality and adequacy of diets must be more systematically used to assess people's vulnerability and resilience as well as to monitor and evaluate programmes related to agriculture and food systems.

These common challenges can be turned into common opportunities by maximizing synergies between the current political commitment and investments in resilience on the one hand and in nutrition on the other.

The aim? To ensure that hunger and malnutrition becomes a scourge of the past, despite the challenges of climate change, demographic growth, diminishing natural resources and complex political crises.



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