MULTI-SECTORAL NUTRITION STRATEGY
Global Learning and Evidence Exchange
East and Southern Africa Regional Meeting

Nutrition-Specific Actions: What Works and Why
Deborah Ash, FANTA Project, FHI 360
Preconception care: family planning, delayed age at first pregnancy, prolonging of inter-pregnancy interval, abortion care, psychosocial care

- Folic acid supplementation
- Multiple micronutrient supplementation
- Calcium supplementation
- Balanced energy protein supplementation
- Iron or iron plus folate
- Iodine supplementation
- Tobacco cessation

- Delayed cord clamping
- Early initiation of breast feeding
- Vitamin K administration
- Neonatal vitamin A supplementation
- Kangaroo mother care

- Exclusive breast feeding
- Complementary feeding
- Vitamin A supplementation (6-59 months)
- Preventive zinc supplementation
- Multiple micronutrient suppletions
- Iron supplementation

Decreased maternal and childhood morbidity and mortality

- Improved cognition, growth, and neurodevelopmental outcomes

- Increased work capacity and productivity
- Economic development

Disease prevention and treatment
- Malaria prevention in women
- Maternal deworming
- Obesity prevention

Management of SAM
- Management of MAM
- Therapeutic zinc for diarrhea
- WASH
- Feeding in diarrhea
- Malaria prevention in children
- Deworming in children
- Obesity prevention

Delivery platforms: Community delivery platforms, integrated management of childhood illnesses, child health days, school-based delivery platforms, financial platforms, fortification strategies, nutrition in emergencies

**Bold**=Interventions modelled
**Italics**=Other interventions reviewed
34 Countries Account for 90% of the Global Burden of Malnutrition

- Scaling up 10 nutrition-specific interventions to 90% coverage in 34 high-burden countries would reduce stunting by 20%.

*Source: IFPRI*
Solutions Are Needed beyond the Health Sector

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*Source: IFPRI*
12 High-Impact Nutrition Interventions (HiNi)

1. Promotion of exclusive breastfeeding in the first 6 months
2. Promotion of complementary feeding after 6 months
3. Promotion of improved hygiene practices
4. Vitamin A supplementation
5. Zinc supplementation for diarrhea management
6. Deworming for children
7. Iron-folic acid supplementation for pregnant women
8. Iron fortification of staple foods
9. Salt iodization
10. Multiple Micronutrient Supplementation for under 5s
11. Prevention or treatment of moderate acute undernutrition
12. Prevention of treatment of severe acute malnutrition
2025 Nutrition Targets Adopted at the 2012 World Health Assembly

- 40% reduction in global number of stunted children
- 50% reduction of anemia in women of reproductive age
- 30% reduction of low birth weight
- No increase in childhood overweight
- 50% increase in the rate of EBF
- Childhood wasting reduced to and maintained at less than 5%
Progress on Stunting Reduction

Number of countries on course to meet global (WHA) targets

Source: IFPRI 2015 Global Nutrition Report
Progress on Exclusive Breastfeeding

Less progress. Not much data. Reversals even.

Number of countries on course to meet global (WHA) targets

- Green: on course
- Orange: off course, some progress
- Red: off course, no progress
- Black: off course, reversal

N=78

Countries experiencing a reversal: Cuba, Egypt, Kyrgyzstan, Mongolia, Nepal and Turkey

Multi-Sectoral Nutrition Strategy Global Learning and Evidence Exchange
East and Southern Africa Regional Meeting
WHA Data Gaps Closing but Still Large

Source: IFPRI 2015 Global Nutrition Report

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We Don’t Know Enough about Scaling up Undernutrition Interventions

Source: IFPRI 2015 Global Nutrition Report
Global Nutrition for Growth Compact, June 2013

• By 2020:
  ▪ Ensure that at least 500 million pregnant women and children under 2 are reached with effective nutrition interventions.
  ▪ Reduce the number of stunted children under 5 by at least 20 million.
  ▪ Save the lives of at least 1.7 million children under 5 by preventing stunting, increasing breastfeeding, and increasing treatment of severe acute malnutrition.
Background

- GHI and FTF initiatives with nutrition as a critical link
- Civil society advocacy for USG leadership and commitment to nutrition
- World Health Assembly targets 2025 and Nutrition for Growth Commitments for 2020
USAID Nutrition Legacy

- For over 50 years, a leader in international efforts to improve nutritional status in developing countries:
  - Food for Peace (1950s)
  - Multi-sectoral Nutrition Planning and Programming (1970s)
  - Consumption Effects of Agriculture and Economic Policies (1970s)
  - Social and Behavior Change Communication (1970s)
  - Micronutrients: VAD and IDA (1970s)
  - Breastfeeding Promotion (1970s)
  - Essential Nutrition Actions (1997)
  - NACS (2000s)
  - FTF & GHI (2009)
Why is Progress Not Faster in Reducing Malnutrition?

- Inadequate investments
- Inadequate coordination for delivering interventions
- Inadequate coverage
- Inadequate focus on life course
- Inadequate focus on social determinants
- Inadequate nutrition governance

*Source*: Chizuro Nishida, WHO: “What do we know now and what do we still need to know?”
4% of Donor Funding Goes to Nutrition

Source: IFPRI 2015 Global Nutrition Report
Unlucky 13

• But 13 of 29 donors spent less than US$1 million on nutrition-specific interventions in 2013

Source: IFPRI 2015 *Global Nutrition Report*
Key takeaways: Support country plans

- Set and monitor nutrition targets.
- Rigorously manage nutrition funds and programs.
- Focus on High-Impact Actions.
- Increase impact and improve cost-effectiveness by better integration across multiple sectors.