

Evaluation Brief

WFP Office of Evaluation: *Measuring Results, Sharing Lessons*



Synthesis report: Four impact evaluations of WFP programmes on nutrition in humanitarian contexts in the Sahel

While there is considerable evidence of the effectiveness of Moderate Acute Malnutrition (MAM) treatment interventions in optimal conditions, there is insufficient and equivocal understanding of the relationship between malnutrition treatment and prevention.

The WFP's nutrition policy for 2017–2021 articulates the commitment to including nutrition interventions in emergency responses and addressing MAM through prevention and treatment programmes.

This series of Impact Evaluations aimed to assess the interrelationship between prevention and treatment programmes for MAM in emergency and post-emergency contexts.

Context and WFP portfolio

Acute malnutrition in the Sahel affects an estimated six million children under the age of five, with around 1.4 million children requiring treatment for severe acute malnutrition (SAM). In 2017, an estimated 30 million people were affected of whom 12 million required emergency food assistance¹.

WFP food security and nutrition-related Protracted Relief and Recovery Operation (PRRO) interventions in the Sahel region responded to the high rates of poverty coupled with fast population growth, climate change, recurrent food and nutrition crises, and violence due to armed conflicts.

Under the broad umbrella of humanitarian assistance, WFP implements the following food-based interventions to prevent and address MAM and overall food insecurity in the Sahel region: Targeted Supplementary Feeding (TSF), Blanket Supplementary Feeding (BSF), Targeted Food Assistance (TFA), School Feeding (SF), Food for Assets (FFA), and General Food Distribution (GFD). BSF and TSF are intended to support the prevention and treatment of MAM. The other food specific interventions (TFA, SF, FFA, and GFD) aim to contribute to improving food security and nutritional outcomes.

Objectives and Scope of the Evaluations

Evaluations were commissioned by OEV and managed by the International Initiative for Impact Evaluation's (3ie). They form a part of 3ie's Humanitarian Assistance Thematic Window (HATW), which was launched in 2014 with the overall objective of generating high-quality

policy-relevant evidence for improving the quality of life of those in humanitarian crises.

The four impact evaluations in Chad, Sudan, Niger and Mali examine aspects of WFP's food security and MAM prevention and treatment programmes, on nutrition and food security outcomes and identify lessons to improve programme effectiveness

The impact evaluations used a range of methodologies and different types of data, including various quasi-experimental designs, combined with qualitative methods. Given the contexts, none used conventional Randomized Control Trials, but they employed statistical methods to correct for bias and provide robust casual analysis to identify impact.

Tailored to each specific context, the impact evaluations considered the following key questions:

Chad: What is the impact of MAM prevention interventions on the incidence and prevalence of MAM in under 2 year olds under different levels of access to MAM treatment?

Sudan: What are the impacts of different MAM treatment and prevention interventions on the incidence and prevalence of MAM and SAM in children under 5 years and in pregnant and lactating women?

Niger: What are the impacts of different combinations of programme components within WFP's Protracted Relief and Recovery Operation on nutritional outcomes?

Mali: What are the impacts of conflict and food assistance on child malnutrition and other developmental outcomes?

Key Findings

Chad

The MAM prevention programme (BSFP) has a positive effect on MAM incidence in children aged 6-23 months during the lean season. The prevention programme is more effective in reducing MAM incidence among those that have poorer access to the treatment programme. The percentage of MAM cases at end line (14 percent) was half of baseline results (28 percent). The change was observed for both genders.

¹ <http://www.unocha.org/sahel/about-sahel>

Sudan

No significant impact was observed on the prevalence of MAM, SAM or GAM in children under 5 years and PLW. However, a significant reduction (up to 12 per cent) was seen in the prevalence of children at risk of malnutrition where food-based MAM prevention was added to the treatment programme. No change in feeding behavior and practices is attributable to the behavioral interventions.

Niger

Children benefiting from provision of FFA along with either treatment and/or prevention are 19 percent more likely to recover from MAM at end line. Agriculturally sensitive programming in Niger has a large positive impact on a child's probability of recovering from MAM.

Mali

General food distribution was found to significantly increase caloric intake by 52 per cent and zinc consumption by 64 per cent, while school feeding was found to increase vitamin A availability by 48 per cent. The analysis suggests protective effects of food assistance on household total expenditures and food expenditures, as well as on food consumption and on changes in height in children aged to 2-5 years at baseline. The positive impacts were particularly pronounced in households receiving 2 forms of food assistance.

Full cost effectiveness analyses were not conducted in all the evaluations covered in this synthesis report, mainly because of difficulties in compiling disaggregated costing information. A more detailed analysis must be undertaken in order to derive broader recommendations applicable to other similar cases both within and outside the countries under discussion.

All of the impact evaluations were designed to consider the heterogeneity of impacts for various vulnerable groups, including women. Generally, no significant differences by gender were found in the impact of programmes.

Broader Lessons

The four studies in this synthesis present estimates of the causal impact on nutrition outcomes for a variety of nutrition related interventions. While the impact evaluations highlight specific recommendations for a variety of stakeholders in each of the four countries, there are also some broad operational and policy related lessons:

Lesson 1: Greater attention to the timing, sequencing, and roll out schedule of the package of interventions is likely to result in enhanced effectiveness;

Lesson 2: Closer partnership and coordination can support more effective and efficient delivery;

Lesson 3: Barriers to achieving better programme coverage and access include physical distance to health centers, community sensitization and screening;

Lesson 4: Data are problematic, both in terms of its absence, but also, where it is available, in terms of its form, status, and accessibility as a public good.

Recommendations

The following recommendations are drawn from the analysis conducted for the synthesis exercise, and are closely aligned with the four main lessons. The recommendations span policy, operational, and technical aspects of WFP programmes and interventions.

Recommendation 1

To improve overall efficiency and operational effectiveness, WFP should invest in strategic deepening of its relationship and the strengthening of capacity of partners and stakeholders. This pertains to factors that range, for example, from coordination of effort (to ensure appropriate timing, sequencing, connectedness of provision, and coverage), to cost management, and data collection.

Recommendation 2

To improve up-take and coverage of prevention and treatment programmes, the planning and design processes for WFP interventions should pay greater attention to communication with target groups, effectiveness of case finding, and community sensitization, all of which will help improve the quality of targeting, achieve efficiencies, and contribute to enhanced effectiveness.

Recommendation 3

Programme components should be better tailored to context to assist in reducing malnutrition in a sustainable manner. The findings also suggest, from a design perspective, that appropriate bundling of different forms of food assistance, with components being tailored according to context, may be an effective strategy to support vulnerable populations

Recommendation 4

Given the common, cross-agency commitment to achieving SDG 2 a greater effort needs to be made by those at the forefront of that commitment, including the WFP, to ensure that i) data are shared and ii) agencies work to mainstream compatibility in how phenomena are measured.

Recommendation 5

Greater support and attention is needed to improve the collection and use of monitoring and cost data.

Reference:

Full and summary reports of the evaluation and the Management Response are available at www.wfp.org/evaluation
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