Fill the Nutrient Gap (FNG) Analysis Tajikistan
Summary of Key Findings and Recommendations
Nitesh Patel, WFP Regional Bureau Cairo
Analysis process

Secondary data, 200+ sources
- Data / grey literature / peer reviewed articles / reports

Cost of the Diet
- Market survey food price data (Tajstat, 2016-17)

Malnutrition characteristics, enabling policy environment, food availability, access, local practices

Analysis and modelling for 4 regions (market price data unavailable for DRS)
- Estimate cost of nutritious diet for the household (6 members)

Non-affordability of the nutritious diet using expenditure data (WASH 2017)

How to address economic access issues & Intervention modelling
Main Findings

1. Stunting is declining, but prevalence of micronutrient deficiencies is high, and overweight/obesity and non-communicable diseases are increasing.

Note: 2030 target of 40% decline of # children stunted may be met by 2037.

2. Too high consumption of bread and oil, too little diversity; a nutritious diet must be more diverse, and costs 2-3 times more than a diet that just provides sufficient energy.

3. Target groups with high needs (1000 days, adolescent girls, elderly) are most at risk of inadequate nutrient intake.

Source: CotD analysis 2018
Main Findings

4. Major drivers of food security: agriculture, remittances, imported foods and their prices

5. Food security is declining - climate change is a further threat

6. Nutritious diet is unaffordable for 30-55% of households – affordability declines when food security decreases

7. Seasonality of production and incomes is likely to affect nutritional quality of diets throughout the year

Natural shocks experienced by rural households

Source: WFP Food Security Monitoring, draft report December 2017
Main Findings

8. Prevalence of wasting is high during early infancy (0-5 mo.) and many children receive water in addition to breastmilk - water quantity & quality?

9. Late introduction of complementary foods and low diversity, especially when compared with dietary diversity of women

10. Women’s domestic workload constrains their capacity to care for children; labor migration leads to more female-headed households and increased income-earning responsibilities

Source: DHS 2017
Main Findings

11. Availability of nutritious foods can be improved through collaboration with:
   a. collaboration with food producers: increase agricultural diversification and productivity
   b. collaboration with food processors: fortification (wheat flour, oil, complementary foods for young children);
   c. assessing and addressing seasonality to increase availability throughout the year

12. Physical and Economic access to nutritious foods, including for specific target groups, can be improved using existing platforms & delivery channels: e.g. social safety nets, schools, preventive health and nutrition services, and markets

- Most cost-effective options for better meeting micronutrient needs:
  - Household: fortified wheat flour
  - Adolescent girls and lactating women: multi-micronutrient tablets
  - School child: nutritious school meal (fresh foods + fortified flour + beans + fortified oil + iodized salt)
  - 6-23 mo old child: fortified complementary food (local / regional)
Recommendations (1 of 4)

Health and Nutrition

➢ Coordinate through SUN platform and continue **Multisectoral engagement**
➢ Develop, review and promote **food-based dietary guidelines**
➢ **Improve national nutrition capacity**, including through support to the ongoing initiative to develop and incorporate nutrition training modules into medical curricula
➢ Increase local **health centre capacity**
➢ **Raise awareness** within communities about the importance of exclusive breastfeeding and appropriate, diverse and timely complementary feeding
Recommendations (2 of 4)

Fortification

➢ Support passing of **fortification law** and prepare for **implementation** of fortification law by involving relevant government and non-government agencies

➢ Set **fortification standards**

➢ Explore feasibility of development and local/ regional production of fortified **complementary foods** for children 6-23 months old
Recommendations (3 of 4)

Social Protection
➢ Use **Targeted Social Assistance registration system** to ensure delivery of services by other sectors
➢ **Package of support to increase consumption of nutritious foods**, including by specific target groups
➢ Consider and **strengthen capacity of government agencies** to deliver services

Education
➢ **Provision of nutritious meals at school** by school kitchens; provide healthy options in school canteens; require sellers to carry nutritious foods
➢ Sensitize children to **healthy lifestyle and importance of nutritious, healthy, safe foods**

Media
➢ Use journalists and other television entry points to **promote healthy and nutritious diets**
Recommendations (4 of 4)

Agriculture

➢ Promote and support year-round growing of vegetables in greenhouses and tunnels and introduce new varieties to extend the growing season
➢ Promote improved food storage and preservation practices

Gaining further insights

➢ Conduct qualitative assessment of social and cultural drivers of feeding practices and constraints faced by women to care for young children
➢ Better understand provision of water to children
➢ Assess non-affordability of a nutritious diet throughout the year
➢ Analyse data on Minimum Dietary Diversity in Women for winter and lean seasons
Many thanks for your attention!
Any Question?
Fill the Nutrient Gap (FNG) Analysis
Tajikistan – Detailed Key Findings

Dushanbe

May 2018
Meeting nutrient requirements is a prerequisite for preventing malnutrition

MALNUTRITION

Inadequate dietary intake

Disease

Inadequate access to food

Insufficient health services and unhealthy environment

Inadequate care for children and women

Inadequate access to food

Insufficient health services and unhealthy environment

Inadequate care for children and women
Nutrient needs vary by age, sex and biological state

- More active – Higher energy needs
- Higher body weight – Higher energy needs

- **Growth and Development** – Higher nutrient needs / 100 kcal:
  - Child aged 6-8 mo needs 9x as much iron and 4x as much zinc / 100 kcal than adult man
  - Higher need for *nutrient-dense* foods during
    - 1000 days (pregnancy, lactation, 0-24 mo)
    - Adolescence
    - Chronic illness
    - Older age
• Consumption of Adequately Nutritious foods varies and depends on
  • Availability
  • Physical Access
  • Affordability (Food prices & Income)
  • Preferences, Knowledge, Time, Convenience
Recognising need for shared understanding of issues, context and solutions.

Fill the Nutrient Gap aims to identify the barriers to adequate nutrient intake:

- Specific target groups in a specific context
- Multi-stakeholder input and involvement
2 Components of the Analysis

- Reviewing secondary data and sources of information
- Linear programming on the Cost of the Diet

Life-cycle approach with a focus on:

- Children <2 years
- School children
- Pregnant and lactating women
- Adolescent girls
Multiple stakeholders, from several sectors, engaged in the process

- FNG Country Team
- National Government
- WFP
- Other UN Agencies
- Other Partners
- Health & Social Protection, TajStat, Agriculture, Education, SUN Networks
- Country Office, Head Quarters Nutrition, Regional Bureau, Columbia University
- UNICEF, WHO, FAO
- World Bank, NGOs, Academia, Private Sector, Development Partners
Fill the Nutrient Gap
Nutrition situation analysis framework and decision tool

Around the world

**Guatemala**
**El Salvador**
**Ghana**
**Pakistan**
**Madagascar**
**Tanzania**
**Indonesia**
**Cambodia**
**Laos**
**Sri Lanka**
**Q2 2017**

**Mozambique**
**Niger:**
**Q3 2017**

**Ecuador:**
**Q1 2018**

**Philippines:**
**Q2 2018**

**Tajikistan:**
**Q1 2018**

**Armenia**

**Pakistan**

**Laos**

**Cambodia**

**Indonesia**

**Tanzania**

**Malawi**

**Mozambique**

**Rwanda:**
**Q4 2017**

**Uganda:**
**Q4 2017**

**Sri Lanka**
**Q2 2017**

**Philippines:**
**Q2 2018**

**Ecuador:**
**Q1 2018**

Pilots – completed 2016
Completed 2017
Cost of the Diet 2017
Ongoing, starting date

Starting Q2 2018
Zimbabwe
Sudan
Analysis process

Secondary data
- Sourced data / grey literature / peer reviewed articles / reports

Malnutrition characteristics, enabling policy environment, food availability, access, local practices

200+ sources identified

Cost of the Diet
- Market survey data (Tajstat, 2016-17)

Analysis and modelling for 4 regions (market price data unavailable for DRS)

Estimate the cost of staple adjusted nutritious diet for a household of 6 people

Non-affordability of the nutritious diet using expenditure data (WASH 2017)

How to address economic access issues

Intervention modelling
Linear programming (Cost of the Diet, developed by SC-UK) determines the least expensive nutritious diet using locally available foods.

- **Locally available food items**
- **Possible diets meeting all nutrient requirements of the household**
- **Least expensive nutritious diet**

Least expensive nutritious diet adjusted to include 2 servings of wheat per day, 3 servings per week of potato and 1 serving per week of milk (Nutritious Diet / SNUT)

**Wheat flour** is the main staple in Tajikistan.
The Nutritious Diet

What it **is:**

- Based only on foods available in **local markets** in each area
- Based on **lowest cost** to meet nutrient requirements
- It includes 2 servings per day of **wheat flour** (172g per serving for an adult man), 3 servings per week of **potato** (207g per serving for an adult man) and 1 serving per week of **milk** (344g per serving for an adult man) in **all regions**
- Includes 10 servings per week of **oil** (34g per serving for an adult man) in **Khatlon**

What it **is not:**

- Not necessarily what people are **actually** eating
- Not designed to provide recommendations or guidelines of what people **should** eat
Standardized household size and composition modelled for all regions

6 person household:
1. Child aged 12-23 months
2. School child aged (6-7 years)
3. Adolescent girl (14-15 years)
4. Lactating adult woman
5. Adult man
6. Older man (60+ years)
Two types of models are analysed

1. Advocacy around undesirable or suboptimal practices

2. Possible ways to improve affordability of nutritious diet
   - Lower the price of nutritious foods
   - Improve nutrient content of foods
   - Increase availability of nutritious foods and supplements
   - Increase income

Informed by secondary data and stakeholder consultation
The average cost of a nutritious diet (2017) does not change much by month or season.

Source: Cost of the Diet analysis 2018 (WFP)

NB: Food price data was unavailable for DRS
Focus of FNG analysis topics – Tajikistan

- Trends for nutritional status
- Dietary intake – Main foods & dietary diversity
- Situation and Drivers of food security: Agriculture, Remittances, Imports
- Cost & Affordability of a nutritious diet
- Further challenges to food security: Climate change and Seasonality of production
- Early life nutrition (0-5 & 6-23 mo): Nutritional status, Feeding practices, Constraints to caring
- Improving availability and access to nutritious foods (approaches, platforms, delivery channels)
Stunting prevalence is slowly declining, but prevalence of micronutrient deficiencies remains very high and the burden of overweight and obesity is high and increasing.

This indicates that nutritional quality of the diet is inadequate.
Nationally, stunting dropped 12 percentage points from 2009 to 2017

Source: MNS 2009, DHS 2012, MNS 2016, DHS 2017
The most populous regions have lower stunting prevalence, but higher numbers of stunted children.

Total: 264,891
(27% less than 2012)

Anaemia affects more than 40% of women and children

Source: MNS 2003, MNS 2009, MNS 2016, DHS 2017
High prevalence of iron deficiency. In most regions at least 50% of anaemia is attributable to iron deficiency, in both women and children.

Both women and children living in urban areas have significantly lower prevalence rates of iron deficiency, anemia, and iron deficiency anemia than those in rural areas.

Source: MNS 2016
Iodine deficiency is increasing in some regions, and is slightly lower in children than in women.

Households using iodized salt has decreased from 82% nationally in 2009, to 74% in 2016.

Source: MNS 2009 & 2016
Prevalence of Vitamin A deficiency is very high among women and children

WHO: vitamin A deficiency >20% = severe public health problem

Source: MNS 2016
More than one third of women 15-49 yrs are overweight or obese and at increased risk of non-communicable disease

The prevalence of overweight and obesity is higher in urban (41%) than rural areas (32%).

Source: MNS 2009 & 2016
Cost of nutritious diet are highest for the adolescent girl – her (micro)nutrient needs are difficult to meet

Source: Cost of the Diet analysis 2018 (WFP)
The diet in Tajikistan is too high in high-energy, but low-nutrient foods ('empty calories')

- Typical diet contains too much bread and oil and is not diverse enough

- Agricultural production is centered on staple foods
Agricultural production has been centered on cereals and cotton.
Also households with acceptable food consumption maintain high intake of cereals, oil and sugar

Frequencies of food group intake (#d/wk)
The current diet contains more grains and fruit, while nutritious diet has more vegetables and dairy products.

**Current diet***

**Modelled lowest cost nutritious diet***

*Percentage weight of food groups

Source: Cost of the Diet analysis 2018

Source: National Food Pricing Policy in Tajikistan
A nutritious diet for the household costs 2.5-3.5 times more than a diet that meets only energy requirements.

Source: Cost of the Diet analysis 2018
Increased consumption of oil increases cost of a nutritious diet

Vegetable oil as a staple food in all regions (not only Khatlon) - 2017

<table>
<thead>
<tr>
<th>Region</th>
<th>Nutritious Diet</th>
<th>Add Cottonseed Oil to Other Regions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dushanbe</td>
<td>30.3</td>
<td>42.54</td>
</tr>
<tr>
<td>Sughd</td>
<td>26.9</td>
<td>32.28</td>
</tr>
<tr>
<td>Khatlon</td>
<td>28.71</td>
<td>41.2</td>
</tr>
<tr>
<td>GBAO</td>
<td>39.1</td>
<td>50.8</td>
</tr>
</tbody>
</table>

Source: Cost of the Diet analysis 2018
Main drivers of food security situation:
Supply & Prices – Agriculture & Food imports
Income – Agriculture & Remittances

Food security has recently decreased,
this also negatively affects the nutritional quality of the diet
Currently 29.1% of the population lives below the poverty line

- The national method for measuring poverty in Tajikistan is based on the Cost of Basic Needs approach and a minimum food basket, supplemented by a fixed percentage of expenditures for basic non-food items and services.

- The value of the official poverty line was TJS 146.77/mo in 2013 and 175.2/mo in 2016 after accounting for inflation.

- In 2016, 31.3 percent of the population (2.7 million) fell below this line.

Agriculture is the main economic sector responsible for 21% of GDP and 49% of employment

- Agricultural value added to GDP was 25% in 2015, down from a recent high of 27% in 2011 and a thirty year high of 38% in 1996.
- **About 40% of households across the country derive more than half of their income from agriculture; one in five obtain more than 70% of their income from agriculture.**
- Agriculture accounts for 39% of tax revenues
- Women make up 53% of the economically active population in agriculture
- 86% of women in rural areas are involved in farming
Remittances are another main contributor to GDP

- 36.6% of GDP in 2016
- 15% of the working age population goes abroad
- Shocks to the Russian economy affect the Tajik economy
- Only 43% of the working age population is in the labor force
- Of total employment:
  - 13% is formal private sector
  - 16% is in the informal sector
- Tajikistan’s cash-based economy is due to high dependence on remittances

Agricultural and migratory work dominate, and the number of household heads working fluctuates seasonally

- Household heads work less in the winter
- The percentage of household heads working decreased from 2015 to 2017
Consumer prices for foods have been increasing steadily, at a faster rate than prices for non-food products.

Graph 1: Consumer price indices for foodstuff, non-food products and paid services (at the end of each month, in % to December 2015)

Among others, consumer prices have been growing due to factors such as poor transport and infrastructure, profiteering, transportation costs, poor storage facilities, poor system of government intervention in markets, increased costs of renting space in central markets.

Source: Food Security and Poverty No. 3 2017
The food component of the Tajik consumer basket was 198.46 Tajik somoni, while the cost of a healthy diet was estimated at 383.24 Tajik somoni.

The share of household spending on food products is over 55%.

Consumer prices for food have been increasing faster than consumer incomes.

40% of food expenditure is on bread (wheat).

Food expenditure accounts for 50-60% of household expenditure across regions.

Source: Tajstat Food Security and Poverty No. 4 2016; WFP Tajikistan Food Security Monitoring July 2017; National Food Pricing Policy Case Study 2017
Food security fluctuates seasonally but has deteriorated in recent years, especially for the most vulnerable groups.

The chart shows the percentage share of food expenditure groups (rural households) from December 2014 to December 2017. The categories are:
- Very high (>75%)
- High (65-75%)
- Medium (50-65%)
- Low (<50%)

Source: WFP Food Security Monitoring Report December 2017
The cost of a nutritious diet increased, by region, from 2016 to 2017

Source: Cost of the Diet analysis 2018
While nearly all households can afford a diet that meets energy requirements, a nutritious diet is not affordable for 29% - 56% of households (2017).

Source: Cost of the Diet analysis 2018; WASH expenditure data 2017
Climate change related events further aggravate food insecurity and nutritional vulnerability
With climate change, natural and environmental shocks are likely to impact increasing numbers of households

- Tajikistan is the most climate-vulnerable country in the Europe and Central Asia region
- Repeated climate-related disasters limit coping capacities of populations
- Natural hazards can lead to high economic losses in Tajikistan: estimated loss of >20% of GDP with a 200-year return period
- Climate change impacts include:
  - Increase reliance on aging irrigation system
  - Increased glacial melt leading to floods
  - Droughts and decreased energy production
  - Land erosion
  - Loss of crops from heat and frost

One-third of households are regularly affected by natural shocks that decrease agricultural production

- 74% of rural households have livestock and 71% cultivate their own land making them vulnerable to natural shocks.
- 37% of the households reported that they had been affected by reduced agriculture water in the previous three months, compared to 28% the previous year.
- Crop pests and disease also increased from 34% to 39%.

Source: WFP Food Security Monitoring Report December 2017
Seasonality may further reduce access to a nutritious diet

- Food prices seem relatively stable across seasons, but production varies across seasons, which may particularly determine consumption by rural households.
- Household income, and therefore economic access, varies across seasons.
- Dietary diversity among women in winter & lean season?
More households have stocks in Dec than in May and they consist mostly of staples

- 61% of stocks were purchased on the market, and 30% was from own production.
- 69% of households that currently have stocks for a few weeks said they would not be able to maintain or rebuild their stocks in the coming month.

Source: WFP Tajikistan Food Security Monitoring December 2017
Many households grow and consume their own produce, but only in small quantities

- Crops grown in Feed the Future backyard gardens: tomato, sweet pepper, cucumber, carrots, onions, garlic, herbs, potatoes, cabbage, eggplant, zucchini, and others
- Fresh produce is eaten from May-September, and small quantities are pickled or dried for lean season consumption

![Average backyard garden production consumption (May-July)](chart)

- About 64% of households grow food crops to complement consumption
- Only 1.3% of households in Dushanbe grow food crops
- **Rational norm** for vegetables and melons: 142 kg/cap/year

Source: Feed the Future Tajikistan Agriculture and Water Activity

Source: Food Security and Poverty No. 3 0217; National Nutrition Survey 2016
Suboptimal child feeding and nutrition related to several factors:

Low exclusive breastfeeding rates – many receiving water (0-5 mo)

Late introduction of complementary foods

Child dietary diversity, although increasing with age, much lower than among women – related to knowledge / taboos?

Women face time constraints, limiting their ability to care?
Nutritional status of children by age - Tajikistan

Tajikistan has a high prevalence of wasting <6 months

In 2012, 7% of babies were reported to have weighed less than 2.5 kg at birth
64% of children 0-5 months are not exclusively breastfed, but 33% are only receiving water in addition to breastmilk, late introduction of complementary foods.

Depending on the volume given – water might displace breastmilk.

The hygiene level of the water could also have an impact.

Source: DHS 2017
Very few children aged 6-23 months have a minimum acceptable diet (MAD), 20% in 2012 and only 9% in 2017, diversity is main issue.

The minimum acceptable diet indicator is used to assess the proportion of children age 6-23 months who meet minimum standards with respect to IYCF practices.
Child gets introduced relatively late to eggs, meat, vegetables

Age of child when first fed with food or liquids other than breastmilk

UNICEF MNS 2016
Other liquids and sweets are introduced relatively early, encouraging use of supplements and MNP.

- Water
- Infant formula
- Clear broth
- Tea/Coffee
- Fruit juice
- Sweet soda/sugary water
- Sweets
- Vitamin/mineral supplements
- Sprinkles (MNP)

Age of child in months:
- <6
- 6-8
- 9-11
- 12-17
- 18-24

UNICEF MNS 2016
Food consumption of women in November (post harvest) reflects high intake of cereals, but also fruits, vegetables and dairy.

Source: UNICEF Micronutrient Survey 2016
Constraints to women’s ability to care for young children

- Daughters-in-law carry out the household chores to “please their mother in laws and husbands”
- The male labor migration has resulted in the feminization of the labor force, especially agriculture
- Both parents of newborn babies can migrate to seek work leaving the babies with their grandparents.
Breastfeeding is important for meeting the nutrient needs of the child under 2, whose diet becomes more expensive without breastmilk.

Source: Cost of the Diet analysis 2018
Appropriate complementary foods cover many of the child’s nutrient needs, but would not decrease the cost of the child’s diet unless given in-kind because of high current market prices.
There is a need to increase the availability and affordability of nutritious foods:

- more fruits, vegetables, animal source foods
- more fortified foods
- less flour, oil and (sugary) snacks & drinks
Cost-benefit analysis of wheat flour fortification found that it could prevent cumulative economic losses of $878 million over the next 10 years.

Economic consequences of micronutrient deficiencies

- Iron deficiency anaemia among adults
- Iron deficiency anaemia among children
- Maternal mortality
- Neonatal mortality
- Neural tube defects

Fortified wheat flour would have the greatest impact on the cost of a nutritious diet for a household in Khatlon.

Important to also add vitamins A and B12.

Source: Cost of the Diet analysis 2018
Adding small quantities of animal source foods (eggs and milk) to the school feeding ration would meet more of the child’s nutrient requirements and decrease the cost to the family of a nutritious diet for the school-going child(ren).

National Average of intervention for school aged child - 2017

- School feeding (current WFP) + parent contribution + add 2 eggs/wk and 200 ml milk...: 1.9 TJS
- School feeding (current WFP): 2.5 TJS
- Nutritious diet: 2.8 TJS

Source: Cost of the Diet analysis 2018
Add-ons to the school meals rations can help cover more of the child’s micronutrient needs

Source: Cost of the Diet analysis 2018
Provision of fortified foods for free reduces the cost of a nutritious diet to the household.

Monthly household ration: 40 kg fortified wheat flour, 1.5 kg fortified vegetable oil, 4 kg pulses, iodized salt.

Source: Cost of the Diet analysis 2018
Inclusion of fortified foods substantially improves the nutrient content of the ration

Monthly household ration: 40 kg fortified wheat flour, 1.5 kg fortified vegetable oil, 4 kg pulses, iodized salt
Multi-micronutrient supplements for the adolescent girl would help cover many of her nutritional needs, and would have the greatest impact on cost of her diet in Khatlon.

<table>
<thead>
<tr>
<th>Location</th>
<th>Nutritious diet</th>
<th>Multiple Micronutrient Tablet (MMT)</th>
<th>Iron &amp; Folic acid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dushanbe 2017</td>
<td>8.54</td>
<td>5.6</td>
<td>5.5</td>
</tr>
<tr>
<td>Sughd 2017</td>
<td>6.98</td>
<td>4.7</td>
<td>4.6</td>
</tr>
<tr>
<td>Khatlon 2017</td>
<td>18.91</td>
<td>5.3</td>
<td>5.2</td>
</tr>
<tr>
<td>GBAO 2017</td>
<td>10.66</td>
<td>7.0</td>
<td>6.8</td>
</tr>
</tbody>
</table>

Source: Cost of the Diet analysis 2018
Supplementation with multi-micronutrient tablets would have the greatest impact on the cost of the diet for a lactating woman.

![Graph showing average daily cost (TJS) for different regions and dietary components.]

Source: Cost of the Diet analysis 2018
An optimized package of interventions for different individuals and the household could maximize benefits based on existing and proposed platforms.

<table>
<thead>
<tr>
<th>Target</th>
<th>Intervention</th>
<th>Modality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Household</td>
<td>Fortified wheat flour</td>
<td>Market</td>
</tr>
<tr>
<td>Lactating woman</td>
<td>Multi-micronutrient tablet</td>
<td>In-kind</td>
</tr>
<tr>
<td>Adolescent girl</td>
<td>Multi-micronutrient tablet</td>
<td>In-kind</td>
</tr>
<tr>
<td>Child under 2</td>
<td>Agusha</td>
<td>In-kind</td>
</tr>
<tr>
<td>School-aged child</td>
<td>School feeding with parent contribution + animal-source food</td>
<td>In-kind</td>
</tr>
</tbody>
</table>
This household package could reduce the cost of a nutritious diet by TJS 178-526 per month...

**Source:** Cost of the Diet analysis 2018
...And decrease the proportion of households for whom a nutritious diet is not affordable by 12-34%

Source: Cost of the Diet analysis 2018
Public sector programs can improve their contribution to nutrition

School meals and nutrition programs

Social protection for vulnerable groups & specific target groups

Health sector – supplements, nutrition education

In collaboration with – agriculture & private sector
Social protection Programs

Pensions
• 400 Somoni per month
• Three major social assistance programs (old age, disability and survivor)
• Households receiving a pension: national: 38.4% (national); poor households: 42.7%; non-poor households: 33.2%

Targeted Social Assistance (TSA)
• Households receive 400 Somoni per year, about 33 per month
• Intended to target the poorest 15% of the population

School meals
• Government provides for boarding schools
• WFP, with government and parent support, provides for first four years of primary school

Between 2009 and 2013, 73% of the social protection sector budget was allocated for social pensions and 12% for social assistance.
1. Stunting is declining, but prevalence of MNDs is high, and overweight/obesity and non-communicable diseases are increasing
2. Too high consumption of bread and oil, too little diversity; a nutritious diet must be more diverse, and costs 2-3 times more than a diet that just provides sufficient energy
3. Target groups with high needs (1000 days, adolescent girls, elderly) are most at risk of inadequate nutrient intake
4. Major drivers of food security: agriculture, remittances, imported foods and their prices
5. Food security is declining - climate change is a further threat
6. Nutritious diet is unaffordable for 30-55% of households – affordability declines when food security decreases

7. Seasonality of production and incomes is likely to affect nutritional quality of diets throughout the year

8. Prevalence of wasting is high during early infancy (0-5 mo.) and many children receive water in addition to breastmilk - water quantity & quality?

9. Late introduction of complementary foods and low diversity, especially when compared with dietary diversity of women
10. Women’s domestic workload constrains their capacity to care for children; labor migration leads to more female-headed households and increased income-earning responsibilities

11. Availability of nutritious foods can be improved through collaboration with food producers and processors: agricultural diversification and productivity; fortification (wheat flour, oil, complementary foods for young children); assessing and addressing seasonality

12. Access to nutritious foods, including for specific target groups, can be improved using existing platforms & delivery channels: e.g. social safety nets, schools, preventive health and nutrition services, and markets