



World Food
Programme

REGIONAL ADVOCACY BRIEF: NUTRITION-SENSITIVE SOCIAL PROTECTION

WFP Regional Bureau for the
Middle East, North Africa,
Central Asia and Eastern Europe

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WHY INVEST IN NUTRITION-SENSITIVE SOCIAL PROTECTION?

More than 820 million people¹ suffer negative consequences of malnutrition around the world. In 2018, WFP supported 88 million undernourished people. To accelerate the action and end hunger by 2030, we must find new and fast ways to get there.

Social protection provides a unique opportunity for WFP and partners to meet sizeable needs, expand reach, and strengthen governments' assistance to their affected populations². Good nutrition is an important pre-requisite for human and socio-economic development. Through effective policies, programmes and service delivery, malnutrition can be prevented, and millions of lives could be saved while livelihoods, productivity and health can be enhanced.

This advocacy brief lays out ways to strengthen WFP's engagement in nutrition-sensitive social protection³ in countries supported by the Regional Bureau for the Middle East, North Africa, Central Asia and Eastern Europe. It is a call for action advocating for nutrition-sensitive social protection⁴, supporting the most vulnerable.

Ensuring national social protection systems are nutrition-sensitive at different levels, the brief highlights pieces of evidence on the need for, as well as the impact of nutrition-sensitive social protection. It identifies potential entry points, and opportunities in the development and implementation of national responses, poverty-reduction and development plans; and it speaks to broader social policies, programmes and schemes.

OPPORTUNITIES FOR WFP TO ENGAGE IN NUTRITION-SENSITIVE SOCIAL PROTECTION

- **Increasing focus on quality nutrition services:** Social protection in the region has been traditionally characterized by a reliance on universal food subsidies. However, there is growing consensus that non-targeted subsidies have an adverse effect on the nutrition outcomes of targeted population, and rather contribute to the triple burden of malnutrition. Social protection reforms - currently considered by many countries - provide a good opportunity to address the problem of triple burden.
- **WFP reputation as a credible social protection actor:** comparative advantages in analysis to inform policy/programmes; experience in cash-based transfers; delivery mechanisms such as targeting and vulnerability analysis, M&E and registration.
- **WFP's extensive expertise delivering food security and nutrition outcomes** to support the most vulnerable population. In efforts to address all forms of malnutrition, WFP ensures physical and economic access to a nutritious and age appropriate diet for those who lack it and support households and communities in utilizing food adequately. WFP also works with governments to adopt policies and improve systems to address malnutrition, through food fortification of staple foods and micronutrient supplementation.



2. Social Protection refers to a broad set of arrangements and instruments designed to protect members of society from shocks and stresses over the lifecycle. It includes social assistance for the poor, social insurance for the vulnerable, labor market regulations and social justice for the marginalized. At a minimum, social protection systems include safety nets, labor market policies, insurance options, and basic social services. Overall, the components of social protection are often underpinned by rights and legislation, such as minimum wages (WFP, Safety Nets Policy, 2014). Nutrition-sensitive programmes take place in sectors complementary to nutrition and are designed to address some of the underlying and basic determinants of malnutrition. A nutrition-sensitive programme can also be used as a platform to scale up nutrition-specific interventions and, as such, address the immediate determinants of malnutrition. Nutrition-sensitive programming is emphasized as an integral part of all efforts to reduce malnutrition (WFP Nutrition-Sensitive guidelines, 2017).

SEVEN CRITICAL ACTIONS FOR NUTRITION-SENSITIVE PROGRAMMING⁵

- Advocate for the inclusion of nutrition-related objectives, actions, and/or goals into national social protection programmes
- Orient transfer programme targeting towards identifying the population most at risk of malnutrition
- Design and implement transfer programmes to pursue a multi-purpose cash assistance model⁶
- Set cash or in-kind transfer values that are sufficient to achieve nutrition and health-related objectives
- Support evidence based and scalable multi-sectoral nutrition programming
- Incorporate nutrition-sensitive social protection interventions into (country and regional) humanitarian responses
- Food fortification and micronutrient supplementation.

CONTEXT

Middle East and North Africa (MENA) region:

- **Triple burden of malnutrition** - the coexistence of food insecurity, undernutrition, alongside overweight and obesity - is a growing challenge in the MENA region. Tackling the double burden of malnutrition is critical to improving food security and nutrition and promote overall and more equitable economic development. Productivity losses and direct healthcare costs caused by the double burden of malnutrition also have adverse economy-wide effects. The number of undernourished people has increased in the MENA region from 16 million in 1990-92 to 33 million today⁷. Micronutrient deficiencies, which make up the triple burden of malnutrition, are especially high in Iraq, Sudan, and Yemen where the prevalence of anemia among children is over 50 percent⁸. Iodine deficiency is equally prevalent, affecting more than 60 percent of children in Algeria, Morocco, Turkey, and Sudan. Child stunting in Egypt, Iraq, Syria, Sudan, and Yemen are above regional average, ranging from 28 to 58 percent.
- Overweight and obesity are widespread and growing in the region. As of 2013, its prevalence among men and women was above 50 percent in almost all countries in the MENA region. Productivity losses and direct healthcare costs caused by the double burden of malnutrition also have adverse economy-wide effects. Countries in the MENA region spent close to 7 percent of total GDP on healthcare costs in 2009. In Egypt, child undernutrition alone reduces national GDP by about 2 percent or US\$ 3.7 billion per year. Gaps also remain in making



safety nets shock-responsive (particularly for net-food importing countries, such as Egypt, that are impacted by import price changes); in measures that promote people out of poverty and vulnerability; and, in considering the specific needs of vulnerable populations (e.g. people with disabilities). Across the MENA region, school based programmes have the greatest links to nutrition compared to other social protection schemes⁹.

- In recent years, **economic crisis, conflict and migration** this has contributed to an increase in the region's extreme poverty rate, which nearly doubled to 5% in 2015 from 2.7% in 2011, alongside growing inequalities¹⁰. MENA region is the world's largest net importer of cereals, which makes it more vulnerable to food price fluctuations. The region is also affected by climate change, with frequent droughts and unstable yields. During the global **'triple F' crisis** of 2008, food prices spiked and so did rates of malnutrition in MENA.
- **Coverage of social protection remains low in most countries in the region combined with a constrained fiscal space that has necessitated radical economic reforms:** It is estimated that only one third of the region's populations are enrolled in formal social security schemes. More importantly, if subsidies are excluded, social safety net programs in the region represent a small percent of GDP (0.7%) and are generally fragmented and badly targeted. According to the World Bank¹¹, most of the poor and vulnerable fall through the cracks: two out of three people in the poorest quintile are not reached by non-subsidy Social Safety Nets (SSNs). Countries which have committed to the development of social protection policies face challenges in their delivery and implementation, often due to: (i) fragmentation of programmes and weak coordination across different levels of Government; (ii) inadequate funding for social protection programming; (iii) low coverage of interventions; and (iv) limited monitoring and evaluation capability¹². The tightened fiscal space has added pressures and led to a drive for economic reforms, particularly expensive subsidy schemes, in countries such as Egypt, Iraq, Lebanon, Jordan and Sudan.



What does the evidence say?

- Nutrition plays a key role in maximizing social protection outcomes, including health and nutrition, but requires clear nutrition-related objectives.
- Nutrition sensitive social protection services (for example cash transfers, integrated microcredit and nutrition education) improve household food security, dietary diversity and caregiver empowerment.
- Social protection interventions beneficiaries tend to increase the number of meals per day, diversify their diets, reduce negative coping mechanisms that affect nutrition and health in times of crisis
- Platforms to deliver social protection services can be used to encourage greater uptake of health services by caregivers of young children and with opportunities to deliver counselling and education.
- Nutrition-sensitive social protection programmes can be targeted to reach the most vulnerable by strengthening food systems and promoting healthier diets through dietary diversity using a life-cycle approach.

Central Asia and Eastern Europe region

- **Vulnerability to global crises and shocks, instability and conflict within and around the region** - vulnerability to developments and an increasing frequency of natural disasters are obstacles on the path to inclusive growth. The three countries, Armenia, Tajikistan and the Kyrgyz Republic, are at different development stages. Armenia performs better in terms of GDP and real wages, thanks to comprehensive economic reforms implemented in the decade after independence. Kyrgyzstan, and more so Tajikistan, are the poorest countries in the region, but are also progressing in terms of economic growth.
- **Limited coverage and constrained fiscal space** have constrained access to national social protection programmes. Food insecurity and malnutrition remain pertinent issues in Armenia, Kyrgyzstan and Tajikistan, with undernourishment particularly alarming in Tajikistan. In 2014-2016 it is estimated that 30.1 percent of Tajikistan's population (or 2.6 million people) were undernourished. In Kyrgyzstan and Armenia, undernourishment remains of concern in as well at 6.4% and 4.4 % respectively¹³.
- **The triple burden of malnutrition.** The Central Asia and Eastern Europe region is more than 55 percent of adults are overweight or obese¹⁴. Millions are anemic or suffer from various micronutrient deficiencies. While the overall malnutrition situation in the Central Asia and Eastern Europe region has improved, overweight among children and obesity among adults continue to rise and now constitute a significant issue
- WFP's recent evaluation¹⁵ recommended that **comprehensive safety nets are required to break the cycle of hunger and poverty and achieve the SDGs and Agenda 2030**. It concluded that the most pressing challenge for existing social protection programmes, especially social assistance in the Kyrgyz Republic and Tajikistan, is to **increase coverage and transfer adequacy**. Financing of social protection is a key obstacle in scaling up programmes and addressing gaps, where fiscal space could be created by reallocating spending from other government sectors, increasing tax revenues or expanding social insurance coverage and contribution.

Nutrition-sensitive social protection can:

- Support WFP to **achieve Zero Hunger** while supporting multiple outcomes across SDGs
- Support the achievement of Agenda 2030 **commitment to leaving no-one behind** and put the last first, Address the socio-economic, political and environmental barriers compounding vulnerabilities
- **Target the most vulnerable** and improve programme coverage and cost effectiveness
- Offer opportunities to work hand in hand with national governments to **address policy barriers and knowledge gaps** by ensuring that nutrition-sensitive social protection is frameworks.



OPPORTUNITIES AND SEVEN CRITICAL ACTIONS



Advocate for the inclusion of nutrition-related objectives, actions, and/or goals into national social protection programmes

WFP can work with partners to influence policy decision making and incorporate food security and nutrition related objectives into national social safety net programmes and other policies and strategies. For example, supported by WFP, Kyrgyzstan's National School Meals Optimization programme provides high-quality, nutritious meals for around 200,000 primary school children in 640 schools across the country. WFP worked to advocate for this programme to be institutionalized by the government at the policy level and managed to have it now based on a law. Integrating such measures into regulatory frameworks strengthen the role, functions, and responsibilities of communities — parents, teachers, local governance, schoolchildren.



Orient transfer programme targeting towards identifying the most nutritionally insecure population

Social safety net programmes can be nutrition-based when targeting strategies consider factors such as urbanization, consumption of nutrients, percentage of household resources spent on food, obesity rates, prevalence of Non-Communicable Diseases (NCDs), and/or the availability and prices of nutrient-rich commodities on local markets. This may provide a more comprehensive landscape on nutritional insecurity which can inform a more nutrition-sensitive targeting approach. For example, the Djibouti social safety net program has an explicit objective to improve nutrition through targeting nutritionally vulnerable population such as pregnant women and children under two. For poor households, children between 6 and 24 months are provided micronutrient powders and targeted supplements. Moreover, growth monitoring sessions for children under two are organized monthly.



Design and implement transfer programmes to pursue a 'multi-purpose cash model'

In some cases, cash alone is insufficient to alleviate the many complex factors behind poverty and deprivation; as such, 'multi-purpose cash' with its complementary interventions are emerging as viable models for more sustainable change on households' economic, education, and health status. Maximizing linkages through a more nutrition-sensitive 'multi-purpose cash' model can provide beneficiaries with a broader package of services that is able to touch upon the immediate, underlying, and basic causes of malnutrition. For example, as part of the 'First 1,000 Days of Life' programme, WFP supports pregnant and nursing women and children under two through an integrated approach of nutrition-sensitive assistance including access to nutritious food baskets, Primary Health Care Services and knowledge on infant and young child feeding practices. Such programmes can have complementary activities to improve knowledge and change key behaviors on nutrition and hygiene, through regular Nutrition-Sensitive Social and Behavior Change Communication (SBCC) sessions with pregnant women, their families, and influential stakeholders.

4. Multipurpose cash platforms provide cash payments in combination with complementary support such as education or health services as part of social protection efforts for the most vulnerable households.



Set transfer values that are sufficient to achieve nutrition and health-related objectives

of the programme, for it to be a success. For example, when designing a cash-based-transfer (CBT) nutrition support programme for pregnant and lactating women ensure the transfer value covers the needs to improve dietary diversity and micronutrient intake. With sufficient transfer values, women are able to purchase fresh products such as dairy, vegetables and meat. For example, in Egypt WFP supported the government in piloting a top-up to the national social safety net programme – takaful, targeted at pregnant and lactating women.



Support evidence based and scalable multi-sectoral nutrition programming

Sectors such as agriculture, can become more nutrition-sensitive, to contribute to a more holistic approach to addressing the first 1,000 days. For example, conducting nutritional assessments (Fill the Nutrient Gap) to identify gaps in nutrient and food availability in local markets, and then gearing the sector up to filling these gaps affordably, can help ensure that nutritionally vulnerable groups fulfill their needs. School feeding programmes and agricultural strengthening initiatives are strong examples of the coming together of various sectors – education, health, agriculture, social protection – to implement stronger, more comprehensive interventions that can tackle malnutrition by addressing its various causes.



Incorporate nutrition-sensitive social protection interventions into regional humanitarian responses

The integration of social protection elements into protected humanitarian responses can help displaced populations affected by structural food and nutrition insecurity (which could be caused by recurrent natural disasters, conflict, protracted refugee situations, and other shocks) to invest in their futures and meet essential needs. Nutrition-sensitive social protection interventions in emergencies are part of safeguarding the development and future human capital of affected populations. With the average time spent as a refugee on the rise, more developmental responses for displaced persons are needed, rather than simple humanitarian assistance. For example, as part of WFP's food assistance to the most in need in Syria, food vouchers are provided to pregnant and nursing mothers to buy fresh foods at local shops, helping to diversify their diets and improve their nutritional intake during and after pregnancy.



Food fortification and micronutrient supplementation

Promoting the use of safety nets for food fortification and micronutrient supplementation. e.g. school feeding and in-kind subsidies improves food security among vulnerable population. WFP and government provide food to millions of people every year through social safety net programmes. By improving fortification of food assistance programmes, these can deliver essential vitamins and minerals missing in many people's meals. For example, the government of Iran has successfully and systematically enforced a fortification program after identifying iron deficiency anemia as a public health concern. Iran's thorough work in studying health concerns; identifying a way to address them; establishing a sustainable fortification system, and developing an effective monitoring system, is a noteworthy example for other countries considering this route to improved health.

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