

WFP Nutrition and HIV in Numbers 2024

An overview of WFP nutrition and HIV programming to improve diets and address malnutrition

SAVING LIVES CHANGING LIVES

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ABOUT THE REPORT

The World Food Programme (WFP) Nutrition and HIV in Numbers 2024 is WFP's global report on corporate nutrition results, consolidating data from the Annual Performance Report¹, Annual Country Reports², and indicators tracked in the Corporate Results Framework. It provides a consolidated view of WFP's reach, outcomes, and efficiency in preventing and managing malnutrition, improving diets, and strengthening systems. Alongside headline results, the report features country experiences, case studies, and innovative stories that bring to life how results are achieved, from lifesaving nutrition interventions in crises to long-term, sustainable solutions.

This report spans the breadth of WFP's nutrition work, operational delivery, prevention and management of malnutrition, specialized nutritious foods (SNF), food fortification, cash-based transfers, capacity strengthening, integration with national systems, social and behaviour change, partnerships, HIV programming, and data and analytics innovations.

This report is also a key accountability measure for tracking progress against the WFP Nutrition Strategy 2024–2030, reporting on the results achieved across its three pathways and commitments, and demonstrating how WFP's actions contribute to global nutrition targets and the Sustainable Development Goals (SDGs). By combining corporate-level data with country-level narratives, it shows both the scale and the depth of WFP's nutrition impact.

This report can serve both as a reference to inform strategies and inspire innovation, as well as to communicate WFP's impact at every level. The primary audience is WFP staff and programme implementers, with the secondary audience including governments, donors, policymakers, nongovernmental organizations (NGOs), and analysts. At the country level, teams can use it to benchmark results, identify gaps, and strengthen advocacy with host governments and partners. Global, regional, country offices and technical experts can use this report to position WFP's leadership in nutrition and HIV programming in alignment with global nutrition goals

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¹ WFP Annual performance report for 2024: https://docs.wfp.org/api/documents/WFP-0000167222/download/

² WFP Annual country reports 2024: https://www.wfp.org/annual-country-reports-2024

HIGHLIGHTS FROM 2024

27.6 million

people reached across **55** countries with direct
nutrition assistance
aimed at preventing and
managing malnutrition

16.5 million

children under 5 were reached with malnutrition prevention and management services

9.4 million

pregnant, breastfeeding women and girls reached with malnutrition prevention and management services

Top 5 by reach

Afghanistan Pakistan Ethiopia Yemen Sudan

64 million

people reached through nutrition sensitive programmes to improve diets

92 percent

recovery rate among children treated for moderate acute malnutrition

20 countries

benefited from capacity strengthening to improve systems for nutrition

13 countries

implemented programmes to support the local production of nutritious foods

US\$ 8.7 million

in efficiency gains achieved through the NutriPulse and CODA digital monitoring platform

65 percent

of WFP beneficiaries reached with fortified foods, SNF, and diet diversification actions

264 000 MT

of SNF distributed

49 million

people received fortified foods through WFP programmes

OVERVIEW

In 2024, the global nutrition landscape remained deeply challenged by intersecting crises. Escalating conflict, climate shocks, economic volatility, and persistent displacement continued to drive food insecurity and malnutrition across regions. The cost of a healthy diet remained unaffordable for almost 3 billion people globally, while acute malnutrition rose significantly in fragile contexts, disproportionately affecting children under 5, pregnant and breastfeeding women and girls (PBWG), and people living with HIV (PLHIV). Amid these pressures, funding shortfalls constrained humanitarian response, demanding stricter prioritization and innovation in delivery.

Against this backdrop, WFP reaffirmed its commitment to placing nutrition at the heart of its mandate. Anchored in the WFP Strategic Plan (2022–2025), WFP's nutrition portfolio in 2024 continued to advance the Sustainable Development Goals (SDGs) 2 (Zero Hunger) and 3 (Good Health and Wellbeing), while contributing to broader outcomes in education, gender equality, and resilient food systems.

WFP's approach remained grounded in lifesaving and life-changing nutrition assistance, with a focus on the most vulnerable and nutritionally at-risk populations.

This past year, WFP's Nutrition and Food Quality Service advanced its global leadership in combating malnutrition amid an unprecedented convergence of humanitarian crises. From Gaza to the Sahel, conflict, climate shocks, and rising food prices deepened nutrition insecurity—

particularly for children under 5, PBWG, and PLHIV. In response, WFP delivered a record-reaching nutrition response grounded in equity, efficiency, and innovation.

Over 27.6 million people across 55 countries received nutrition-specific services. This included:



16.5 million children aged 6–59 months



9.4 million PBWG



1.7 million other adults and adolescents³.

WFP maintained a **92 percent recovery rate** in treating moderate acute malnutrition (MAM), surpassing global standards, while introducing system innovations that strengthened impact at scale.



³ Other adults and adolescents supported by WFP include men and women in crisis contexts, people with chronic illness, HIV or disabilities, and caretakers of malnourished children in some programmes.

WFP's integrated nutrition approach focused on three pillars:

- Saving lives in humanitarian crises through prevention and malnutrition management services, reaching 21 million women and children in crisis contexts.
- Improving diets through fortified foods, specialized nutritious products, and distribution of USD 44 million in nutrition-focused cash assistance across 29 countries.
- Strengthening national systems
 via policy support, digital tools like
 CODA and NutriPulse, and capacitybuilding efforts in 20 countries.

A significant shift toward digital transformation enabled real-time decision-making. Tools like CODA, now operational in four countries, are replacing paper-based systems with interoperable case management solutions, saving time, costs, and lives. Meanwhile, data analytics platforms such as Modelling and Mapping the Risk of Inadequate Micronutrient Intake (MIMI), Fill the Nutrient Gap (FNG), and Nutrition Vulnerability Assessment in Crisis (NuVAC), informed national

policies, fortified supply chains, and targeted resources where they are needed most.

In 2024, WFP also reaffirmed its role as the lead UN agency addressing the **nutrition needs of people living with HIV** in emergencies. Building on technical guidance, WFP co-convened a global consultation to revise inter-agency standards and address the dual vulnerabilities of HIV and food insecurity in the context of climate change and displacement.

In addition, **64 million people** were reached through nutrition-sensitive programmes in social protection, school feeding, and food systems—underscoring the power of integration. In countries like Mozambique, Mali, and Haiti, WFP's gender-transformative and systems-based approaches translated into measurable dietary gains and resilience.

Amid resource constraints and growing needs, WFP remains a trusted global partner in delivering high-quality, data-driven nutrition services. The 2024 results are not only numbers, but they are also a reflection of WFP's strategic pivot toward sustainable, scalable, and locally owned solutions that put nutrition and dignity at the centre.

Global Operational Footprint Figure 1 WFP nutrition programme reach by region in 2024 This map shows the 55 countries where WFP implemented nutrition Middle East, programming in 2024 Northern Africa, & Eastern Europe 2.9M Asia and the Pacific people 9 M people Western and Central 4.6M people Latin America and the Caribbean 0.3M people Eastern Africa 8.4M people Southern 2.4M people Crisis affected countries Latin America and the Western and Central Southern Africa Middle East, North Africa Asia and the Pacific Eastern Africa Caribbean and Eastern Europe Africa 11percent of global **1.3percent** of global **17percent** of global **8.7percent** of global **30percent** of global **32percent** of global reach reach reach reach reach reach 99.9% 42.3% 57.7% 37.8% 62.2% 42.6% 57.4% 66.3% 33.7% 40.5% 59.5% PREVENTION VS MANAGEMENT **PREVENTION** PREVENTION VS MANAGEMENT PREVENTION VS MANAGEMENT PREVENTION VS MANAGEMENT PREVENTION VS MANAGEMENT

Integrated Approaches and Systems Linkages

WFP continued to strengthen the integration of nutrition across humanitarian and development contexts. Nutrition was embedded in social protection systems in 41 countries, as part of shock-responsive safety nets and maternal-child transfers, including food, cash, and capacity strengthening support to PBWG and children. School-based platforms delivered fortified snacks and deworming in 28 countries, while agriculture-nutrition linkages expanded through local procurement and school feeding.

WFP also deepened collaboration with governments and partners in **55 countries**, with over **70 percent of country offices** engaged in nutrition policy dialogue, technical assistance, or supply chain strengthening. The Fill the Nutrient Gap (FNG) analysis was updated in **12 countries** to inform national planning and investment.

Strategic Shifts and Innovations

2024 marked a strategic evolution in WFP's nutrition programming.

WFP and UNICEF are jointly implementing a prevention-first approach to tackle child wasting, prioritising early action, system strengthening, and sustainability under the Joint Action to Stop Wasting (JASW) partnership. WFP is supporting the integration of wasting management into national systems, expand access to fortified and locally produced nutrientdense foods, improve maternal nutrition, and deliver equitable,

- community-based services addressing the root causes of undernutrition.
- Digital innovations like CODA and Optimus (a tool for planning nutritionally adequate rations) were scaled up to strengthen programme delivery and monitoring of wasting management and prevention programmes, improve ration quality tracking, and support more effective programme design.
- Supply chain enhancements improved last-mile delivery of SNF, reducing lead times by 18 percent in two priority countries.
- The use of cash-based transfers for nutrition was expanded, including conditional transfers linked to antenatal care and growth monitoring, complemented by access to fortified foods and support for local fortification.
 WFP also leveraged tools like MIMI to identify context-specific solutions that improve the availability and consumption of nutrient-dense foods.

These innovations were underpinned by strengthened monitoring and evaluation frameworks, including the rollout of new high-level outcome indicators aligned with WFP's Corporate Results Framework.

The past year has underscored both the urgency and the opportunity to advance nutrition outcomes in fragile and complex settings.

Global Nutrition Targets

As the world's largest humanitarian organization dedicated to combating hunger and malnutrition, WFP plays a pivotal role in advancing global nutrition targets. These goals shape WFP's work and its long-term efforts to build resilient communities and strengthen food systems.

Validating the Minimum Dietary Diversity (MDD) indicator across population groups

At the Open Consultation for the 2030 Agenda for Sustainable Development, WFP emphasized the importance of access to diverse diets in humanitarian contexts and highlighted the need to measure dietary diversity, including the affordability of nutritious diets and the role of fortified foods in enhancing dietary adequacy.

Nutrition for Growth Commitments



WFP is a key partner in advancing the Nutrition for Growth (N4G)⁴ agenda through its operational reach, technical expertise, and strong partnerships.

At the 2025 N4G Summit in Paris, WFP called for urgent action and investment to address the escalating global malnutrition crisis, particularly in fragile and conflict-affected

WFP's strategy to improve diets and address malnutrition 2024 – 2030

In 2024, WFP launched its new global strategy⁵ which sets out how WFP will

contexts where millions—especially children under 5 and PBWG—remain most vulnerable. To achieve this goal, WFP has made the following commitments:



WFP commits to improving access to and consumption of nutritious diets by reaching at least 40 million people annually between 2024 and 2028 through nutrition-sensitive WFP commits to improving access to and consumption



WFP commits to contributing to reducing malnutrition in humanitarian settings by reaching at least 15 million women and children under 5 annually, with services to prevent and manage malnutrition between 2025 to 2028.



By 2028, WFP will expand its engagement with national counterparts from 46 to 61 countries in strengthening evidence-based decision-making to accelerate progress toward nutrition goals by leveraging analytical and data tools such as FNG, ENHANCE, MIMI, NUVAC, and CODA.



WFP continues to be committed to scaling up its food fortification efforts in the coming years, as part of our broader commitment to meet the nutrient needs of the most vulnerable, especially in fragile settings. WFP commits to increase the proportion of fortified cereals from 24 percent to 50 percent between 2024 and 2028.

optimise opportunities to integrate nutrition activities and objectives across its global operations; use data, evidence, and analytics to make most effective use of resources; and work in partnership to support sustainable solutions.

⁴ Nutrition for Growth: https://nutritionforgrowth.org/about/

⁵ WFP's Strategy to improve diets and address malnutrition 2024 – 2030: https://www.wfp.org/publications/wfps-strategy-improve-diets-and-address-malnutrition-2024-2030

How does WFP work to achieve its nutrition objectives?

There are three pathways through which we will achieve our objectives:

Pathway 1. Actions to combat malnutrition in humanitarian crises

This pathway looks at WFP's role in reducing the risk of malnutrition in rapid onset and protracted humanitarian emergencies.

Pathway 2. **Approaches to improve the diets**of those most at risk

This pathway focuses on improving the availability, accessibility, and affordability of healthy, nutritious foods by supporting nutrition-sensitive food systems, including smallholder agriculture, food fortification, and social protection programmes.

Pathway 3. **Strengthening systems and enabling equitable access to healthy,**

This pathway aims to enhance national nutrition systems and capacities by strengthening policy, legislation and institutional frameworks to support effective nutrition programmes and policies.

VISION

A world where no-one is impacted by malnutrition, and healthy, nutritious diets are accessible to everyone, even those living in emergency settings.

GOAL

To safeguard the nutrition of people in humanitarian crises, and to support better access to healthy, nutritious diets for those at greatest risk of malnutrition in a sustainable, dignified, and equitable manner.

WFP OPERATIONAL DELIVERY ON THE GROUND

WFP delivers nutrition assistance through different modalities tailored to the needs and contexts of vulnerable populations. Delivery refers to the mechanisms and pathways through which WFP translates its nutrition strategy and approaches into tangible, lifesaving, and life-changing support to address malnutrition.

Who WFP Reaches

Box1. Reach at a glance

27.6 MILLION people reached through nutrition services

60 percent children under 5 years of age

34 percent pregnant and breastfeeding women and girls

4 percent children 517 years of age

2 percent other adults (over 18, non-PBWG)

Prevention of Malnutrition

Putting Prevention First: WFP's Approach to Tackling Wasting and Maternal Undernutrition

In 2024, WFP reaffirmed its commitment to shifting the global response to malnutrition

from reactive treatment to proactive prevention. With nearly 43 million children suffering from wasting worldwide⁶ and humanitarian crises deepening across regions, WFP's prevention-first approach recognises that the most effective response is to stop malnutrition before it starts.

To respond the life-threatening condition of child wasting, WFP has revised its approach, placing greater emphasis on anticipatory actions, maternal nutrition, household diets, and early detection, while expanding its programming to support the most vulnerable before they become acutely malnourished.

A Comprehensive Prevention Package

WFP's prevention approach is grounded in the understanding that a child's nutritional wellbeing cannot be separated from that of their household. When food is scarce or unaffordable, families are forced to share rations or reduce meal frequency, often at the expense of women and young children.

To mitigate this, WFP's integrated prevention package includes:

- Nutritionally adequate household food assistance via in-kind, cash, or voucher modalities
- SNF or locally produced, nutrient dense food for PBWG and children under 5
- Social and behaviour change (SBC)
 programming to promote healthy diets,
 care practices, and gender equity
- Linkages to health and nutrition services, including antenatal and

⁶ Joint Child Malnutrition Estimates (JME) 2025 for Nutrition & Food Safety: https://www.who.int/teams/nutrition-and-food-safety-and-events/joint-child-malnutrition-estimates/latest-estimates/

- postnatal care and community-based screening
- Market and food system support to improve the availability and affordability of diverse, nutrient-dense foods

This package is tailored to each context, based on food security data, wasting prevalence, market functionality, and local capacity. The goal is to reach people before they fall through the cracks, particularly in fragile settings where prevention is often underfunded or deprioritised.

Prioritising the Most Vulnerable



WFP focuses its prevention programming on two core groups: children under 5 and PBWG. These groups are disproportionately affected by nutritional shocks, with needs that evolve rapidly during the 1,000-day window from pregnancy through a child's second birthday.

In 2024, WFP reached **13.7 million people across 54 countries** with nutrition programming focused on the prevention of malnutrition. This included support to national systems, targeted household food assistance, and individual top-ups of nutrient-dense foods or cash for women and young children at risk.

WFP supported these 54 countries to integrate early identification and targeting of these populations into food security assessments, social protection registries, and humanitarian response plans.

Management of Wasting

In 2024, WFP supported **13.8 million** PBWG and children across **36 countries** who had become moderately wasted, working in partnership with national governments, UNICEF, and local and international NGOs to enhance the efficiency and reach of its efforts.

To meet the needs of wasted children and PBWG, WFP employed a combination of SNF, local nutrient-dense foods, and cashbased transfers (CBTs). The choice of interventions was guided by analyses of nutrition gaps, the food environment, and local preferences. WFP also established efficient referral mechanisms for individuals with severe or high-risk wasting. Dietary management of wasting was implemented alongside WFP's broader programmes to improve food security, anticipatory action, and other household and community-level initiatives.

Where WFP Works

WFP implements nutrition programming across fragile and conflict-affected settings, as well as protracted crises. From emergency responses in regions facing acute food insecurity to long-term system strengthening in stable environments, WFP adapts its delivery approach to local realities. Operational modalities vary based on infrastructure, market functionality, and access, ensuring that assistance is both feasible and effective in each setting.

How WFP Delivers

WFP's delivery toolbox includes **food** assistance, such as SNF and fortified staples, CBTs, value or commodity vouchers, and capacity strengthening.

These modalities are deployed flexibly, often in combination, to respond to the specific needs of vulnerable populations such as children and PBWG. Delivery is never one-size-fits-all; nutritional objectives, local systems capacity, and the functionality of markets and supply chains guide it.

In settings where health systems are weak or inaccessible, WFP works through community-based platforms and alternative delivery mechanisms, from mobile money to local retailers, to ensure assistance reaches the last mile.

Beyond direct assistance, WFP works to integrate nutrition into national systems, supporting governments in designing, implementing, and scaling policies and programs that address the root causes of malnutrition. This dual approach, combining service delivery with system strengthening and policy engagement, is central to WFP's strategy for achieving impact at scale.

Despite challenges such as funding constraints, access limitations, and supply chain disruptions, WFP continues to prioritise both the quality and coverage of its interventions, ensuring that assistance is not only widespread but also effective and equitable.

FROM THE FIELD | FOCUS ON LAST MILE PROJECT SOUTH SUDAN

To address significant access barriers in South Sudan's MAM management programme, where beneficiaries in remote villages faced journeys of up to 30 km without transport to reach nutrition sites, the *Community-Based Last Mile Distribution Model* was piloted in Gogrial West County.

The model aimed to improve programme coverage and nutrition outcomes by decentralising distribution through community stores and local mother-to-mother support groups.

Implemented between February and October 2024, it established a tiered supply chain, enabling women to hand-carry nutrition supplies the final 3–5 km to households

A review of the approach showed that this innovative approach led to improved recovery rates- reaching up to 100 percent, and significant reductions in stock diversion and referral delays, demonstrating the model's effectiveness in improving both service accessibility and nutrition programme outcomes



Specialized Nutritious Foods

In 2024, **WFP distributed 264,369 metric tons of SNF**. This represents a 12 percent decrease from 2023 (300,974 metric tons distributed in 2023).



SNF were distributed through WFP food baskets, school meals, and nutrition programmes.

Similar to 2023, the reduction in SNF distribution in 2024 was primarily due to funding shortfalls, access challenges caused by insecurity in certain areas, and pipeline disruptions. To address these constraints, WFP is improving distribution efficiency through innovative methods piloted in two countries (Chad and South Sudan), including last mile delivery solutions and community-based approaches, while also strengthening supplier engagement and diversifying modalities for malnutrition prevention, such as the expanded use of cash-based

transfers, to sustain and optimise nutrition support for the most vulnerable populations in hard-to-reach areas."

Food Fortification

In many areas where the WFP operates, the cost of a healthy and diverse diet remains unaffordable for most households. WFP continues to invest in fortification as a key strategy to improve the nutrient density of staple foods.

In 2024, WFP delivered over **600,000 metric tons** of fortified foods, including wheat flour, maize meal, rice, salt, and oil; a notable decrease from the 1.5 million metric tons distributed in 2023. Among fortifiable cereals, **63 percent** were fortified in 2024, down from 77 percent in 2023. While the proportion of fortified wheat flour distributed remained consistently high (**98 percent** in both 2023 and 2024), the overall decline is attributed to the reduced share of wheat flour distributed in WFP operations.

In 2024, WFP supported capacity strengthening for fortification across 54 countries in policy development, increasing demand and improving supply.

With WFP's technical support, India and Bangladesh reached 720 million and 16 million people, respectively. In Bangladesh, WFP also provided technical assistance to fortified rice kernel producers, rice millers, and retailers, while implementing SBC initiatives to promote the consumption of fortified foods by the general population.



Regional Focus

In 2024, several WFP-supported programmes expanded their reach with fortified foods:

- WFP-supported country programmes in the Southern and Eastern Africa regions more than doubled their volumes of fortified wheat flour.
- WFP country supported programmes in Latin America and the Caribbean region also increased maize meal fortification by 50 percent.
- Country programmes in Asia and the Pacific region more than doubled rice fortification volumes.

Figure 2 Regional distribution of fortified foods



31% Asia & the Pacific

21% Middle East, North Africa & Eastern Europe

18% Southern Africa

15% Eastern Africa

10% Western & Central Africa

5% Latin America & the Caribbean

FROM THE FIELD | FORTIFIED RICE IN THE REMOTE HIMALAYAS

In the remote districts of Karnali, in the Himalayan mountains, communities face widespread poverty, chronic food shortages, and multifaceted malnutrition. These challenges are compounded by climate change. PBWG and children under the age of 5 often have poor access to nutritious food, with lasting effects on their health and overall wellbeing.

To address these challenges, the Government of Nepal, in partnership with WFP, introduced the production and supply of rice fortified with eight essential vitamins and minerals, such as iron, folic acid, zinc, and B vitamins.

In 2024, with WFP's technical assistance, the Government's Food Management and Trading Company Limited (FMTCL) produced 6,961 metric tons of fortified rice, benefiting 187,999 individuals through 36 Fair Price Shops in five districts of Karnali. The programme has now been scaled up to all districts of the Karnali Province, making fortified rice affordable and widely available.

Beyond improving health and nutrition, local authorities in Karnali see fortified rice as a complementary investment to locally produced nutrient-dense foods in addressing micronutrient deficiency.



WFP-Delivered Cash for Nutrition



Where markets are functional, cash-based assistance remains a critical tool for improving nutrition outcomes.

In 2024, WFP transferred over **USD 44 million in cash-based assistance across 29 countries**, specifically to **improve nutrition outcomes**. Over 1 million people benefitted from these CBTs – a 23 percent increase from 2023.

Box 4| CBT at a glance

US\$ 44 million

in cash-based transfers



73 percent in commodity & value vouchers



27percent transferred as cash **27percent** in cash

FROM THE FIELD | CASH WHERE IT COUNTS: NAVIGATING CRISIS WITH CHOICE IN NIGERIA

In 2024, Nigeria's nutrition crisis worsened due to inflation, flooding, and market disruptions. WFP scaled up CBT, reaching over 611,000 people, including 64,000 flood victims in Borno State, using platforms like PlugPay. WFP facilitated financial inclusion by helping with bank access and national ID registrations, and increased cash transfer values by over 50 percent to combat inflation. Evidence showed improved food security when CBTs were combined with nutrition counselling, fortified foods, and livelihood support. WFP is now reviewing transfer values for 2025, emphasizing the need for adaptable, market-responsive assistance.

Strengthening systems to enable access to healthy diets

WFP leveraged its Country Capacity Strengthening (CCS) approach to support national governments, local actors, and partners in addressing malnutrition and improving diets by providing technical support and interventions like food fortification and nutrition-sensitive social protection.

In 2024, **WFP worked with national systems in 20 countries** to strengthen capacities for preventing and managing malnutrition, supporting governments in building more effective, sustainable nutrition responses.

Through technical assistance, policy engagement, and training, WFP contributed to the adoption of improved nutrition policies and legislation in Egypt, Madagascar, Nepal, and Tanzania. In Bangladesh and the Philippines, WFP's support led to the release of over USD 200 million in government funding for national nutrition programmes. Seven countries successfully scaled up programme designs and delivery systems to improve nutrition outcomes. Nearly 800 national and subnational institutions benefited from

WFP's capacity-strengthening efforts in which over 85,000 government and partner staff participated. Measurable improvements in knowledge and skills were recorded among national staff in Egypt, India, the Philippines, and Tanzania, underscoring WFP's strategic role in advancing country-led, systems-based solutions to malnutrition.

FROM THE FIELD | STUNTING PREVENTION: REACHING MILLIONS WITH SOCIAL PROTECTION IN PAKISTAN

The Benazir Nashonuma Programme (BNP) is a WFP-implemented, government-owned, stunting prevention programme, targeting PBWG and children under 2, who are recipients of the national Benazir Income Support Programme. In 2024, WFP scaled up the programme to 158 of the 170 districts across the country, providing services and nutritional supplements to more than 2 million PBWG and children under 2 in more than 560 facilitation centres. WFP managed the supply chain of SNF for BNP as well as ready-to-use therapeutic foods for UNICEF, which are used to manage acute malnutrition.

KEY AREAS AND OUR IMPACT ON NUTRITION OUTCOMES

Humanitarian crises

In 2024, WFP provided malnutrition prevention and supplementation services in 20 crisis-affected countries, classified under the Corporate Alert System and IPC Phase 3+, where food insecurity and malnutrition levels were critically high.

WFP reached **21.4 million women and children** (79 percent of its operational target). However, this represented only 32 percent of the total needs in these settings. The gap between needs and reach reflects the magnitude of the crisis and the operational trade-offs that must be made in resource-constrained environments.

FROM THE FIELD | A LIFELINE AMID GAZA'S DEEPENING HUNGER CRISIS

In 2024, Gaza faced one of the world's gravest hunger crises. Widespread conflict displaced 1.9 million people, food systems collapsed, and over 90 percent of the population experienced crisis-level food insecurity. By March, 30 percent of children under 5 in northern Gaza were acutely malnourished.

WFP mounted an emergency response, reaching 2.1 million people (1.86 million in Gaza) with food and nutrition assistance. SNFs were distributed to 170,744 PBWG and 264,304 children under 5. Community kitchens expanded rapidly, serving up to 500,000 hot meals daily. Amid the severe humanitarian crisis, WFP assistance remains a vital source of sustenance.



Nutrition Adequacy

WFP's general food assistance plays a critical role in preventing child wasting and maternal undernutrition. It stabilises household food security, access to SNF and interventions for vulnerable members, especially children under 5 and PBWG. In 2023, WFP introduced a high-level indicator on nutritional adequacy in its Corporate Results Framework, marking a strategic shift toward improving the quality of in-kind food assistance and guiding its planning, financing, and implementation.

In 2024, **22 percent** of planned rations achieved this target, an improvement from 12 percent in 2023. Among distributed rations, **20 percent** were nutritionally adequate and partially adequate, up significantly from just 7.7 percent the previous year. Despite this progress, **80 percent** of distributed rations in 2024 remained inadequate, highlighting the persistent impact of funding shortfalls, limited fortification capacity, and supply chain constraints.

To address these challenges, WFP launched the Nutritional Adequacy High-Level Task Force in 2024 to drive systemic solutions, including expanded use of fortified foods and improved data-driven decision-making. As part of this effort, WFP refined and scaled up the use of analytical and planning tools, such as the Optimus tool, to identify costefficient ways to enhance ration quality.

Additionally, fortified staples were delivered through food assistance and school meal programmes in 60 countries.

MAM Management - Programme Outcomes

Performance across key Moderate Acute Malnutrition (MAM) programme indicators remained robust, with all targets met and several substantially exceeded. The mortality rate **0 percent**, below the target of less than 3 percent, while the recovery rate reached 92.3 percent, surpassing the SPHERE standard of at least 75 percent. The non-response rate increased marginally to 3.6 percent (up from 3 percent in 2023) but remained well within acceptable thresholds (less than 15 percent). This reflects ongoing operational challenges, including limited access due to insecurity and resource constraints. Continued close monitoring and adaptive programming will be crucial to maintaining high recovery rates and addressing emerging barriers to service delivery.

Indicator	SPHERE Standard Target	2024 Performance
Mortality Rate	<3 percent	0 percent
Default rate	<15 percent	4 percent
Non-response rate	<15 percent	3.6 percent
Recovery rate	>75 percent	91percent

Coverage⁷ of MAM Management Programmes



Data from 19 reporting countries indicate programme coverage for MAM management programmes in 2024 was **65 percent**, indicating moderate overall reach, but with considerable variation across contexts.

Several countries demonstrated important gains in reaching children in need.

Afghanistan and Burundi, for example, registered positive trends, with coverage increasing by 28 percent (68 percent in 2023 vs 96 percent in 2024) and 16 percent (49 percent in 2023 vs 65 percent in 2024), respectively, reflecting ongoing efforts to increase programme accessibility despite persistent challenges.

However, coverage declined in several countries. Yemen (86 percent in 2023 vs 56 percent in 2024), the Central African Republic (65 percent in 2023 vs 42 percent in 2024), and Ethiopia (78 percent in 2023 vs 57 percent in 2024) experienced significant drops of over 20 percent compared to 2023. Addressing funding gaps, improving access, and strengthening delivery mechanisms will be crucial to expanding services and preventing severe acute malnutrition among children in critical emergencies.

 $^{^{\}rm 7}$ Coverage data reported is for areas targeted by WFP nutrition programmes.

Coverage of Malnutrition Prevention Programmes

In 2024, data from 34 countries where WFP is directly implementing prevention programmes show an average coverage of **80 percent**, reflecting steady progress.

Mozambique, for example, increased its coverage from 32.8 percent in 2023 to 91.8 percent in 2024. Guinea-Bissau also showed a sharp rise, from 51.4 in 2023 to 96.6 percent in 2024. In Mauritania, coverage increased from 45.5 to 72.7 percent between 2023 and 2024.

Coverage increased through a combination of decentralizing services to the community level, integrating nutrition into health and social protection platforms, strengthening supply chains, leveraging digital tools for real-time tracking, engaging communities, simplifying treatment protocols, and supporting national systems and policies.

However, the data also highlights reversals. Yemen's coverage dropped steeply from 74 to just 25 percent. Central African Republic experienced a 13 percentage points decline (66 percent in 2023 vs 53 percent in 2024), while coverage in the Democratic Republic of the Congo fell by nearly 12 points (45 percent in 2023 vs 33 percent in 2024). These declines were largely driven by insecurity, population displacement, and critical funding shortfalls that disrupted service delivery.

These results show that when WFP is resourced and able to access communities, prevention coverage can expand rapidly. Sustained investment and humanitarian access remain essential to protect and scale these lifesaving programmes.

Improving Diets for Children and Women



WFP supports strategies to improve dietary diversity of vulnerable groups, such as strengthening household availability and affordability of local, nutritious foods, homegrown school feeding, and promotion of healthy, balanced diets and optimal infant and young child feeding practices.

Dietary Diversity Outcomes for Children

In 2024, **33 percent** of children aged 6–23 months in WFP-supported programmes received a Minimum Acceptable Diet (MAD), defined as the consumption of foods from at least five out of eight food groups.

Of the 35 reporting countries, over half recorded positive trends. Notably, Zambia and Malawi reported significant increases of 29 and 24 percent, respectively, indicating strong momentum in improving the diets of young children.

However, **15 countries** saw declines in the proportion of children consuming MAD. Honduras and Tajikistan recorded the most pronounced drops, at 23 and 22 percent respectively. Continued investment and a strategic focus on improving the quality of programme delivery will be essential to sustain and expand progress moving forward.

Dietary Diversity Outcomes for Women and Girls



In 2024, **40 percent** of women and girls of reproductive age achieved minimum dietary diversity, defined as consumption of at least five out of ten food groups.

Of the 41 countries reporting data, **24** recorded improvements in the proportion of women achieving the Minimum Dietary Diversity for Women (MDD-W)^{8,9}.

Haiti reported the largest improvement, with the proportion of women achieving MDD-W increasing by 47 percentage points compared to 2023. Zambia and Mali also demonstrated significant progress, with increases of 37.6 and 36.8 percentage points, reaching 65 percent and 74 percent, respectively.

However, 15 countries experienced declines in the percentage of women attaining MDD-W between 2023 and 2024. Colombia recorded the sharpest drop, down by 41 percentage points, to 20 percent. The United Republic of Tanzania declined by 30 points, to 27 percent, while Kenya and Nigeria saw decreases of 11.6 points (to 36.2 percent) and 11.4 points (to 37.6 percent), respectively.

The strong gains achieved in countries like Haiti, Zambia, and Mali highlight the effectiveness of targeted nutrition interventions. These achievements provide valuable momentum and lessons that can be leveraged to expand and accelerate improvements in women's nutrition outcomes.

FROM THE FIELD | **NUTRITION INTEGRATION**FOR DIETARY GAINS IN MALI

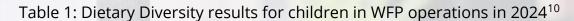
In 2024, Mali faced a deepening nutrition crisis, with chronic malnutrition affecting 25 percent of children and severe rates surpassing 38 percent in some regions. In response, WFP adopted a fully integrated nutrition approach, embedding dietary support across food assistance, livelihoods, education, and social protection programmes.

Through this strategy, WFP reached over 136,000 children under 2 and PBWG with SNF, locally produced fortified flours, and cash-based transfers. These efforts were reinforced by SBC, cooking demonstrations, and community nutrition hubs.

- 79 percent of women of reproductive age met the minimum dietary diversity threshold more than doubling from 36 percent in 2023.
- 40 percent of children aged 6–23 months achieved MAD, up from 17 percent in 2023.
- Households reported significantly increased consumption of Vitamin A-rich foods (58 percent, up from 31 percent), hem iron (44 percent, up from 23 percent), and protein-rich foods (83 percent, up from 68 percent).

⁸ The Minimum Dietary Diversity for Women (MDD-W) indicator has been modified to include fortified foods as part of the updated guidance¹.

⁹ FAO & FHI 360 (2021). Minimum Dietary Diversity for Women – Updated Indicator Guide. Available at: https://www.fao.org/3/cb3432en/cb3432en.pdf





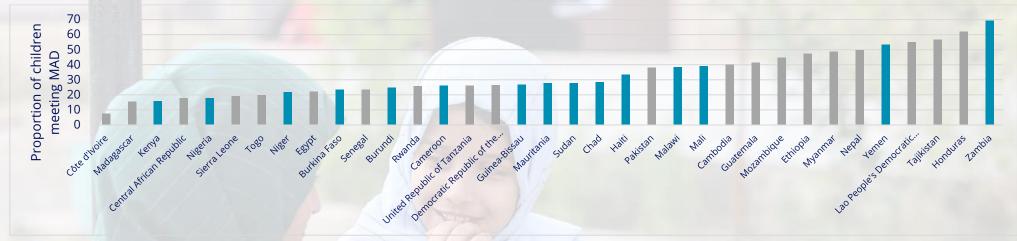
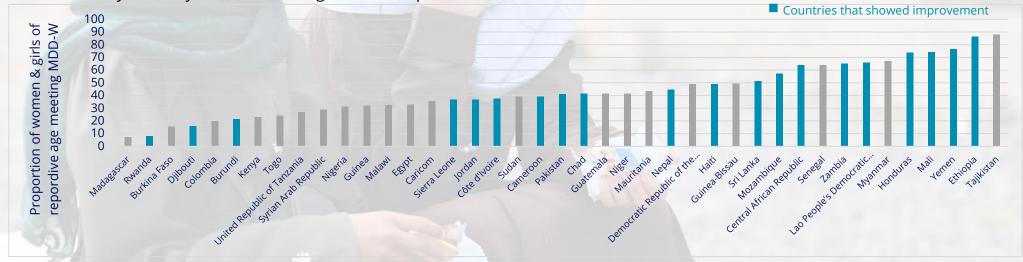


Table 2: Dietary Diversity for women and girls in WFP operations in 2024



¹⁰ Country operations vary widely in scale, context, and programme modality. Data reflect WFP-supported areas only.

Social Behaviour Change to support diets

In 2024, **over 20 million people** were reached through SBC. These interventions spanned from mass media campaigns and digital messaging to school-based initiatives, interpersonal counselling, community dialogues, and food demonstrations. They were implemented across various programme entry points including general food assistance, school feeding, CBTs, and malnutrition prevention and treatment.

WFP also began systematically reporting on the **adoption and practice of healthy dietary behaviours** among vulnerable groups. Six out of ten countries reporting on this outcome indicator noted that more than 50 percent of targeted individuals had adopted behaviors such as regularly consuming diverse food groups, reducing their intake of processed foods and sugary drinks.

FROM THE FIELD | MEDIA-BASED SBC INTERVENTIONS TO IMPROVE NUTRITION BEHAVIOURS IN TAJIKISTAN

Malnutrition remains a serious concern in Tajikistan, where 18 percent of children under 5 are stunted and 41 percent of women are anaemic. Key drivers include limited access to nutritious foods, economic constraints, low nutrition awareness, and entrenched dietary norms favouring high-carb, low-nutrient meals.

To address these challenges, an SBCC intervention grounded in Social Network Theory was launched using mass media. TV Safina—Tajikistan's mostwatched channel, reaching over 60 percent of the population—aired 30 culturally relevant cooking show episodes over ten months. The programme reached approximately 1.5 million regular viewers and engaged 30-100 percent of parents with young children, the primary target group. In total, the content attracted over 2 million TV views and more than 3 million views on YouTube.

Building on this success, the next phase will roll out a nationwide media-based behaviour change campaign, integrating lessons learned and amplifying key messages through social media.

The Power of Nutrition Integration: Sustaining Nutrition Outcomes

FROM THE FIELD | MOZAMBIQUE'S GTNS
PROJECT: INTEGRATING NUTRITION FOR
LASTING IMPACT

In Chemba District, Sofala Province—where food insecurity, weak infrastructure, and gender inequality overlap—WFP Mozambique launched the Gender-Transformative Nutrition-Sensitive (GTNS) project in 2020 to reduce stunting in children under 5 by embedding nutrition across agriculture, health, gender, and social protection.

Food assistance is linked to nutrition-sensitive assets like cookstoves and latrines. Agricultural support promotes climate-resilient crops, livestock, and duck rearing. Solar dryers and hermetic bags preserved nutrient-rich foods. SBC and gender dialogue clubs shift diets and norms, while mobile health brigades expand care.

Women's dietary diversity rose from 27percent in 2023 to 52 percent in 2024, with improved intake of vitamin A, iron, and protein.

GTNS 2.0, launched in 2024, builds on these lessons with scalable, cost-effective interventions through 2026.



In 2024, the launch of WFP's Strategy for Improving Diets and Addressing Malnutrition (2024–2030) marked a key step in positioning nutrition as a cross-cutting priority across WFP's operations. By integrating nutrition objectives across programmes, strengthening data systems, and building strategic partnerships, WFP is creating sustainable pathways to better nutrition outcomes.

WFP's efforts had measurable impact: 71 percent of beneficiaries were reached through nutrition-sensitive programmes—up from 54 percent in 2023—WFP also advanced nutrition mainstreaming in complementary sectors such as social protection, school feeding, and resilience programmes. Nutrition was systematically integrated into programming in 54 countries, helping address the underlying drivers of malnutrition at scale.

HIV Programming

HIV remains a critical global health challenge. In 2024, an estimated 40.8 million PLHIV, including over 1.4 million children under the age of 14¹¹.

In 2024, WFP directly assisted 113,877 people living with HIV and tuberculosis (60 percent female) and their families to meet their essential nutrition needs. This support was delivered through food and cash transfers, as well as individual capacity strengthening activities. Activities included general food distribution, management and prevention of malnutrition, SBC, resilience and livelihood support, and social protection.

¹¹UNAIDS, 2024

WFP's HIV programming spanned all regions, reaching 32 countries¹², nine of which were in corporate emergency contexts. In addition, WFP provided country capacity strengthening in 18 countries, supporting awareness raising, policy development, systems strengthening, and evidence generation through technical assistance, training, and partnerships.

WFP also expanded its role in health supply chains, integrating tuberculosis commodities into its Global Fund services and delivering health products across 2,851 delivery points in seven countries¹³, valued at USD 41.3 million.

A new strategic direction: Feeding Health, the last mile on HIV - WFP's global strategy 2025 – 2030

In 2024, WFP launched its new global HIV strategy, *Feeding Health, the Last Mile on HIV: WFP's Global Strategy 2025–2030*, marking a significant evolution in how the organization addresses the intersection of HIV, food insecurity, and malnutrition.

The strategy introduces a three-tiered, context-specific model that guides WFP's programming in:

- UNAIDS Fast-Track countries with recurrent humanitarian response and other emergencies¹⁴
- Fast-Track countries without ongoing or recurrent humanitarian emergencies, those in stable development settings
- 3. Non-Fast-Track countries

This approach ensures that HIV-sensitive interventions are tailored to local realities, with a strong emphasis on inclusion, equity, and resilience.

FROM THE FIELD | **BUILDING RESILIENCE**THROUGH NUTRITION FOR PEOPLE LIVING WITH HIV AND TB-AFFECTED COMMUNITIES IN MALAWI

In 2024, a WFP-supported assessment in Malawi revealed worsening food insecurity and malnutrition among people living with HIV and tuberculosis (PLHIV/TB).

In Chikwawa district, 67% of PLHIV/TB were food insecure, and dietary diversity had dropped from 89% in 2019 to 69%.

Based on these findings, WFP designed a targeted intervention reaching 2,400 individuals across 16 HIV support groups. The initiative combined nutrition education, financial literacy, and livelihood training with the distribution of agricultural inputs.

Observations among participants showed that 84% improved their dietary practices and knowledge in food diversification, finance, and livestock management. In 2025, WFP plans to expand its supplementary feeding programmes to three additional districts severely impacted by El Niño, extend support to pregnant and breastfeeding women, and further integrate nutrition and HIV interventions across all WFP programmes and supply chains.

¹² Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Colombia, Congo, Côte d'Ivoire, Democratic Republic of the Congo (DRC), Djibouti, Dominican Republic, Eswatini, Ethiopia, Gambia, Ghana, Guatemala, Guinea, Guinea-Bissau, Kenya, Madagascar, Malawi, Mali, Myanmar, Namibia, Niger, Rwanda, Senegal, Somalia, South Sudan, Tanzania, Uganda and Zimbabwe

¹³Angola, Cameroon, Central African Republic, Chad, Liberia, Mali and Mozambique

¹⁴ List of UNAIDS Fast-Track countries on WFP's emergency operations list, May 2024 – countries subject to change: Chad, Democratic Republic of Congo, Ethiopia,

Haiti, Kenya, Mali, Mozambique, Myanmar, Nigeria, Pakistan, South Sudan, Ukraine, Zambia, Zimbabwe

Partnerships

WFP deepened strategic partnerships in 2024 to address malnutrition through integrated programming. JASW with UNICEF is improving alignment, efficiency, and planning across agencies, governments, and partners. The initiative is active in five countries¹⁵.

WFP convened a Global Technical Consultation to support the update of the 2010 Inter-Agency Standing Committee (IASC) guidelines on HIV in humanitarian contexts. In partnership with UNDP, UNAIDS, and UNHCR, WFP advanced efforts to integrate nutrition and food security into emergency HIV responses. The consultation concluded with a roadmap to finalize the revised guidelines by mid-2025 and a joint global policy brief on climate change and HIV.

To catalyse large-scale change, WFP partnered with UNICEF and WHO in 2024 to launch the Joint UN Initiative for the Prevention of Wasting (JUNIPr)¹⁶. Supported by FCDO, Irish Aid, and USAID-BHA, the initiative helps governments in three high-burden, food-insecure contexts implement national roadmaps, apply the 2023 WHO Guidelines, and generate actionable evidence.



Data and Analytics

In 2024, WFP advanced its analytical and digital innovations to optimise nutrition programme design, delivery, and monitoring.

Fill the Nutrient Gap & ENHANCE

WFP's FNG analysis remained a cornerstone of this effort, estimating the cost and affordability of a nutritious diet. To date, FNG analyses have been completed in over 50 countries, with ongoing work in 2024 in Madagascar, Central African Republic, Zambia, Guatemala, Peru, Republic of Congo, Jordan, and Djibouti.

Complementing this, the **ENHANCE** tool supported the development of nutrition-sensitive programmes and policies across nine countries, including feasibility studies on meeting nutrient needs for MAM and setting CBT values for prevention and treatment.

Modelling and Mapping the Risk of Inadequate Micronutrient Intake (MIMI)

Using secondary data and in-country surveys, MIMI provided evidence on dietary micronutrient gaps and modelled the potential impact of fortification across geographic, socioeconomic, and urban-rural divides to ensure equitable policy outcomes. In 2024, MIMI analyses were conducted in Nigeria, Ethiopia, and India, with new engagements initiated in Bangladesh, Rwanda, Senegal, and Sri Lanka.

¹⁵ Haiti, Kenya, Madagascar, Nigeria, and South Sudan—with expansion planned in ten more

¹⁶ JUNIPr combines WFP's reach, WHO's technical leadership, UNICEF's systems expertise, and IFPRI's research to deliver early, coordinated action for women and children at risk of malnutrition.

Optimisation of beneficiary service delivery, management & vulnerability assessments

To translate analytics into action, WFP accelerated the **optimisation of nutrition programme service delivery** by scaling up an end-to-end assurance approach first introduced in 2023. This included implementing **last-mile delivery solutions** such as geographically mapped routing and community-based distribution models to improve timely access to health and nutrition services, particularly in hard-to-reach areas.

WFP also strengthened beneficiary management and monitoring through **CODA**, a digital case management platform that tracks individuals from enrolment to exit. CODA has been implemented in four countries so far. In South Sudan, CODA expanded from six to 80 health facilities in 2024, reaching 15,000 beneficiaries. Integrated with national systems and replacing paper-based processes, CODA is projected to save \$1.5 million over five years by improving service efficiency.



The Nutrition **Vulnerability Assessment in Crisis (NuVAC) tool**, which supports rapid nutrition vulnerability profiling in emergency setting is helping reshape WFP's design and delivery of cost-effective nutrition interventions. NuVAC delivers consensusbased evidence on where and when to focus and informs triggers for anticipatory action. To date, the approach has been used in **South Sudan**, **Gaza**, and **Sudan**.

NutriPulse and Monitoring Tools

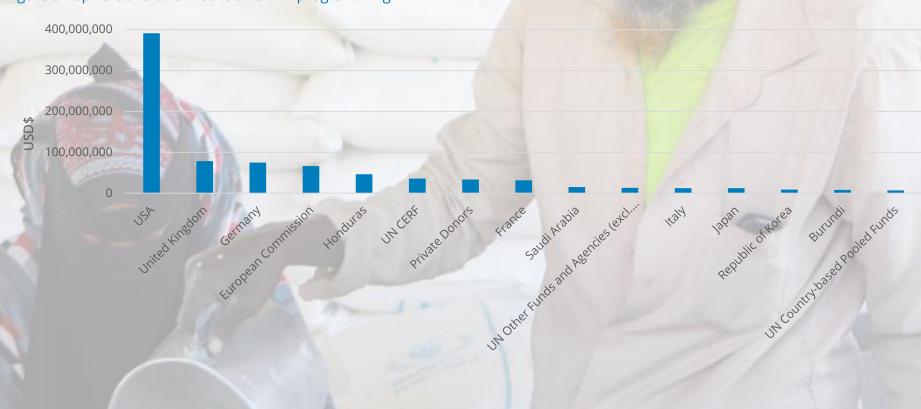
To further reinforce programme performance, WFP upgraded its monitoring and evaluation systems by utilizing digital tools, including the NutriPulse dashboard. Launched in 2023 and further expanded in 2024 with new features—including the integration of IPC data and Demographic and Health Surveys (DHS), the platform brings together internal and external nutrition data into a single, user-friendly interface. WFP also expanded third-party monitoring and embedded process monitoring at key implementation points. Process monitoring tools were also revised to strengthen data collection and facilitate timely course corrections.

CONTRIBUTIONS & EXPENDITURES FOR NUTRITION

In 2024, total contributions reached USD 1.1 billion, a significant increase from the USD 802 million in 2023. This recovery follows the 27 percent decline in funding in 2023.

Of the USD 730 million expended in 2024, USD 467 million was directed toward malnutrition prevention and USD 264 million toward malnutrition management activities. The prioritization of prevention reflects a continued strategic focus on sustainable, long-term solutions to malnutrition, building on the lessons learned from previous years.

Figure 3 Top 15 donors for nutrition & HIV programming



WAY FORWARD

WFP remains committed to delivering highimpact nutrition responses that are equitable, sustainable, and scalable, especially in the face of rising food insecurity, climate shocks, and protracted crises.

Guided by the 2024–2030 Nutrition Strategy, WFP will focus on three strategic priorities:

- Saving lives in fragile and emergency contexts through strengthened prevention and treatment services for wasting, micronutrient deficiencies, and malnutrition linked to disease.
- Improving diets at scale by promoting access to diverse, safe, and nutritious foods through school feeding, social protection systems, food systems programming, and cash-based transfers.
- Strengthening national systems to deliver lasting nutrition outcomes by investing in policies, digital innovations, workforce capacity, and data-driven decision-making.

WFP will leverage the following systems and tools:

- Scaling digital tools like CODA, NutriPulse, MIMI, and other platforms to enhance real-time monitoring, equity tracking, and programme optimization.
- Expanding nutrition-sensitive programming across food systems, education, resilience, and social protection sectors to reach broader populations at risk of malnutrition.

 Deepening partnerships and coinvestment with governments, UN agencies, and donors to strengthen multisectoral planning, coordination, and financing.

As part of its equity commitment, WFP will also continue to advance HIV-sensitive nutrition programming, particularly in regions where food insecurity, displacement, and stigma intersect. This includes finalizing inter-agency guidance, strengthening national HIV-nutrition responses, and supporting people living with HIV through integrated service delivery.

However, the scale and ambition of WFP's nutrition agenda demand sustained and flexible financing. Continued investment will be critical to protect gains, maintain essential services, and reach the most vulnerable with the right interventions at the right time. Innovative funding models, including pooled resources and catalytic financing, will be explored to drive systemic change and achieve long-term impact.

Ending malnutrition is a shared responsibility and a transformative opportunity. WFP's nutrition work will be grounded in local ownership, innovation, and inclusion, ensuring no one is left behind in the global fight against malnutrition. It is essential for advancing human dignity, resilience, and sustainable development. With the right investments, strategic partnerships, and sustained political commitment, WFP will continue to lead and support efforts to ensure that every child can grow, every woman can thrive, and every community can build a healthier, more food-secure future.

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