



*Designing food assistance
to contribute to nutrition
outcomes.*

04 November 2020

Welcome and Introduction



- How it started : collaboration with the Global Nutrition Cluster
- GNC: [Guidance Note on the Use of CVA for Nutrition Outcomes](#)
- Essentially seeking how we can leverage design of food assistance CVA to create synergies with nutrition

House keeping

1. Write down your name, the name of your organisation and your email address in the chat box



4. If questions / comments, you can write them in the chat box. The organisers will compile the questions and comments at the end of webinar.



5. For the speakers, do not respond to the questions in the chat box directly.



6. If there are too many questions, we will respond to them later.



Agenda

1. Welcome and introduction
2. Presentations
 1. Ensuring nutritional adequacy in design of CVA (WFP and USAID)
 2. Combining CVA with nutrition SBC and livelihoods support (FAO)
 3. Nutrition sensitive targeting, specifically CVA to caregivers of SAM children - (Concern)
3. Q&A
4. Conclusion



Ensuring
nutritional
adequacy in
design of CVA
(WFP)





World Food
Programme

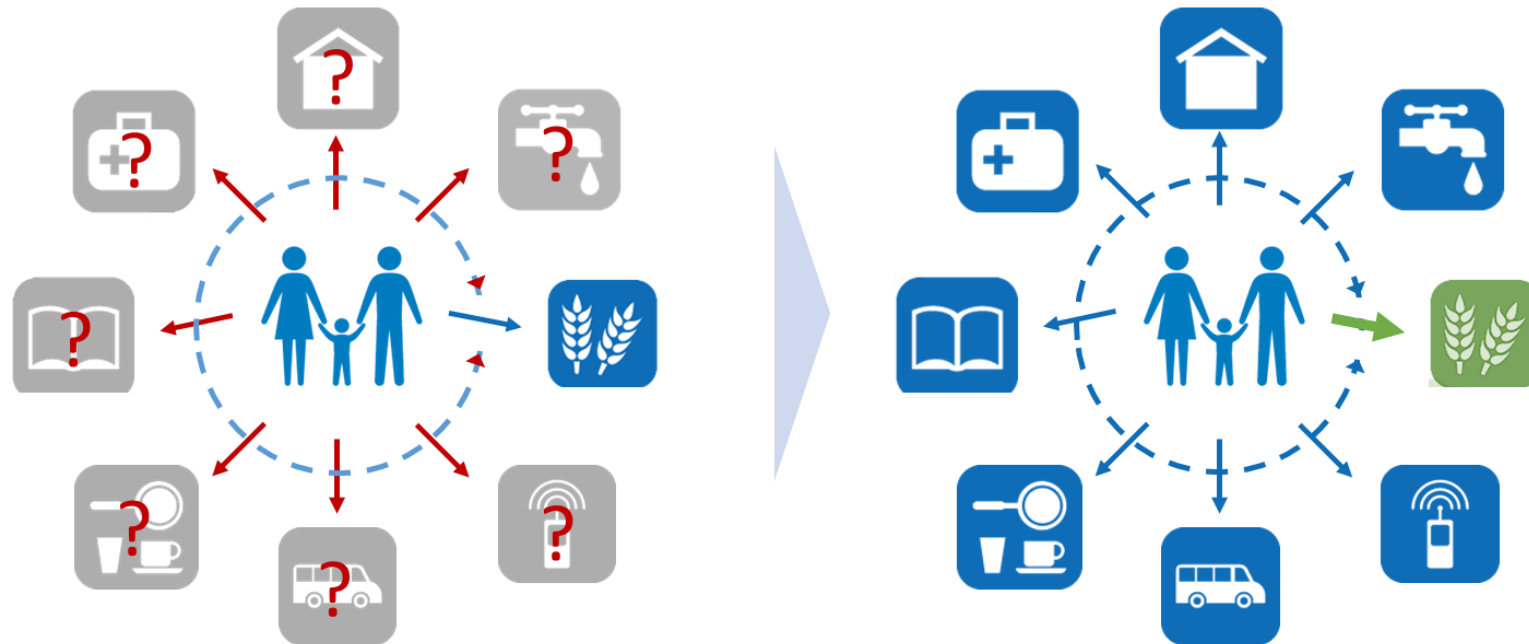
SAVING
LIVES
CHANGING
LIVES



Ensuring nutritional adequacy in design of CVA – use of FNG & MEB assessment tools

Saskia de Pee & Nynne Warring, World Food Programme, Rome, Italy

Essential Needs include the rights of crisis affected persons to food, water, hygiene, shelter, medical care and education.



- Needs are interlinked
- Needs compete for household resources
- Needs of individuals vary in different stages of their lives
- Needs, or gaps thereof, are addressed by multiple actors

Assessments to inform Essential Needs programming

**Understanding the food environment,
what's on offer and is a nutritious diet
affordable?**



Cost and affordability of a nutritious diet

Estimates :

- The cost to meet nutrient needs from locally available foods
- Proportion of households that would be able to afford it



**What are people spending to meet
their food and non-food needs?**



Minimum Expenditure Basket

Estimates :

- Sets a monetary threshold of households' essential food and non-food needs
- Based on food and non-food consumption behaviour of households that can 'just cover essential needs'



Policy and programming to meet essential needs:

Combine assessments to inform holistic programme design to support meeting essential food and non-food needs for human capital development, health and well-being

Consumption behaviour and Nutrient-intake targets

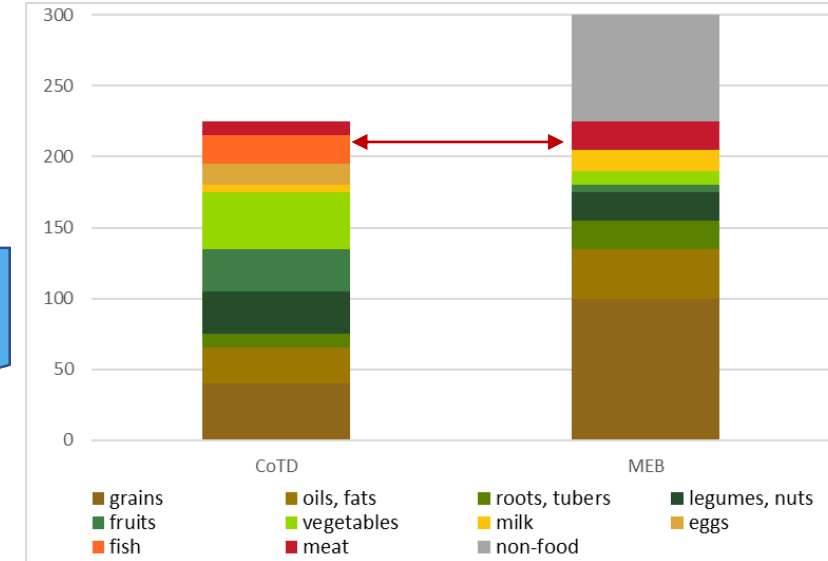
How to use the results?

- MEB reflects “household behaviour” just above essential needs threshold
- CoTD reflects “optimised diet”

Their difference can tell us something about constraints faced by households and where to look further

- ⇒ Are people not purchasing nutritious foods because of **Supply constraints? Low income? Limited knowledge?**
- ⇒ What about other needs people need to cover? Are they crowding out **affordability of food?**
- ⇒ Consider **expenditure distribution** – affordability of MEB
- ⇒ Need for **complementary, targeted, nutrition-specific interventions?**

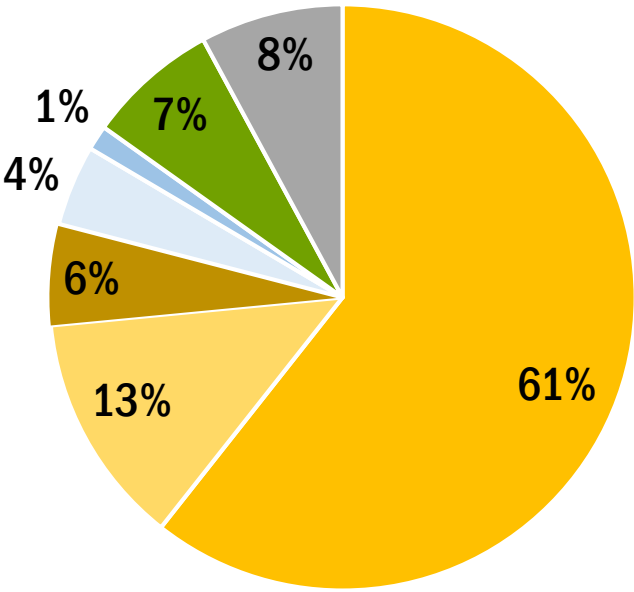
- * Supply constraints?
- * Affordability and HH priorities?
- * Complementary interventions – not only demand injection?



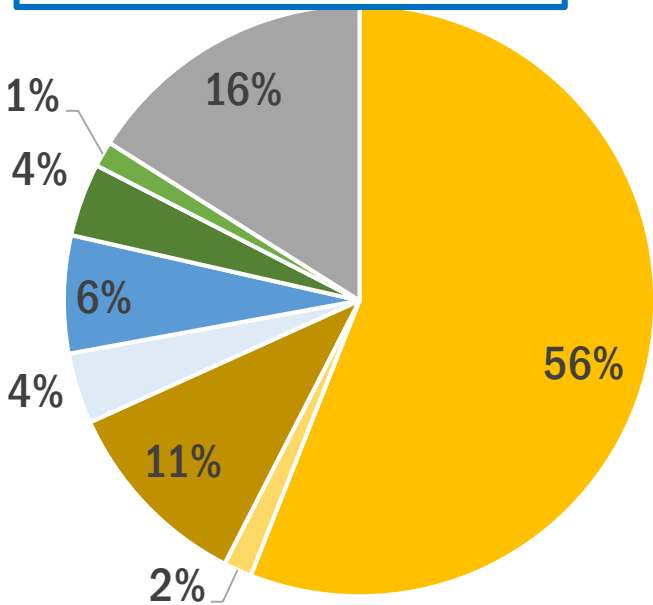
- * SBCC to raise awareness on healthy diets and intra-household sharing?
- * Need for targeted interventions for most nutritionally vulnerable?

**Current production and consumption is not sufficiently diversified;
consumption of pulses, vegetables and fruits should be increased and
cereals decreased**

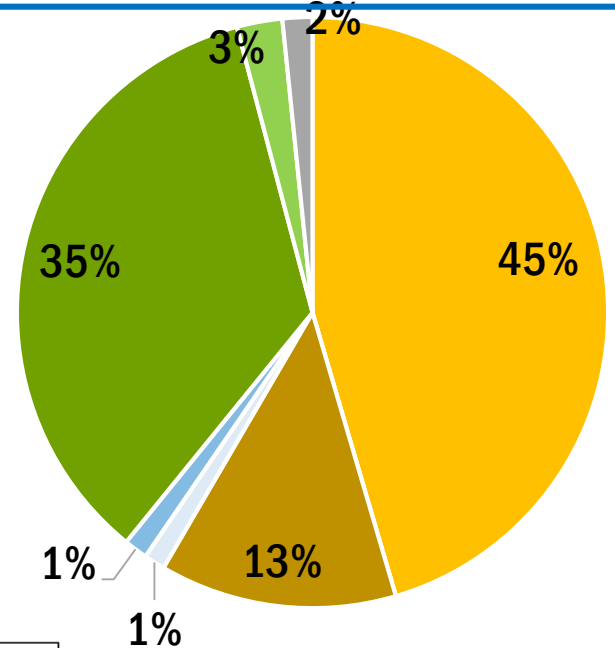
Current consumption in Burkina Faso*



Current national production by food group



Composition of the least expensive diet meeting nutrient needs by food group

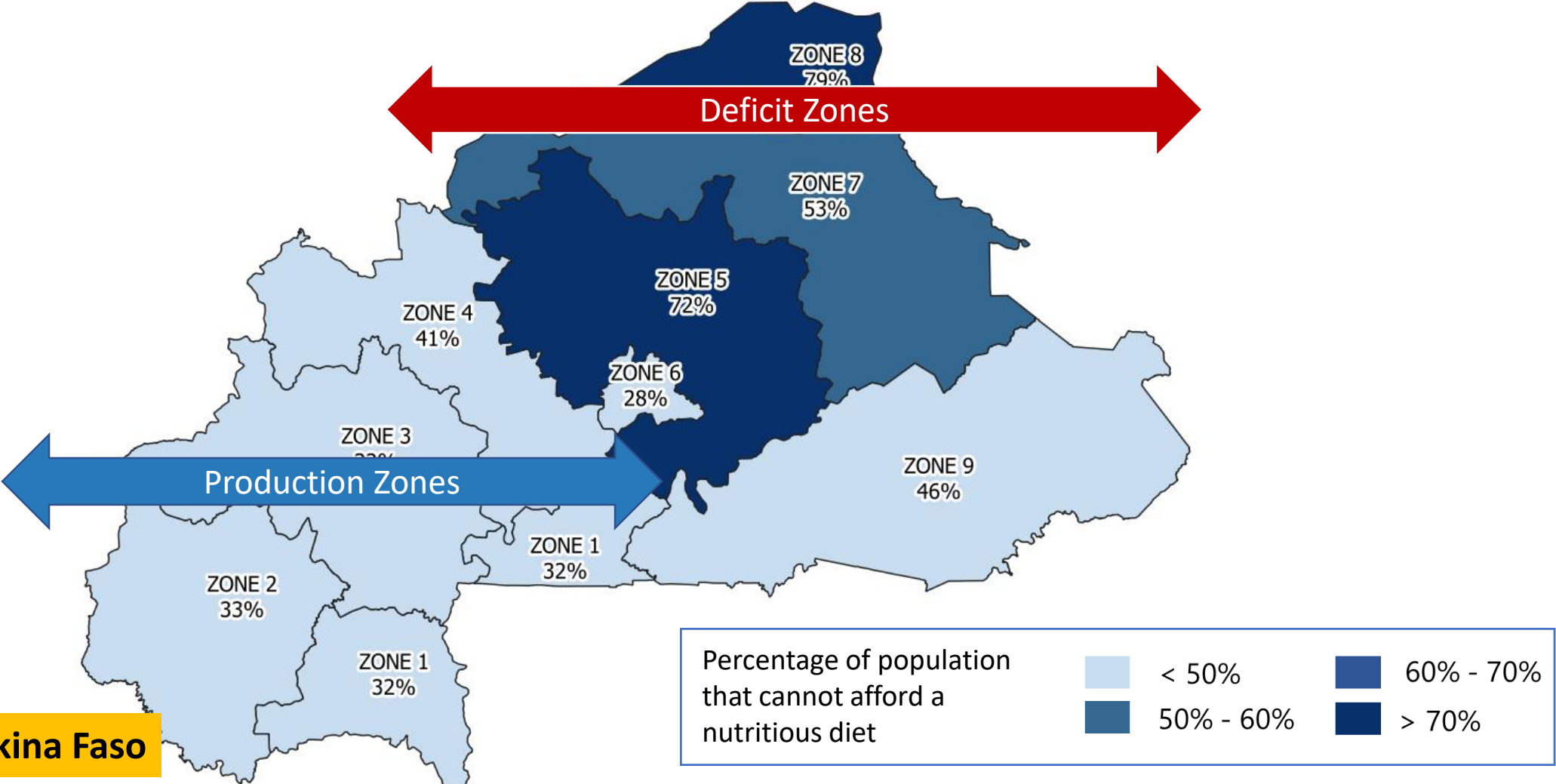


- | | |
|---------------------------|--------------------|
| ■ Cereals | ■ Roots and Tubers |
| ■ Pulses, seeds, and nuts | ■ Meat and Offal |
| ■ Dairy products | ■ Vegetables |
| ■ Fruits | ■ Oils and fats |

Source: FNG Burkina Faso

*Enquête EPA 2019
Légumes = légumes + fruits

Nutritious diets are not affordable to the majority
in food-deficit dry lands of Burkina Faso,
Implications for dietary diversity & CVA value setting



Opportunities and considerations for CVA & complementary programming

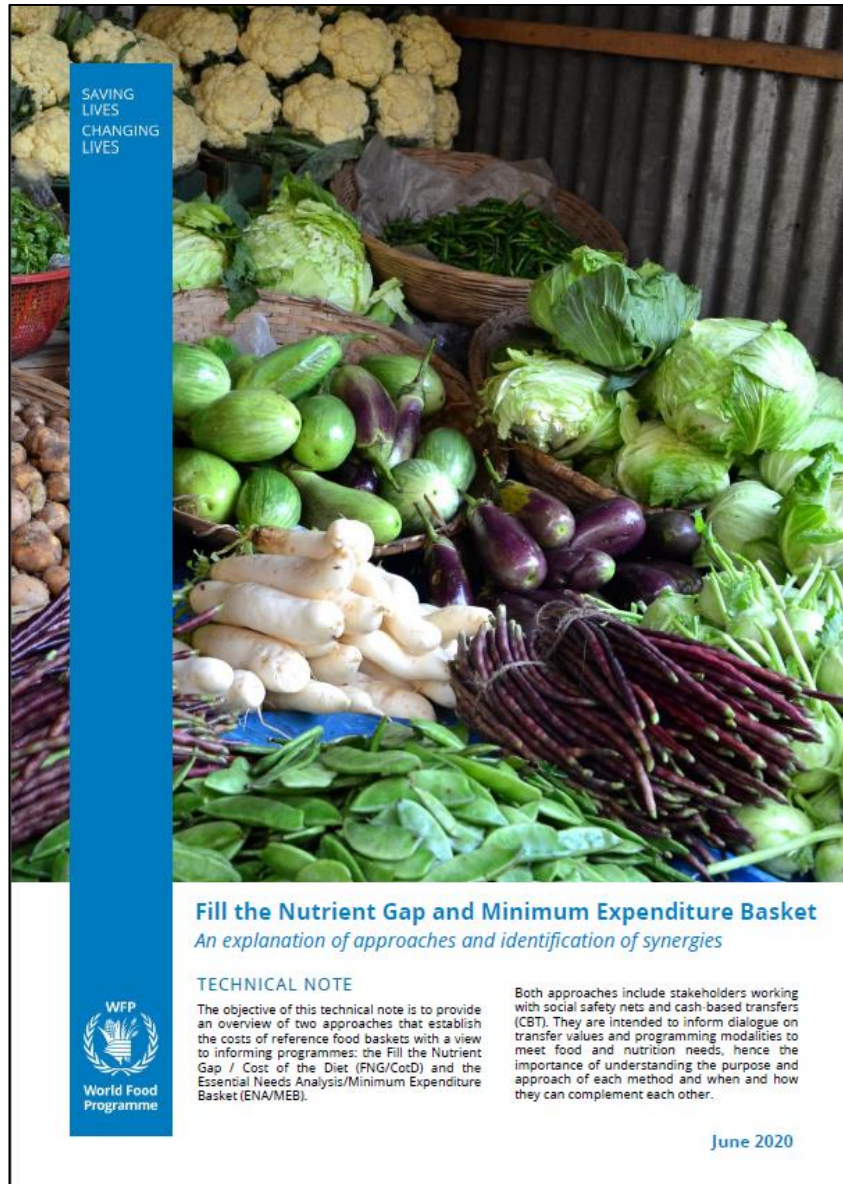
From analysis to programming

- Understanding food and nutrition needs, as part of a broader set of needs
- Adapt a systems approach to food and nutrition, in a cost-efficient manner
- Consider how/which needs are already met and how HH cope and prioritise
- Examine if both demand- and supply side interventions are needed
- Explore modalities, complementary programming and other features to inform transfer choice and value setting

Minimum Expenditure baskets and Cost of the Diet provide complementary analysis to inform programming and advocacy

Where MEB and CotD is done in parallel, it allows us to explore food demand behavior, supply constraints and consumption choices

Online resources:



Fill the Nutrient Gap and Minimum Expenditure Baskets

An explanation of approaches and identification of synergies

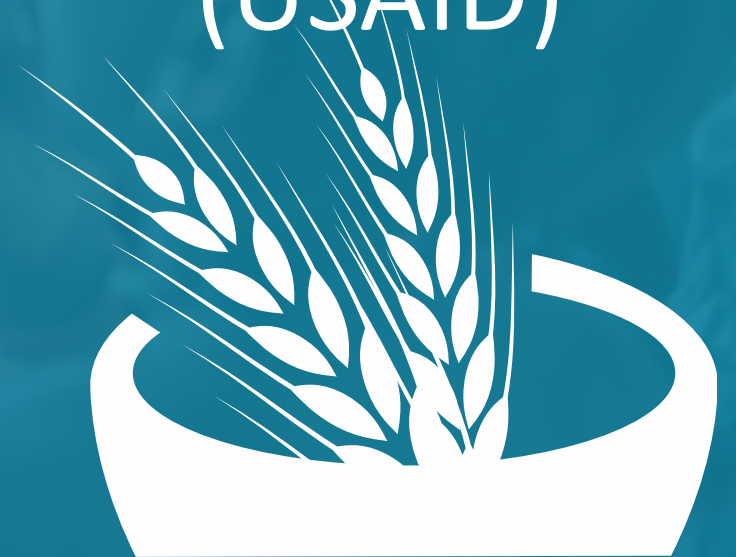
<https://www.wfp.org/fillthenutrientgap>

MEB online course

https://wfp.eu.crossknowledge.com/candidat/product_sheet.php?trainingcontent_id=117234&locale=en-US



Ensuring
nutritional
adequacy in
design of CVA
(USAID)





USAID
FROM THE AMERICAN PEOPLE

USAID'S Emergency Food Assistance Programming

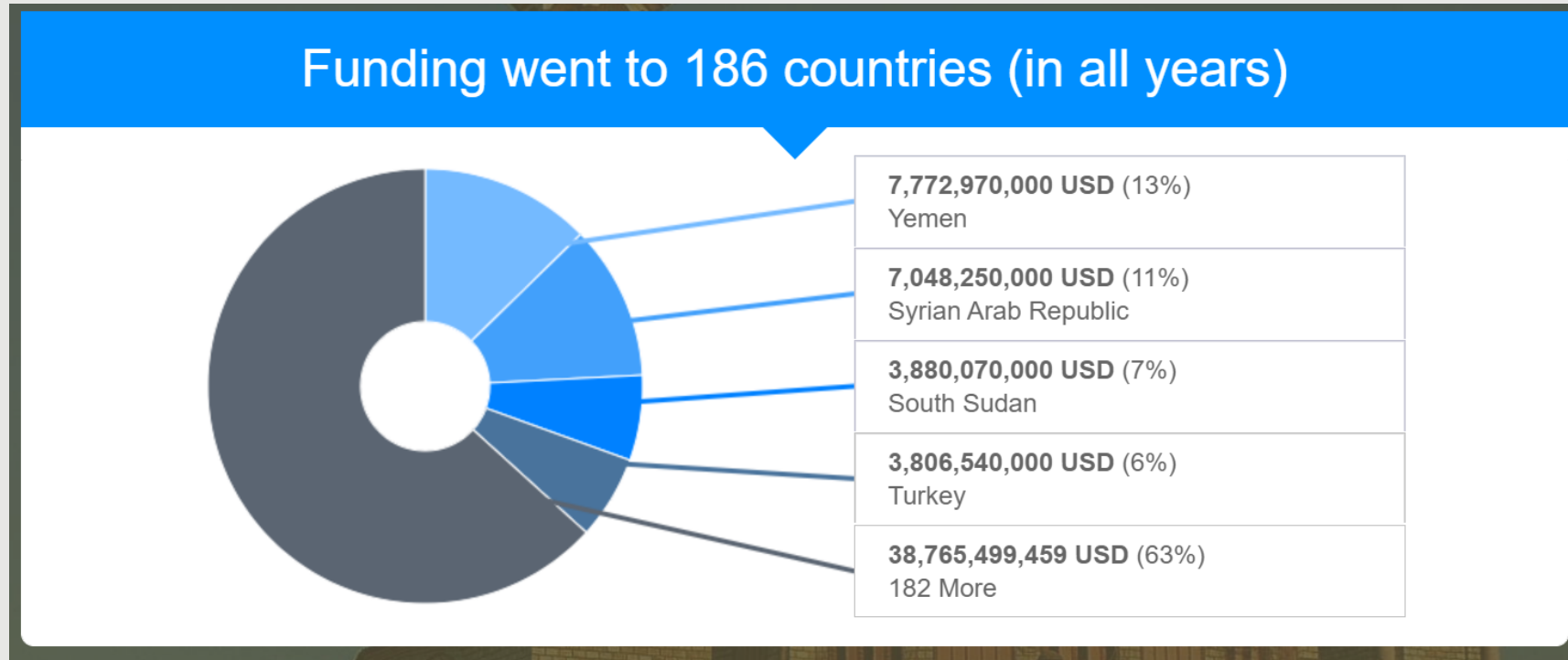
Nutritional Considerations &
Opportunities

Maggie Holmesheoran
Nutrition Advisor, USAID-BHA

Ration Baskets and Nutritional Support in Protracted Crises



Most emergency funding goes to complex protracted crises...



Source: d-portal.org

... and too food security as an emergency sector (ration baskets fit here).

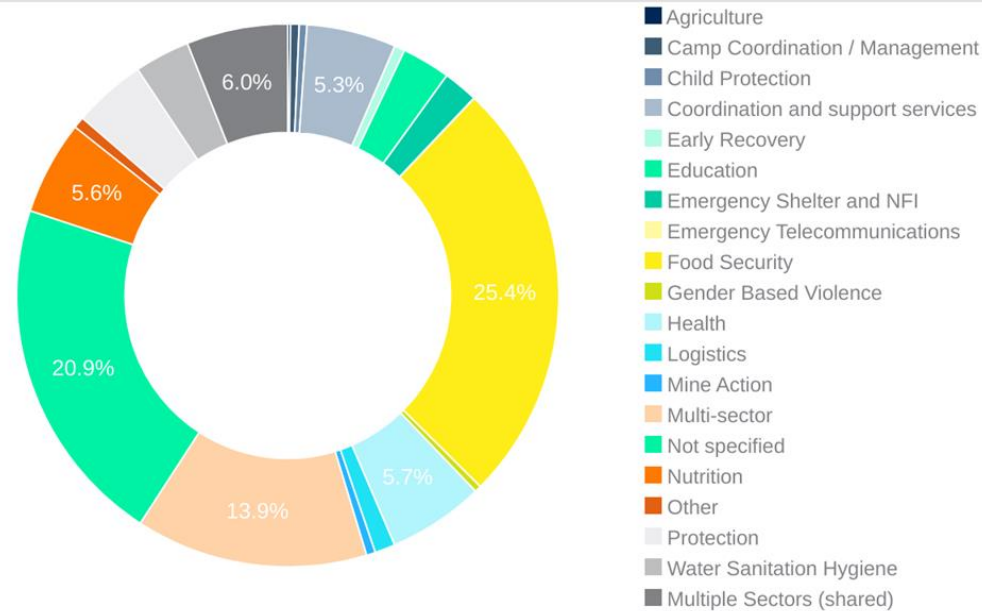
2019

<https://fts.unocha.org/global-funding/overview/2019>

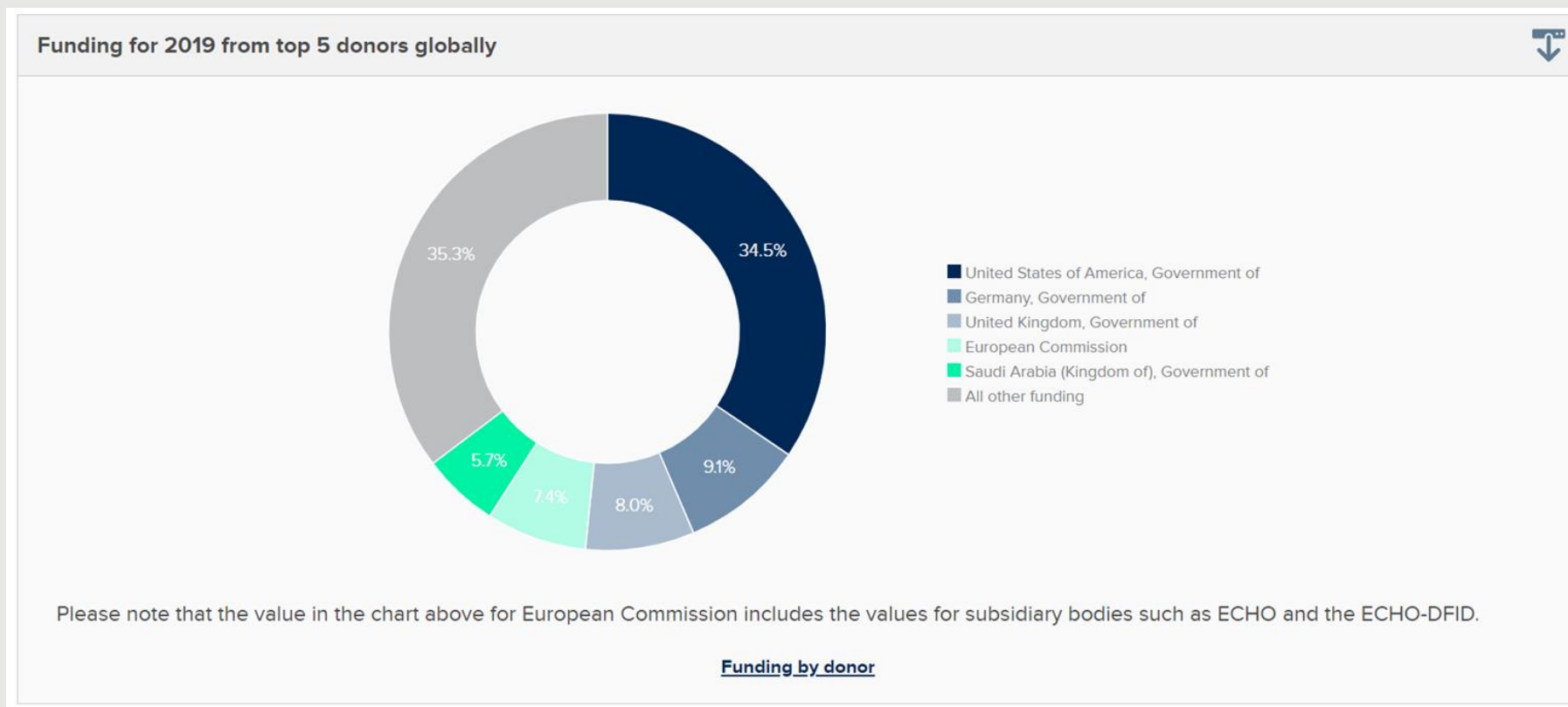


Total reported funding by sector

19-Oct-2020



USAID is the largest government donor to emergencies in the world.



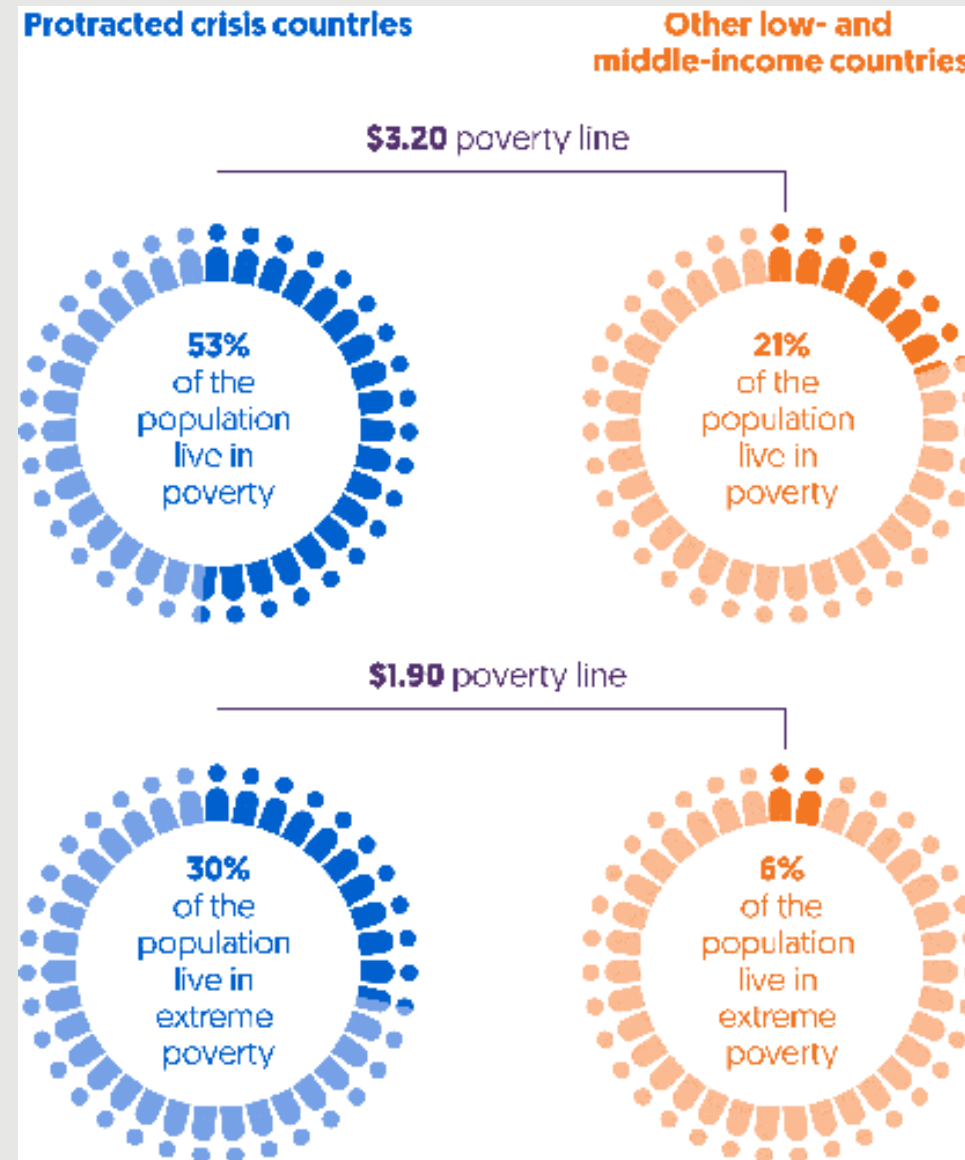
Source: UN-OCHA
FTS

Protracted crises are becoming increasingly common...

“16% of the world’s population is now living in countries experiencing protracted humanitarian crisis. The number of countries experiencing protracted crisis has more than doubled over the last 15 years, from 13 in 2005 to 31 in 2019. These countries are home to over half of the world’s people living in extreme poverty.”

- Global Humanitarian Assistance Report 2020

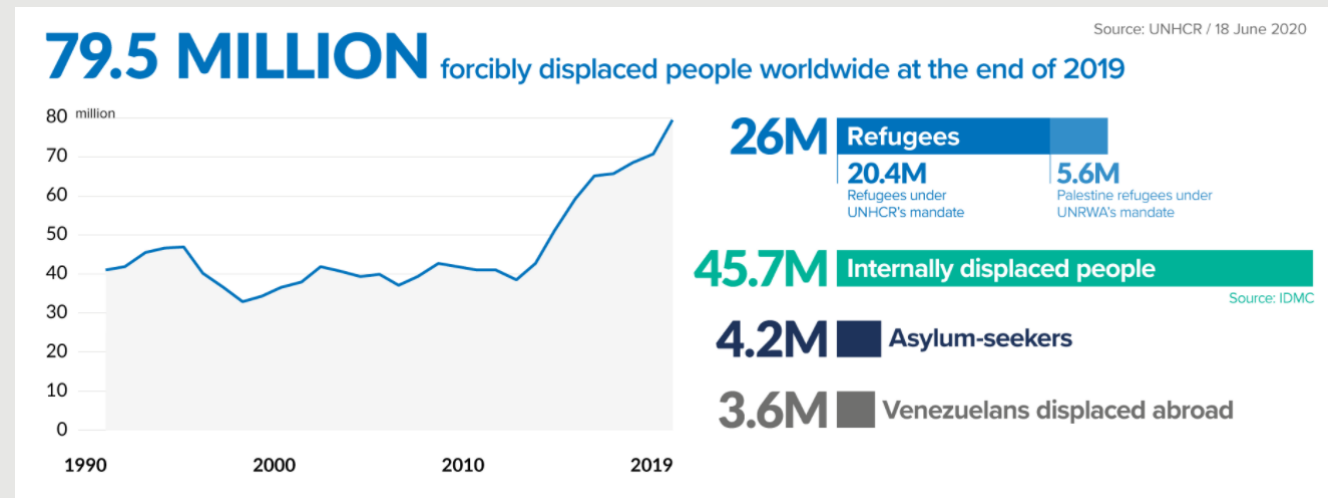
Poverty rates are higher in countries with protracted crises.



Source: Global Humanitarian Assistance Report
2020

So...

Food security funding in protracted crises represents a massive investment, both for the global humanitarian community and for US Government resources, as well as an opportunity to affect what uniquely vulnerable populations are able to eat. The potential for impact is HUGE.



SPHERE and Nutrition



- The Sphere standards for food assistance are
 - 2,100 kcal per person per day*
 - 17% of energy from fat
 - 10–12% of energy from protein
 - Minimum requirements for 19 micronutrients**
 - Dietary diversity: measured through indicators such as:
 - Food Consumption Score
 - Household Dietary Diversity Score
- Sphere introduced the requirements for micronutrients and dietary diversity in 2018.

**Should be adjusted to local population if data are available.*

***Source: Reference Nutrient Intakes are from FAO/WHO (2004), except for copper, which is from WHO (1996).*

Ration Basket Inquiry Aims



- To understand the degree to which current food baskets achieve nutritional adequacy and the challenges countries face or are likely to face in ensuring nutritional adequacy.
- Analyze food baskets in three protracted crisis contexts (South Sudan, Yemen, and Mali) to:
 - assess how they compare with the Sphere standards
 - understand the factors stakeholders considered in designing the food baskets.
- We chose protracted crises (lasting more than 5 years) because there is:
 - greater potential for nutritional deficiency if the basket does not meet nutrition standards over time
 - greater latitude to improve basket nutritional adequacy over longer response periods.

Context

South Sudan	Yemen	Mali
<ul style="list-style-type: none">• Conflict for >20 years• Basket designed to meet 100% of food needs• Delivered in-kind• Analysis includes 2 baskets. Both have:<ul style="list-style-type: none">• Sorghum• Mung beans• Veg oil• Salt• One has fortified corn-soy blend plus (CSB+); one does not.	<ul style="list-style-type: none">• Crisis since 2015• Basket designed to meet 80% of food needs• Delivered in-kind + cash/voucher• Analysis includes 2 baskets. Both have:<ul style="list-style-type: none">• Wheat• Pulse (kidney beans or lentils)• Veg oil• Salt• Sugar	<ul style="list-style-type: none">• Crisis since 2012• Basket designed to meet 50–75% of food needs• Delivered through cash• Analysis includes 4 baskets. All have:<ul style="list-style-type: none">• One staple (rice, millet, or semolina)• Cowpeas• Oil• Salt

All Baskets Met or Almost Met Kcal, Protein, and Fat Requirements

Percentage of nutrient requirements provided by the baskets (per person per day). Target: 2,100 kcal, 10–12% kcal from protein, 17% kcal from fat

	SS1	SS2	Ye1	Ye2	Mal1	Mal2	Mal3	Mal4
Coverage target	100	100	80	80	50	50	75	75
Kcal	107	153	80	80	50	50	76	75
% kcal from protein	9	12	10	10	10	10	13	13
% kcal from fat	19	20	22	22	23	23	22	17

Baskets Met 29%–100% of Mineral Requirements

Percentage of mineral requirements provided by the baskets (per person per day)

	SS 1	SS2	Ye1	Ye2	Mal1	Mal2	Mal3	Mal4
% met	57	100	43	43	29	57	57	43
Coverage target	100	100	80	80	50	50	75	75
Calcium	13	134	11	7	9	9	15	15
Copper	144	263	79	61	70	70	212	113
Iodine	145	233	145	145	0	145	0	0
Iron	57	142	38	37	22	43	60	36
Magnesium	346	316	31	27	92	92	256	122
Selenium	236	390	389	397	23	23	362	374
Zinc	69	251	103	110	34	114	86	43

Baskets Met 17%–92% of Vitamin Requirements

Percentage of vitamin requirements provided the baskets (per person per day)

	SS1	SS2	Ye1	Ye2	Mal1	Mal2	Mal3	Mal4
% met	42	92	50	50	33	58	42	17
A	50	356	119	119	1	99	1	1
B1	154	305	180	198	88	161	182	108
B2 (Riboflavin)	35	228	94	94	28	21	39	31
B3 (Niacin)	196	421	114	116	34	40	136	40
B5	122	245	35	48	80	70	109	59
B6	160	533	26	32	49	140	116	40
B9	121	249	209	219	178	255	207	19417
B12	0	276	113	113	0	96	0	0
C	6	743	5	5	4	3	4	4
D	37	336	47	47	0	31	0	0
E	34	396	5	7	55	3	59	57
K	76	69	18	5	15	7	19	16

Ration Basket Orientation; Regardless of modality, similar diversity challenges

HDDS Categories:

- Cereals
- ~~Roots/Tubers~~
- ~~Vegetables~~
- ~~Fruits~~
- ~~Meat, poultry, offal~~
- ~~Fish and seafood~~
- Pulses, Legumes, Nuts
- ~~Milk and Milk Products~~
- Oils/Fats
- Sugars/ Honey
- Miscellaneous

South Sudan Basket Contents:

Sorghum Flour + Mung Beans + Oil + Salt (+ CSB+ sometimes...) = **HDDS 4**

Yemen Basket Contents:

Wheat Flour + Kidney Beans
OR Lentils + Oil + Salt + Sugar
= **HDDS 5**

Mali Basket Contents:

Rice OR Millet Flour OR
Sorghum Flour + Cowpeas +
Palm Oil + Salt = **HDDS 4**

What do we mean when we say % coverage?

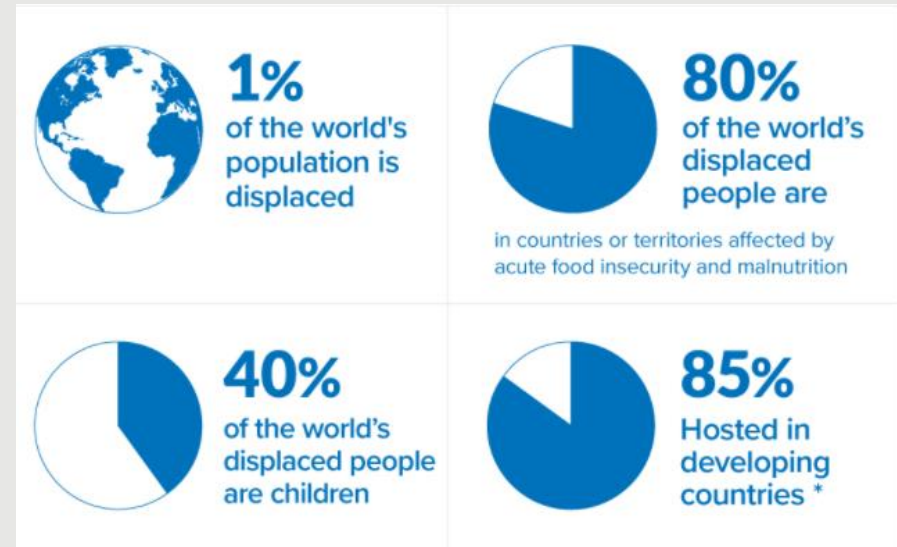
	South Sudan				Yemen				Mali							
	Ration 1		Ration 2		Ration 1		Ration 2		Ration 1		Ration 2		Ration 3		Ration 4	
	KCAL	MN	KCAL	MN	KCAL	MN	KCAL	MN	KCAL	MN	KCAL	MN	KCAL	MN	KCAL	MN
Target % coverage of HH food gap	100%	67%	100%	98%	80%	63%	80%	62%	50%	37%	50%	58%	75%	57%	75%	44%

Costing can't happen without price data....

Number of Foods Reported in WFP Economic Explorer	Somalia	Sudan	Mali	South Sudan	DRC	Nigeria	Yemen	Syria
<u>HDDS (Minimum Score = 6/12)</u>								
Cereals	8	7	12	17	7	22	5	13
Fish and seafood	0	0	1	2	3	1	0	2
Root and tubers	0	0	0	3	6	7	1	1
Pulses/legumes/nuts	0	0	2	7	3	11	4	8
Vegetables	0	0	2	1	0	3	2	12
Milk and milk products	2	0	1	1	0	1	0	5
Fruits	0	0	0	0	1	3	0	3
Oils/Fats	1	0	1	2	2	3	1	2
Meat/Poultry/Offal	2	0	7	6	4	2	3	4
Sugar/Honey	1	0	1	1	1	1	1	1
Eggs	0	0	1	0	0	1	1	1
Miscellaneous	0	0	2	1	1	1	1	5

Crisis timelines provide opportunities for flexibility and rework of assumptions...

- Yemen: 10 years
- Syria: 9 years
- South Sudan: 24 years
- Somalia: 19 years
- NE Nigeria: 7 years

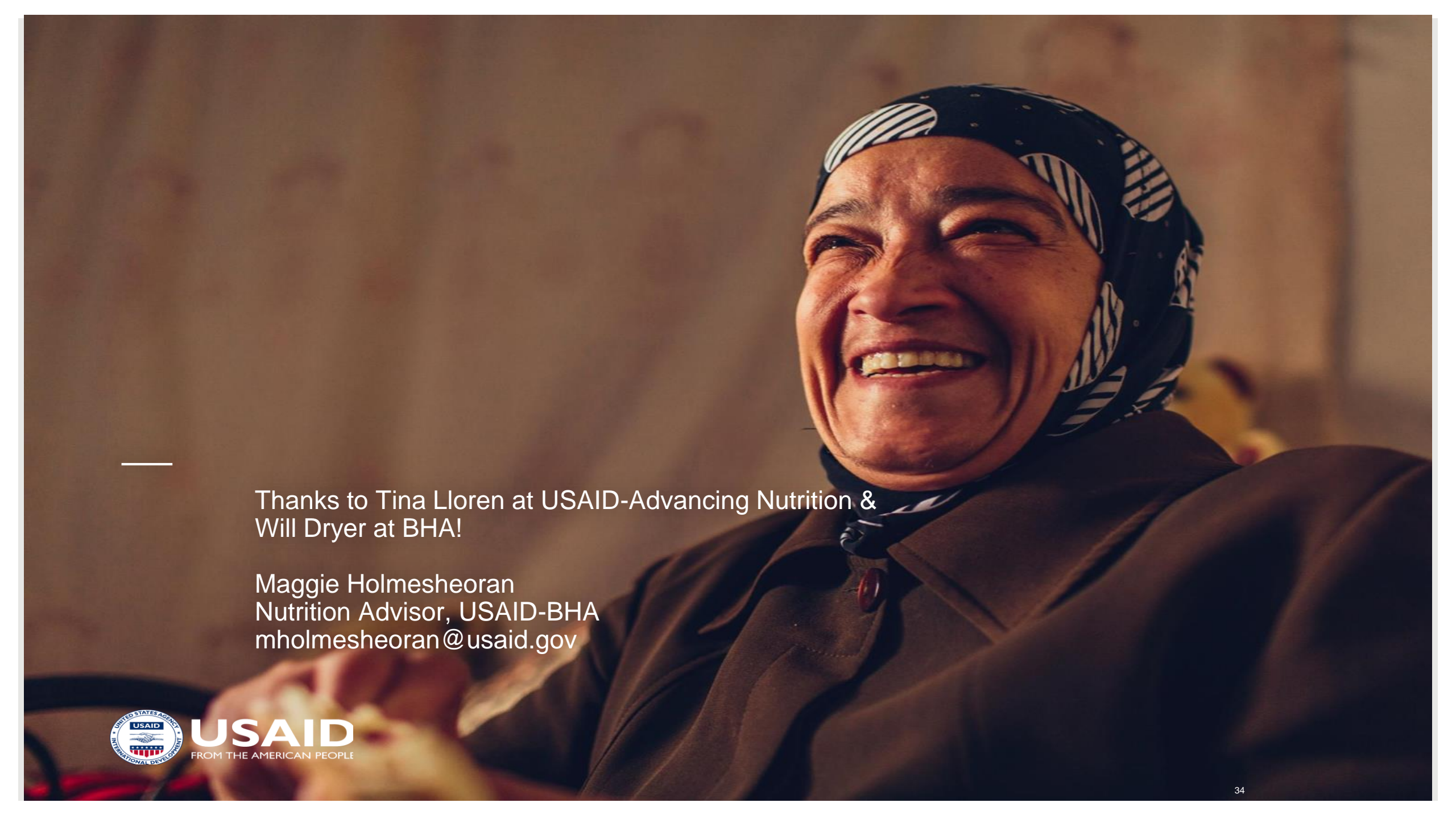


Source: UNHCR

But do we actually innovate/rework?
What are the nutrient deficiency
timescales and effects?

Recommendations/ Food For Thought:

1. How do we make sure baskets are calibrated to promote participant success?
2. What processes need to be developed to move clusters towards compliance with new SPHERE guidelines?
3. Often-missed food categories: how can we adapt cash/voucher processes to manage these? (RE frequency of purchase and perishability)
4. Need for guidance on:
 - a. Basket development: Benefits of starting with a full estimated ration and moving backwards to ensure SPHERE compliance
 - b. Frequency of updates: How often should a cluster re-test the basket assumptions?
 - c. Systematization and documentation of process: What stakeholders should be involved? What calculation methods used? What data inputs are needed?



Thanks to Tina Lloren at USAID-Advancing Nutrition &
Will Dryer at BHA!

Maggie Holmesheoran
Nutrition Advisor, USAID-BHA
mholmesheoran@usaid.gov



USAID
FROM THE AMERICAN PEOPLE



Combining CVA
with nutrition
SBC and
livelihoods
support
(FAO)





Food and Agriculture Organization
of the United Nations

NUTRITION EDUCATION AND COMMUNICATION IN CASH ASSISTANCE

FAO SOMALIA

Emma Apo Ouma

Nutrition Officer, FAO Somalia



NUTRITION SENSITIVE APPROACHES: OBJECTIVES

- Contribute to positive nutrition outcomes among the most vulnerable
- To improve dietary habits and food choices rural households in Somalia using locally available foods
- Sensitize the beneficiaries on the importance and utilization of the Ag, Livestock and fisheries packages
- Contribute to the Nutrition Cluster's objective of providing preventive services



TARGETING

- Based on Food Security Status IPC 3 and 4
- Households with complete or partial loss of livelihoods
- Cash modalities (based on livelihood zone)
- **Nutrition sensitive:**
 - ✓ **Areas with high rates of GAM through coordinating with the Nutrition Cluster**
 - ✓ **Female headed households**
 - ✓ **Households with more than 2 children less than 5 years**
 - ✓ **Households with PGLW, Elderly**
 - ✓ **Rural IDPs**
 - ✓ **Gender inclusive (30%, consideration for time)**



CASH PLUS AGRICULTURE PACKAGE- AGROPASTORAL

Package	Items
Seed (short cycle)	Production of micro-nutrient rich seed package maize, sorghum, cowpea, water melon, amaranths, okra, Spinach, tomato, onion, carrot, capsicum.
Other Inputs	Fertilizer, Tools, Tractor hours, Irrigation hours, storage bags
Training	Good Agricultural Practices Nutrition Education: Nutrition, utilization of the seed package, cooking demonstrations, preservation, value addition





CASH PLUS LIVESTOCK PACKAGE_ PASTPORAL

Package	Items
Supplementary blocks	Improved health, reduction of treatment expenses animals, and an improvement in milk production.
Milk Cans	If correctly handled, facilitate the hygienic storage of milk, prevent contamination and the spread of illnesses
Treatment	10 sheep and goats per HH: Deworming And other present diseases
Training	Livestock management Nutrition Education: Nutrition, milk and meat safety and hygiene at the household level





CASH PLUS FISHERIES_ COASTAL

Livestock Inputs	Package
Equipment	<u>Package 1</u> : Boat package <u>Package 2</u> : Community processing and drying <u>Package 3</u> : Household processing and cooking kit
Training	Capture package use and fishing techniques Sea Safety measures; life jackets, must haves during fishing, Fish handling at sea Nutrition Education: Fish handling at the household, cooking demonstration, nutrition benefits of fish



NUTRITION EDUCATION AND COMMUNICATION



NUTRITION EDUCATION AND COMMUNICATION TOOLS

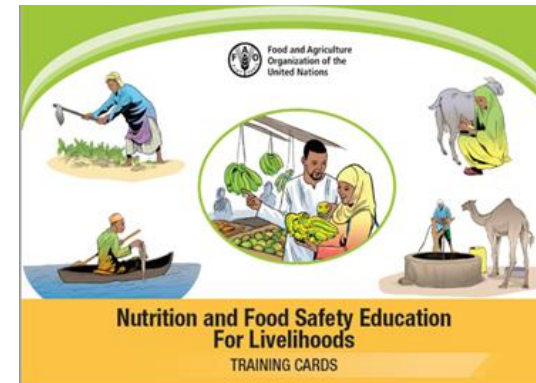
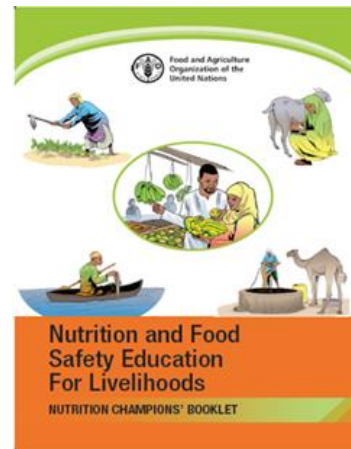
Facilitator's Guide

Community Champions

Community

Counselling Cards

Seasonal Calendar

[illegible]



NUTRITION EDUCATION MODULES

Module 1: Feeding Your Family

Module 2: Food Safety and Hygiene

Module 3: Water Sanitation and Hygiene



MONITORING AND EVALUATION

1. Impact Study by a TPM on the Impact of Nutrition Education (CFW)
2. Inclusion Dietary Diversity of Nutrition Indicators:
 - Minimum Acceptable diet (6-23 months)
 - Minimum Dietary Diversity for Women
 - On farm diversity(Agriculture)
 - Household Dietary Diversity



WHAT HAS WORKED FOR FAO SOMALIA

Organizational Level

- Dedicated Budget and Staff
- Buy in from FAO Somalia Staff, Partners and Government
- Sensitization of FAO staff on the importance of SBC
- Continuous improvement of the delivery: Impact assessment, nutrition indicators, targeting,

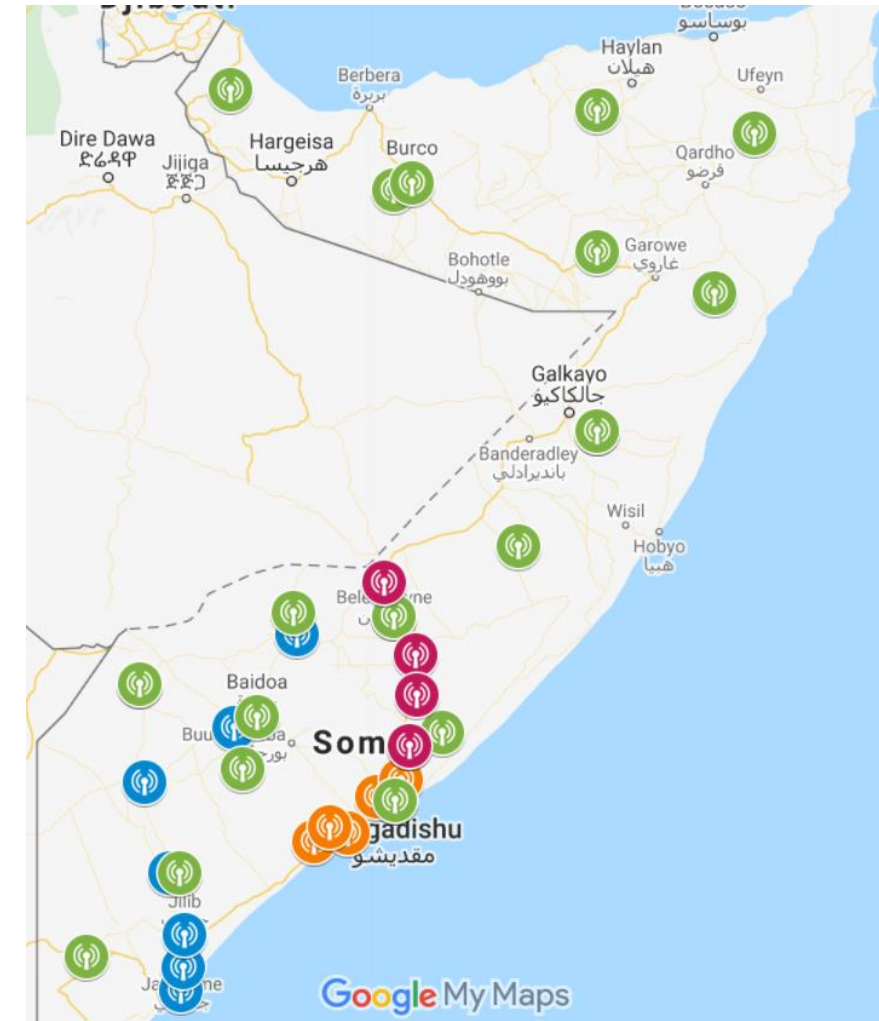
Community Level

- Tailor made nutrition sensitive activities and messages
- Life Cycle Approach
- Nutrition Champions at community level (male and female)
- Slow introduction of cooking demonstrations



UPCOMING SBC ACTIVITIES

- Radio Show on Nutrition and Food Safety (adaptation to radio programming during COVID)
- National Campaign to promote fish consumption in Somalia
- YouTube Video on DD during COVID done with Nutrition Cluster and Innovation Lab





CHALLENGES AND RECOMMENDATIONS

Challenges:

- Minimum expenditure basket: Cereal, Oil, Salt, Pulse
- Nutrition focal points of NGOs were often male
- Trade offs between culture and best practices e.g. seed selection, planning of community level trainings



CHALLENGES AND RECOMMENDATIONS

Recommendations:

- Promotion of a Nutrition Sensitive Minimum expenditure basket: CWG and Nutrition Cluster
- Build an evidence base for cash assistance for nutrition: <http://www.fao.org/in-action/kore/good-practices/good-practices-details/en/c/1297377>
- Budget allocations for Nutrition actions within cash assistance
- Adoption of context specific PLUS (support livelihoods and promote utilization)
- Design of short and long term nutrition targeted cash assistance



Nutrition
sensitive
targeting
(Concern)



Impact of saving groups on nutrition treatment outcomes



4th November 2020/ gFSC Cash and Market WG

By Regine Kopplow, Sen. Adviser FNS

Rationale

- Burundi high burden of child malnutrition and communicable diseases
- Kirundo province*:
 - 70% of population living in poverty (World Bank, 2016)
 - Lowest nurse-to-population ratio
 - Highest number of malaria-related deaths
 - Acute malnutrition 8%
 - Chronic malnutrition 60%
 - Under-five mortality rate in northern region highest in country
- Good results from various health & nutrition projects using different approaches
- Uncertainty whether nutritional gains can be sustained

Project & Study Outline

**Concern's Health & Nutrition Project – Busoni, Kirundo Province, Burundi –
UNICEF funded – Oct 2014 to Aug 2017**

Treatment of malnutrition

**Treatment of
childhood
illnesses**

Improved food & nutrition security

**Severe acute
cases, referral
to in/
outpatient
care (SC/ OTP)**

**Moderate
cases →
Positive
Deviance (PD)/
Hearth session**

**Integrated
Community
Case
Management
(iCCM)**

**Infant &
maternal
health &
nutrition
practices**

**Home
gardening**

**Saving &
Internal
Lending
Community
(SILC)**

Control group

Intervention group

Approaches implemented

Stabilisation Centre (SC) & Outpatient Therapeutic Programme (OTP)	1 hospital, 9 health centres	Treatment of severe acute malnutrition (SAM) at government health facilities: complicated cases inpatient (SC); uncomplicated cases outpatient (OTP)
Positive Deviant (PD)/Hearth	164 lead mothers	Treatment of moderate malnourished children using local practices and foods; lead mother facilitates mother group meeting over 12 days
Integrated Community Case Management (iCCM)	192 CHVs	Community health workers are trained & equipped to treat malaria, diarrhoea and pneumonia; referral to health facilities of children with danger signs
Maternal & child health & nutrition behaviour change	2442 CGV, 164 lead mothers	Care Groups and PD/ Hearth sessions; using government endorsed materials (training curricula, counselling cards); theory & practice
Home Gardening	41 gov. agr. extension workers	Small plot beside the house; vegetables mainly for home consumption; design - keyhole garden; in collaboration with Ministry of Agriculture & Livestock
Saving & Informal Lending Community (SILC)	720 PD mothers	~18 members meet weekly, access to savings & loans, training in financial literacy; to meet basic needs and for investing in assets and livelihood opportunities



Community Health Worker Metabile Manirkiza (Chibitoke Province) with his home garden by C. Wahl, 2019



Hearth session (Chibitoke Province/ Burundi) by R. Kopplow, 2017

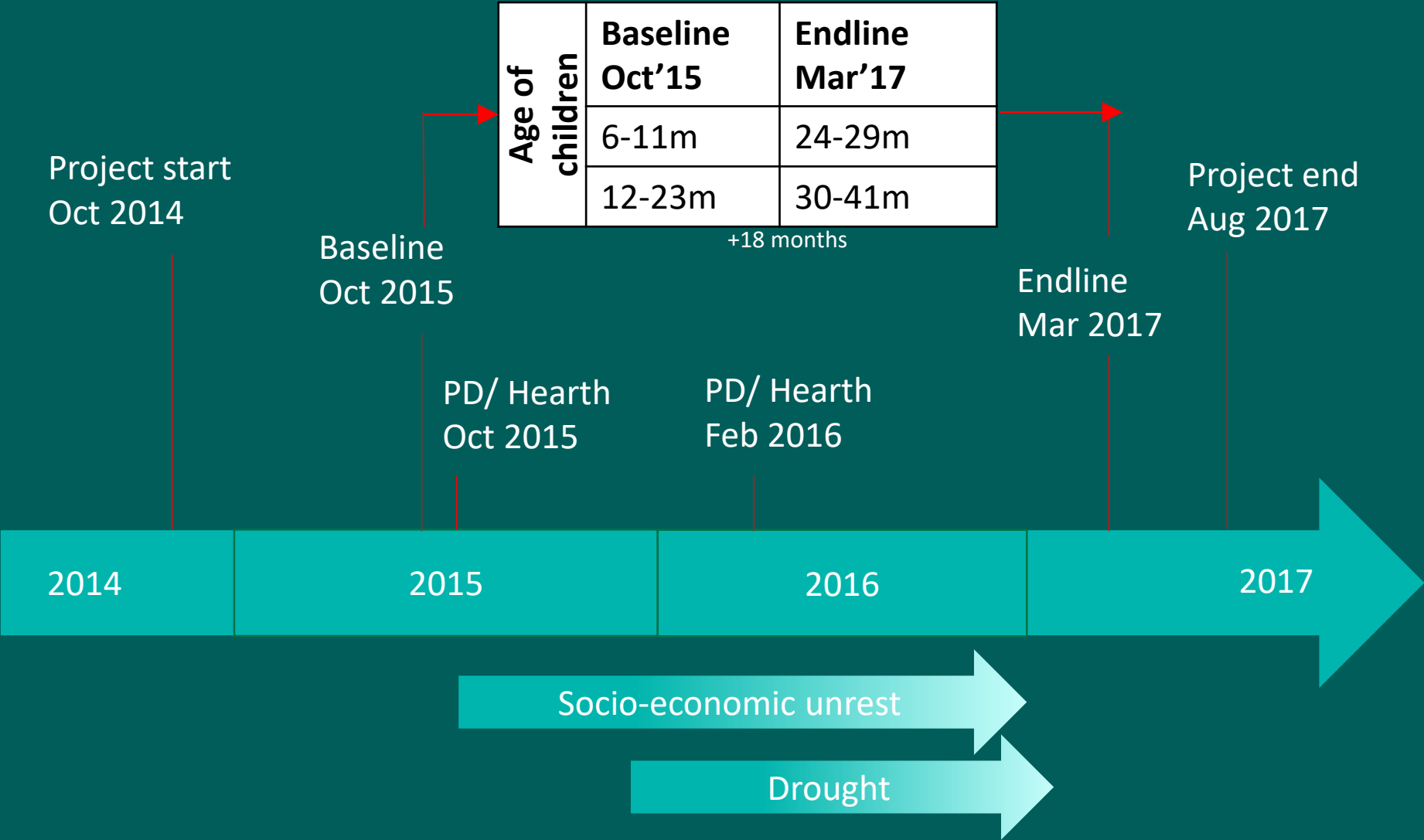


SILC members meeting, Chibitoke Province/ Burundi, by R. Kopplow, 2017

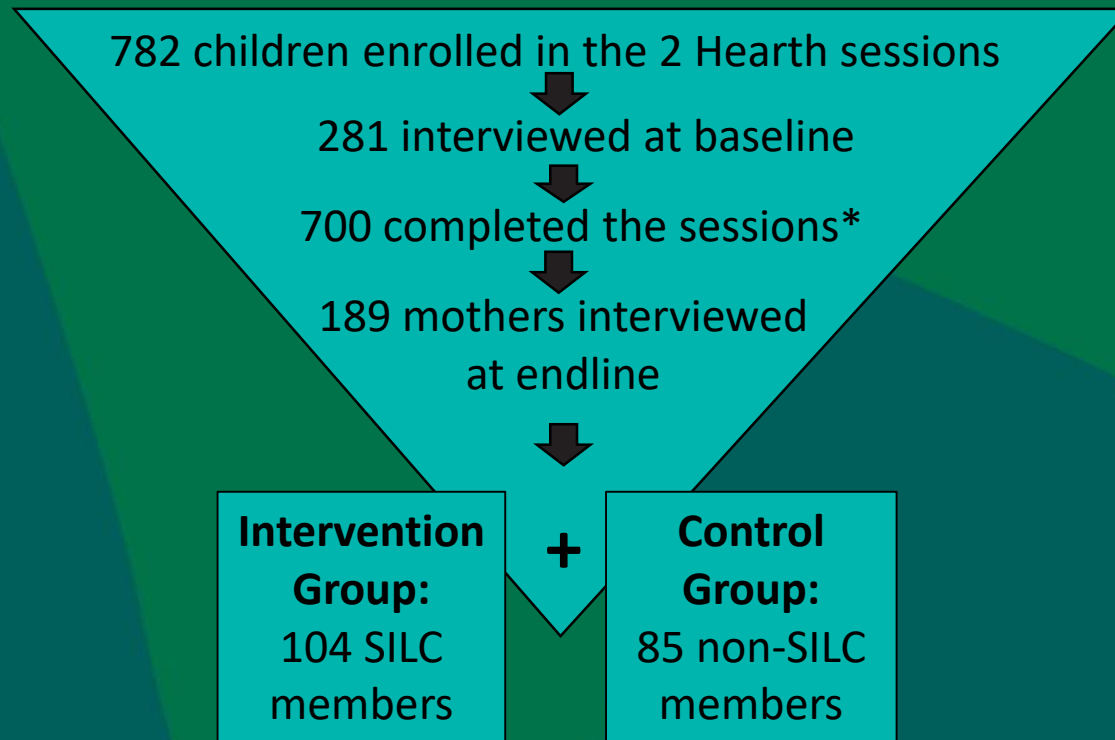


Consultation room at a Community Health Worker's house providing iCCM services, by R. Kopplow, 2017

Timeline



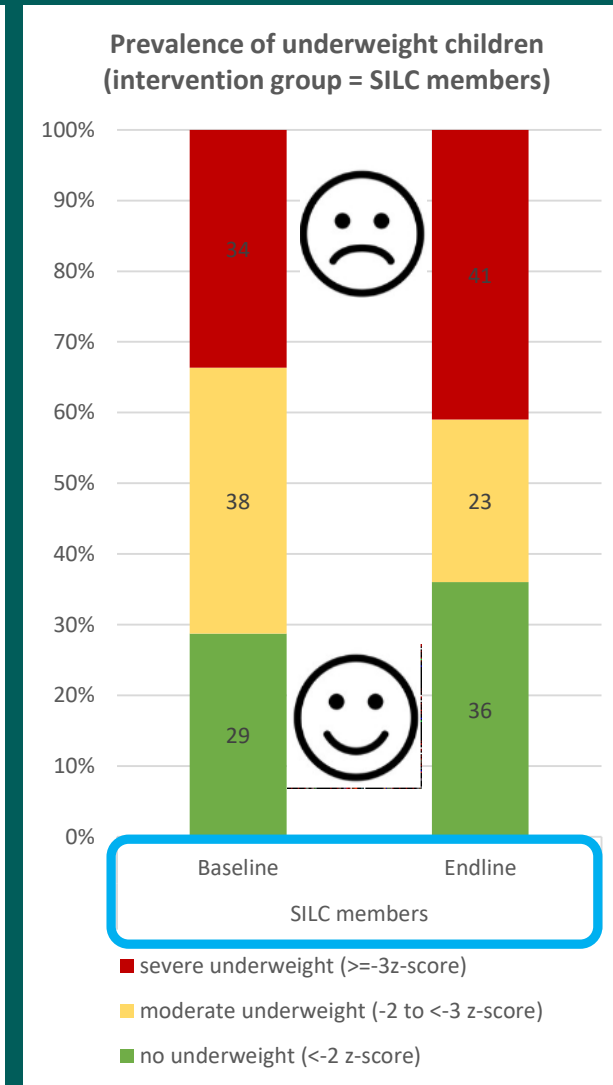
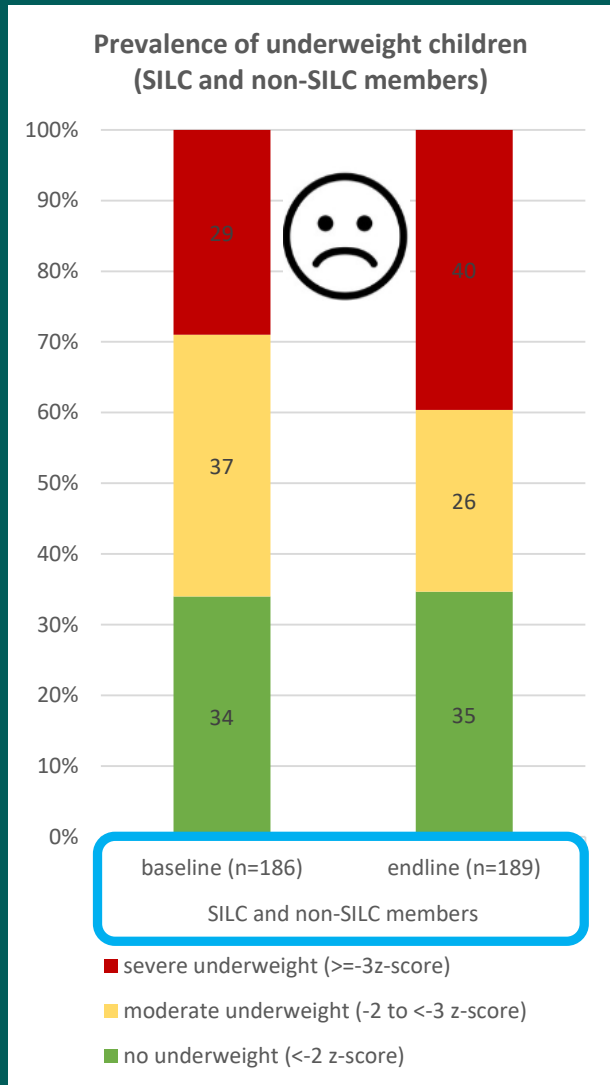
Methodology - Baseline and Endline



- Quantitative and qualitative assessment
- Respondents randomly selected
- Digitalised questionnaire
- Nutritional status assessed
- Focus group discussions

* Some children attended more than one session

Findings – nutritional status - underweight



Findings – nutrition practices

Indicator	Baseline	Endline		
		Total	Control group	Intervention group/ SILC
Children consuming solid, semi-solid or soft foods in last 24 hours	66%	---	74%	95%
Minimum dietary diversity (4 or more out of 7 food groups)	39%	50%	54%	46%
Grains, roots, tubers	85%	69%	81%	60%
Legumes	61%	67%	60%	71%
Vit A rich foods	77%	91%	87%	94%
Palm oil	92%	83%	73%	90%
Other fruits & vegetables	63%	49%	36%	60%
Dairy products	2%	1%	<1%	<1%
Meat, fish	30%	20%	14%	25%
Eggs	1%	0%	0%	0%
Ready-to-Use Therapeutic Food (RUTF)	0.4%	18%	---	---

Findings – financial resources - endline

Indicator	Control group	Intervention group/ SILC
Food purchase (at least once a week)		
Grains, roots, tubers	80%	67%
Legumes	63%	68%
Vit A rich fruits & vegetables	49%	53%
Animal source foods	21%	38%
Palm oil	86%	91%
Amount of expenditure of last purchase	Less	Higher
Purchase of soap	79%	88%
Households saving money	5%	99%
Households taking a loan last 12 months	26%	81%
Households using a loan to buy food	30%	77%

Conclusion

At endline in the intervention/ SILC group ...

1. A higher proportion of children was found not malnourished (underweight, acute)
2. The increase in severe malnutrition was less
3. More children ate highly nutritious foods (legumes, vitamin A rich foods, other fruits and vegetables, fish and meat) → not reflected in the minimum dietary diversity score
4. Households were financially more active; they purchase, save and take loans

Recommendations

1. Conduct a desk review on evidence of impact of saving groups on nutritional outcomes
2. Develop a simple tool that can be used to monitor nutritional outcomes of saving groups
3. Monitor nutritional outcomes where saving groups such as SILCs already exist
4. Define nutrition indicators at outcome level
5. Enhance collaboration across sectors

Questions and Answers



Conclusion

