

# Malnutrition in the OIC Member Countries: A trap for Poverty

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**Standing Committee  
for Economic and Commercial Cooperation  
of the Organization of Islamic Cooperation (COMCEC)**

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Presentation: Part 2



# Methodology Case Studies

# Case Studies

- ▶ Senegal
  - ▶ Egypt
  - ▶ Indonesia
  - ▶ Bangladesh
  - ▶ Tajikistan
- 
- ▶ Represents main geographic areas of OIC
  - ▶ Captures variations along poverty and malnutrition
  - ▶ Literature review, data analysis, key informant interviews

# Selection criteria

Countries	Senegal	Bangladesh	Egypt	Indonesia	Tajikistan
<b>Criteria</b>					
Child Over- and undernutrition	X		X	X	x
Lack of progress on undernutrition	X			X	
Lack of progress on overnutrition	X		X	X	
SUN member	X	X		X	X
Good data	X	X	X	X	X

# Case study methodology

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**Over- and Undernutrition Profiles**

**Multivariate and logit regressions of malnutrition –**

*Poverty and malnutrition &*

*Intergenerational Transmission of Malnutrition*

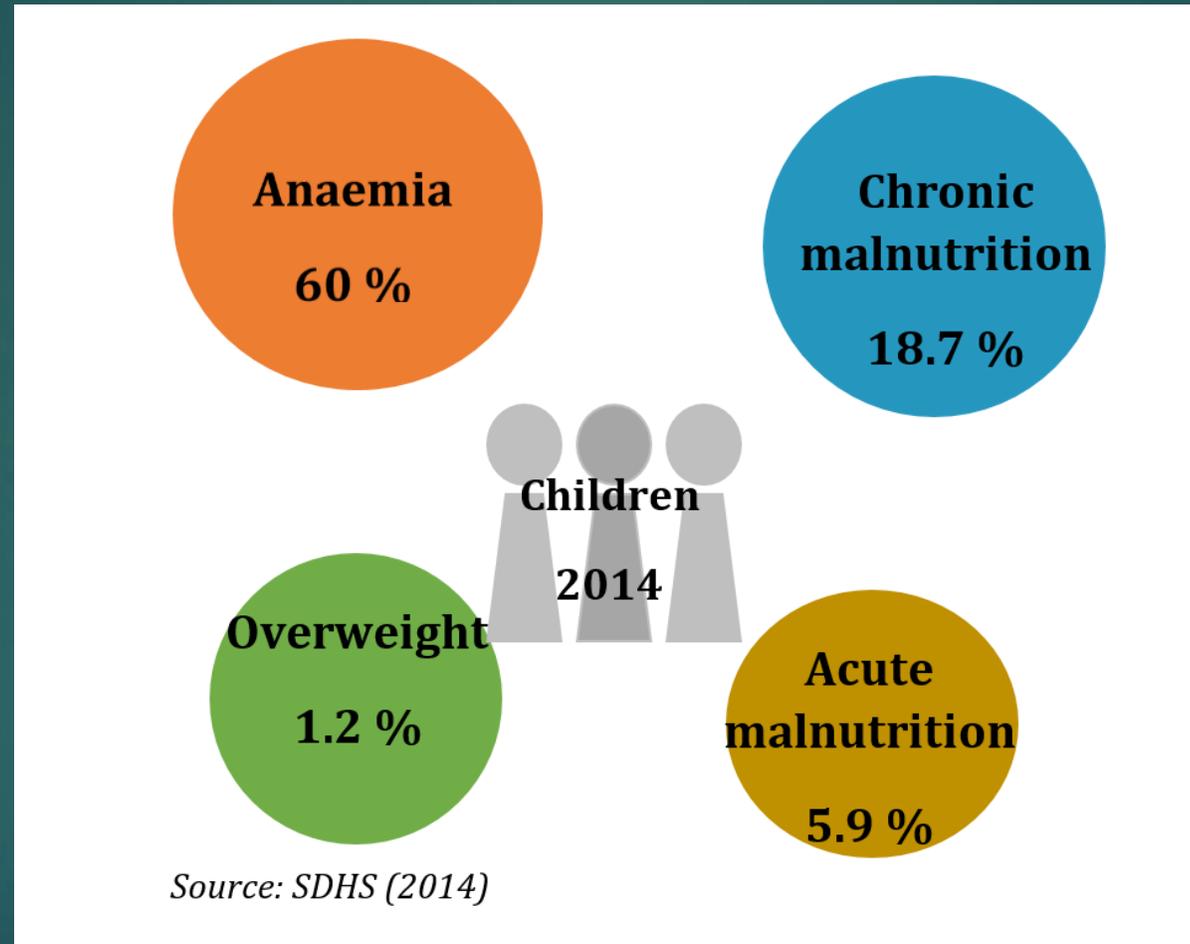
**Stakeholders' interviews and review of secondary literature**

***Integration of quantitative and qualitative research***

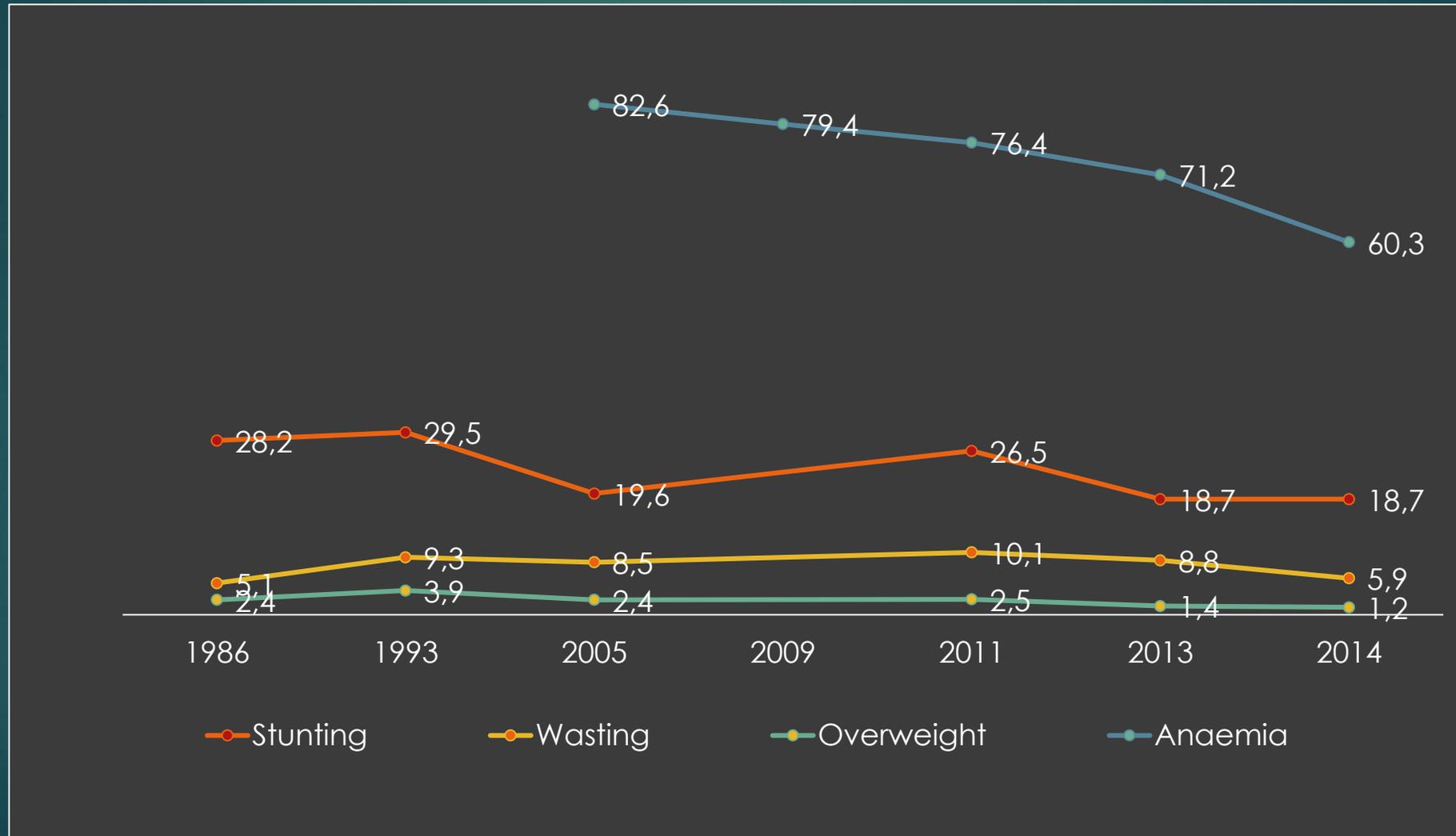
# Case study protocols

- ▶ We reached out to:
  - ▶ NGOs, ministries and government agencies, malnutrition coordination units, multilaterals institutions (UN agencies), donors, academics
  - ▶ We conducted semi-structured interviews based on a common set of guidelines across the countries
  - ▶ We gathered information on stakeholders' work; their assessment of the situation and expertise
  - ▶ We obtained relevant documentation and data from stakeholders
- ▶ Challenges:
  - ▶ Language and access
  - ▶ Availability (especially of government officials)
  - ▶ Documentation and data

# Senegal



# Senegal



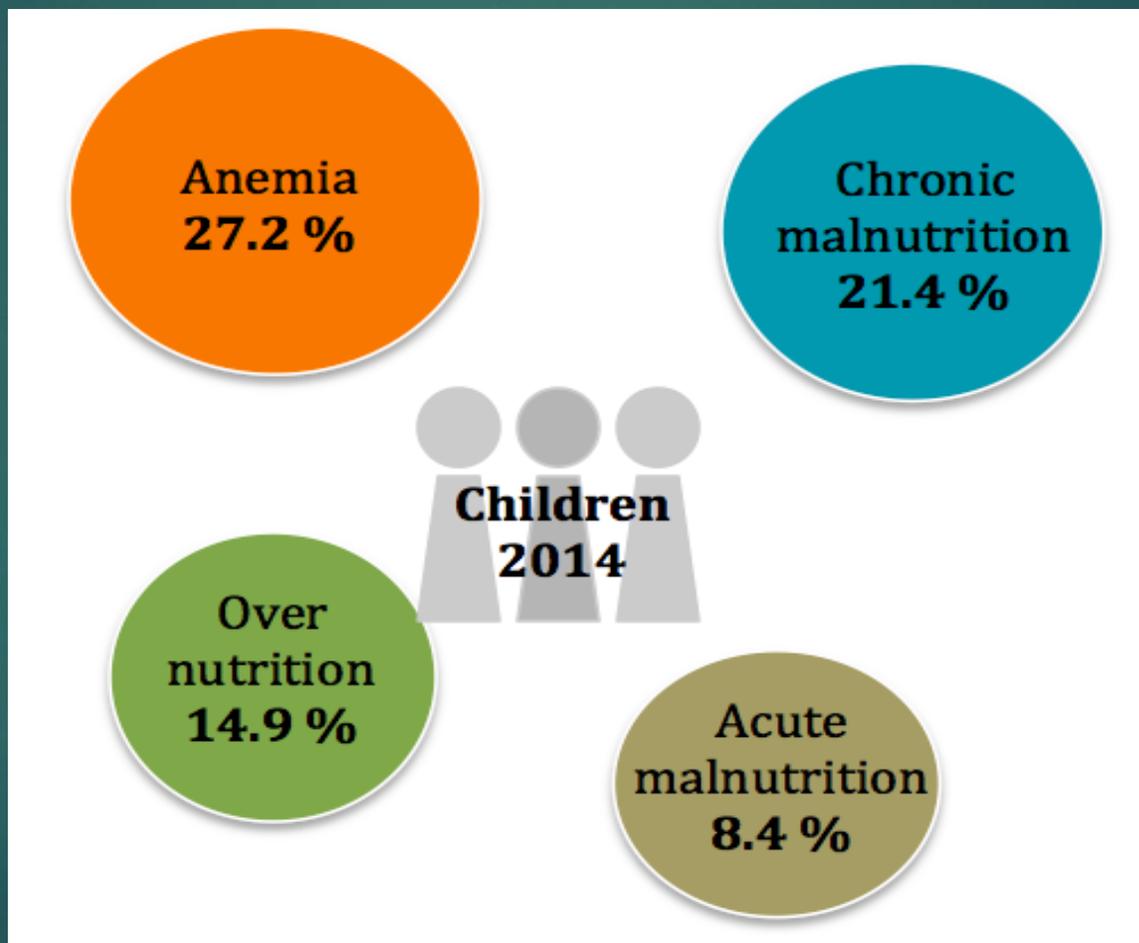
# Senegal: drivers of malnutrition

- ▶ Wasting and especially stunting are strongly associated with multidimensional poverty
  - ▶ Stunting is concentrated in poorer regions
  - ▶ But wasting is concentrated in the north, which are not poorest regions
- ▶ Slow economic growth and pace of poverty reduction
- ▶ Food insecurity is a challenge
  - ▶ Limited progress on undernourishment and food production (since 2011)
  - ▶ In the north, agro-pastoral populations
  - ▶ Climate change (desertification)
- ▶ Very limited provision of healthcare, and water and sanitation infrastructures
- ▶ Infant and Young Children Feeding Practices are sub-optimal
- ▶ Very strong intergenerational transmission of under-nutrition

# Assessment of policy responses

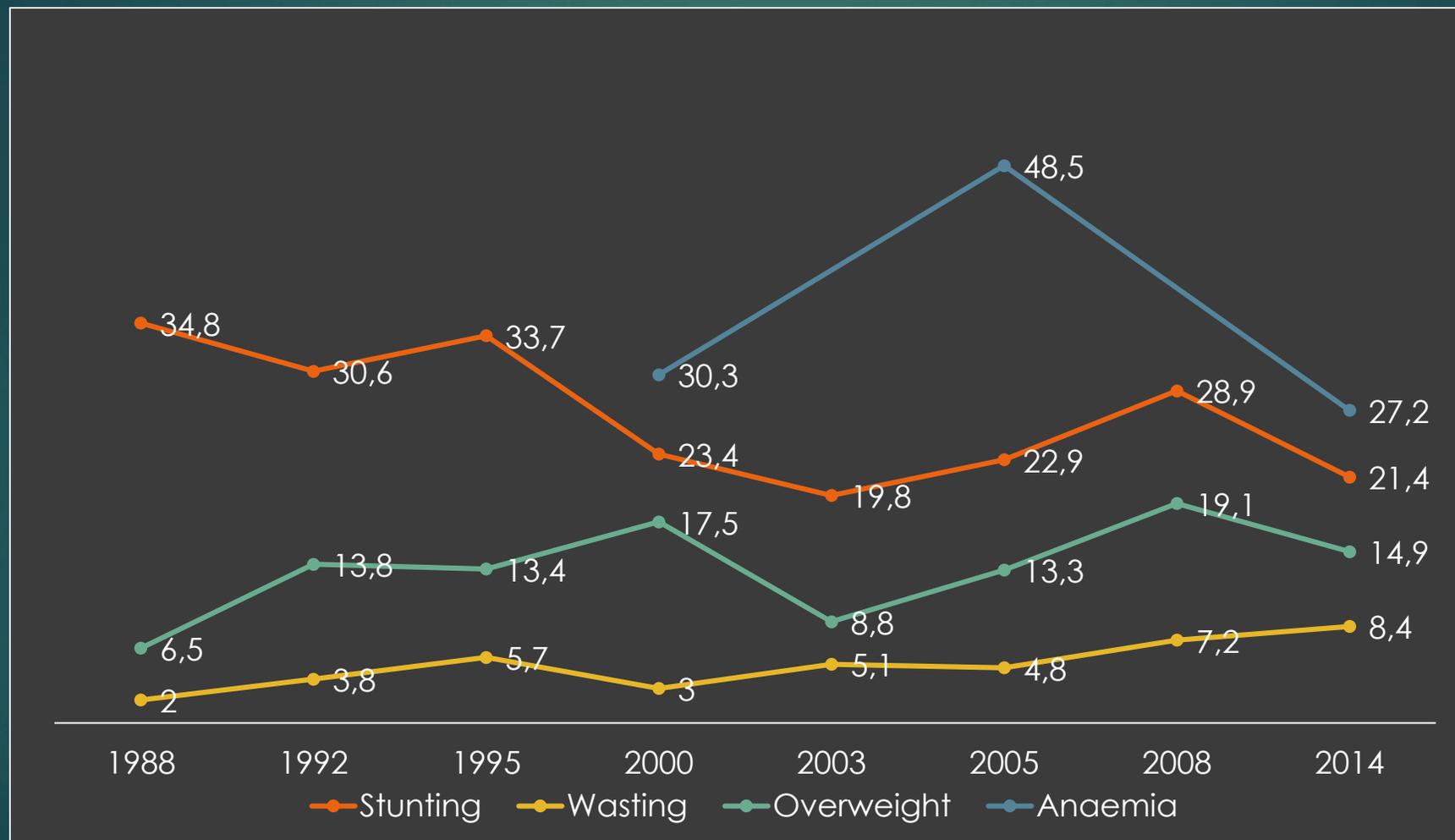
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- ▶ High levels of political commitment (8<sup>th</sup> out of 45 countries)
- ▶ But poor access to sanitation, water and healthcare
  - ▶ Investment in health sector needs to be increased (share of health expenses in GDP decreased since 2004)
- ▶ Limited presence of nutrition in national development plan
  - ▶ Nutrition appears as a human capital target, but role of enhanced nutrition in development is not recognised
- ▶ Challenges with multi-sectorality
  - ▶ The CLM is both a coordinator and an actor of nutrition
  - ▶ Other coordinating agencies (relating to food security and social protection)
- ▶ Lack of coordinated strategy regarding micronutrient deficiencies (aw well as stunting and overweight)
- ▶ Challenges around decentralised development
  - ▶ political commitment and administrative capacity of local governments are behind those of central government



# Egypt

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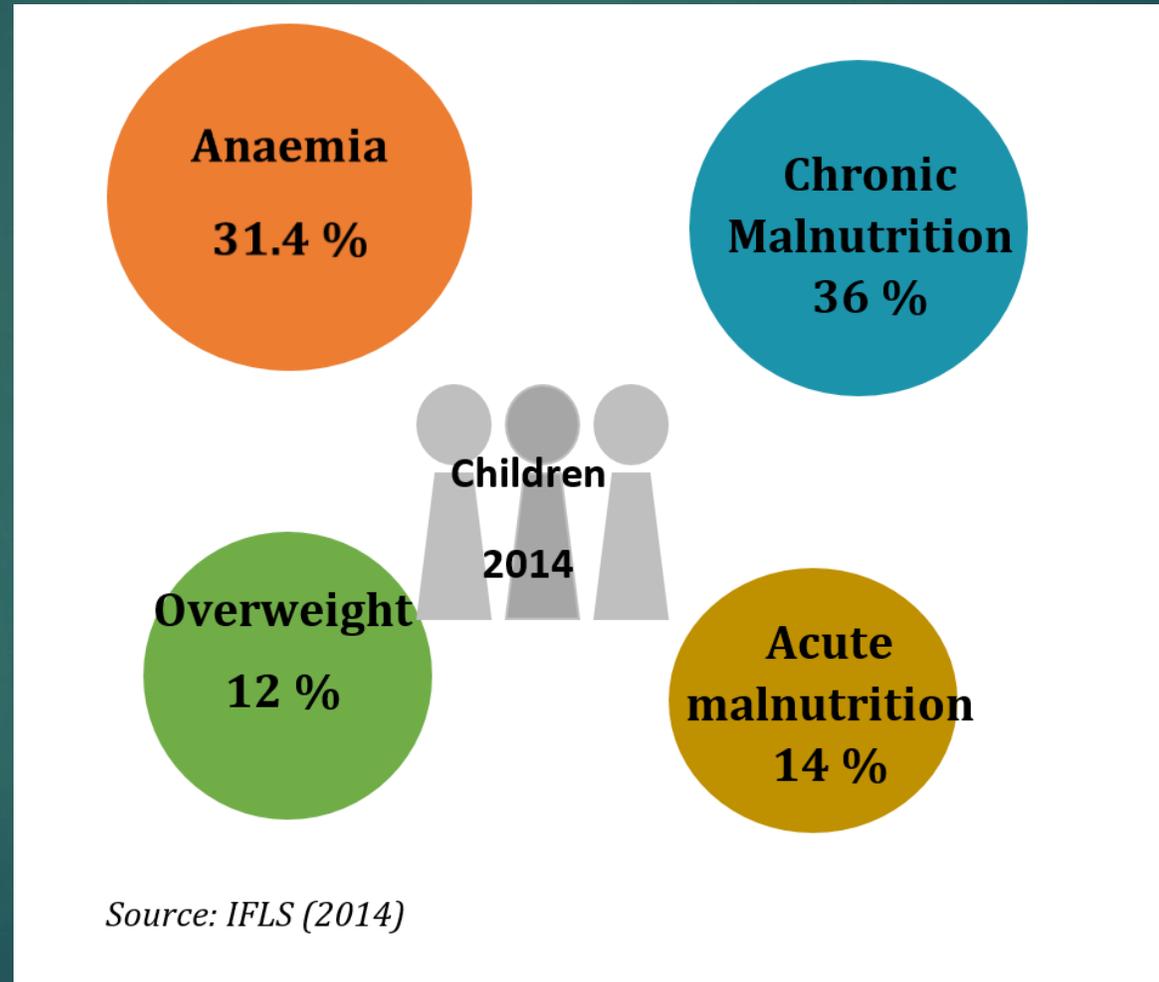
# Egypt: drivers of malnutrition

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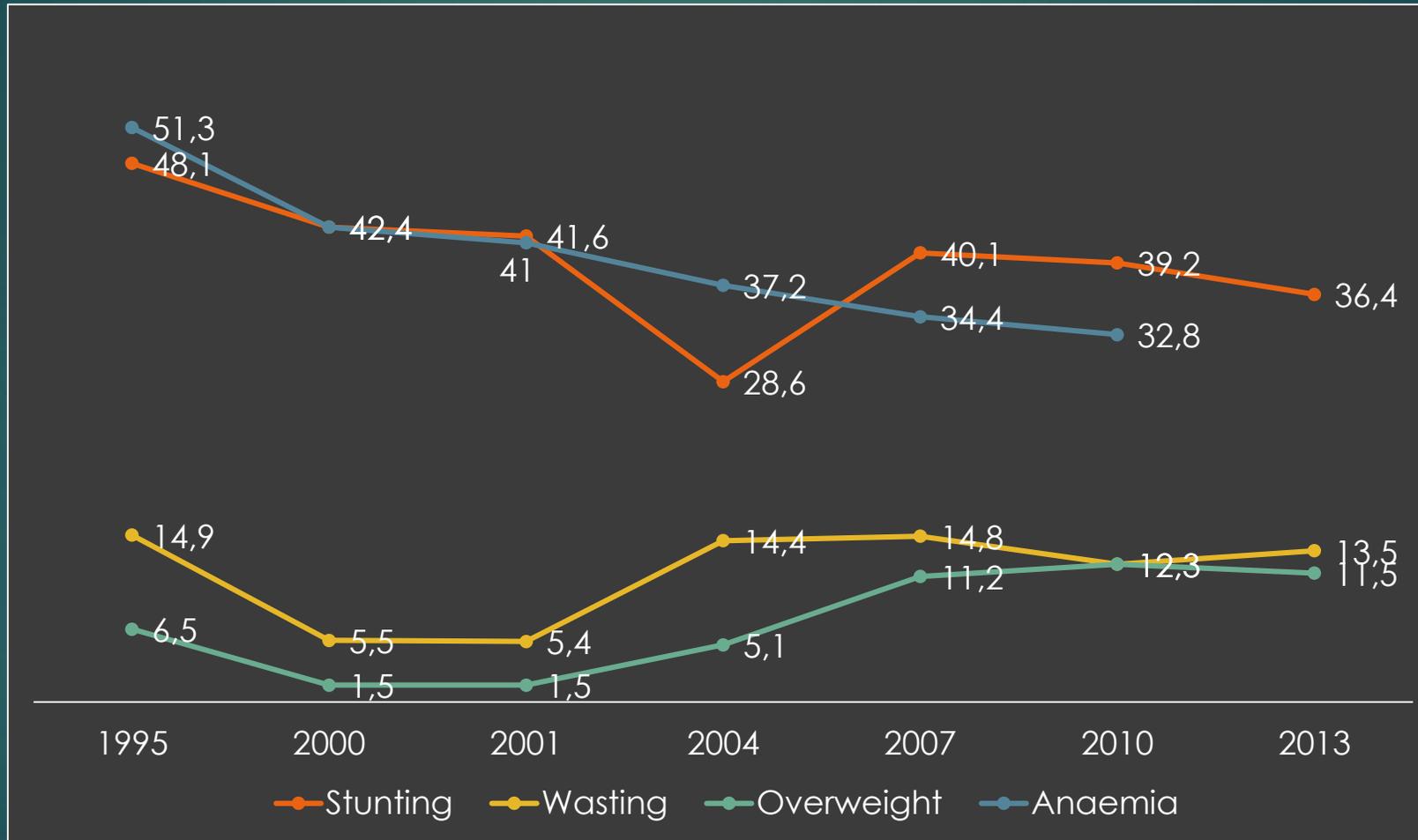
- ▶ Steady economic growth between 2000 and 2015 (1.8% per year)
- ▶ But poverty levels have increased since 1999 (from 17% to 28%)
- ▶ Food insecurity is a major issue, especially since global food crisis of 2009 (net food importer)
- ▶ Insufficient diet diversity; too reliant on energy-rich food
- ▶ Chronic malnutrition goes down with household wealth
- ▶ Strong association between overweight and breastfeeding
  
- ▶ Relatively weak intergenerational transmission of malnutrition (Lowest among the 5 case studies)

# Assessment of policy responses

- ▶ Comprehensive 10-years strategy (“Food and Nutrition Strategy”)
- ▶ But moderate level of political commitment (12<sup>th</sup> out 45 African countries)
  - ▶ Lack of a separate budget line for nutrition
  - ▶ Low coverage of vitamin A supplementation
  - ▶ Limited presence of nutrition in national development strategy
  - ▶ No time-bound nutrition targets
- ▶ Ambiguous effect of the food subsidy policy
  - ▶ Makes energy-rich nutrient-poor food cheaper
- ▶ Critical to improve IYCF through awareness of what good, nutritious food are
- ▶ What role for cash transfers? Does they need to be combined with Behavioural Change Communication to avoid obesity rising?



# Indonesia



# Indonesia: drivers of malnutrition

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- ▶ Stunting strongly associated with multidimensional poverty
- ▶ Harmful IYCF Practices linked with under- and over-nutrition
- ▶ Robust economic growth associated with decline in stunting but not in wasting and overweight
- ▶ Significant progress on food security due to economic growth
  - ▶ Energy per capita increased through positive change in diet
  - ▶ But also increase in processed foods which are linked with overweight
- ▶ Still substantial gaps in health, water and sanitation
  - ▶ Open defecation still concerns 20% of the population
  - ▶ Recent trends are positive but rates of progress are quite slow
- ▶ Stunting is strongly intergenerational

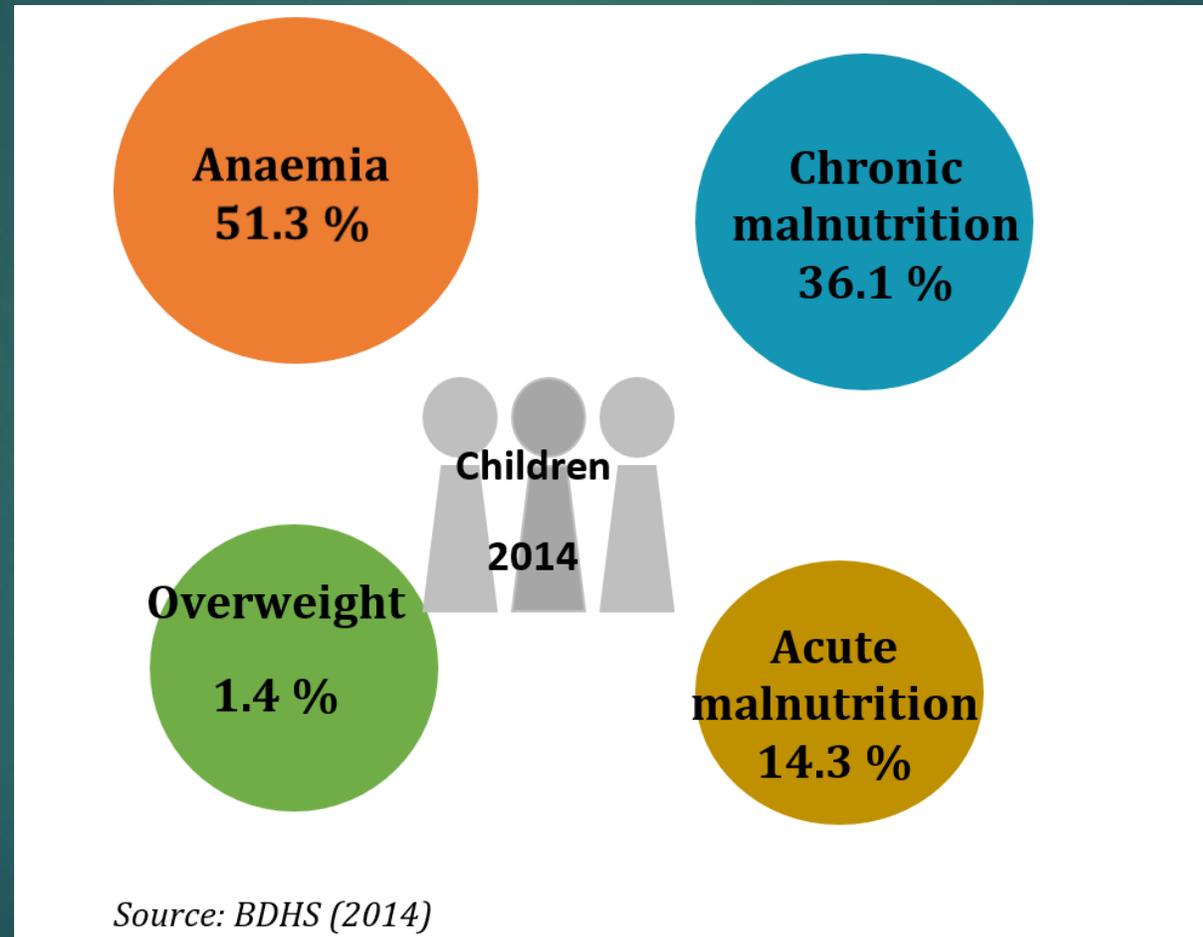
# Assessment of policy responses

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- ▶ Good level of political commitment, especially since 2013
  - ▶ Ranks 10<sup>th</sup> out of 45 countries in the HANCI Index
- ▶ Strong focus on stunting
- ▶ Need for increased healthcare, and water and sanitation provision
- ▶ Accountability remains a challenge: gap between plan and implementation
- ▶ Collaboration between sectors hampered by limited engagement beyond Ministry of Health and Ministry of Plan
- ▶ Decentralised governance
  - ▶ Central government has mostly a steering role
  - ▶ Implementation of the National Action Plan for Food and Nutrition varies
  - ▶ Low compliance and/or capacity in some local governments
- ▶ Overweight needs to be more tightly integrated in nutrition strategy

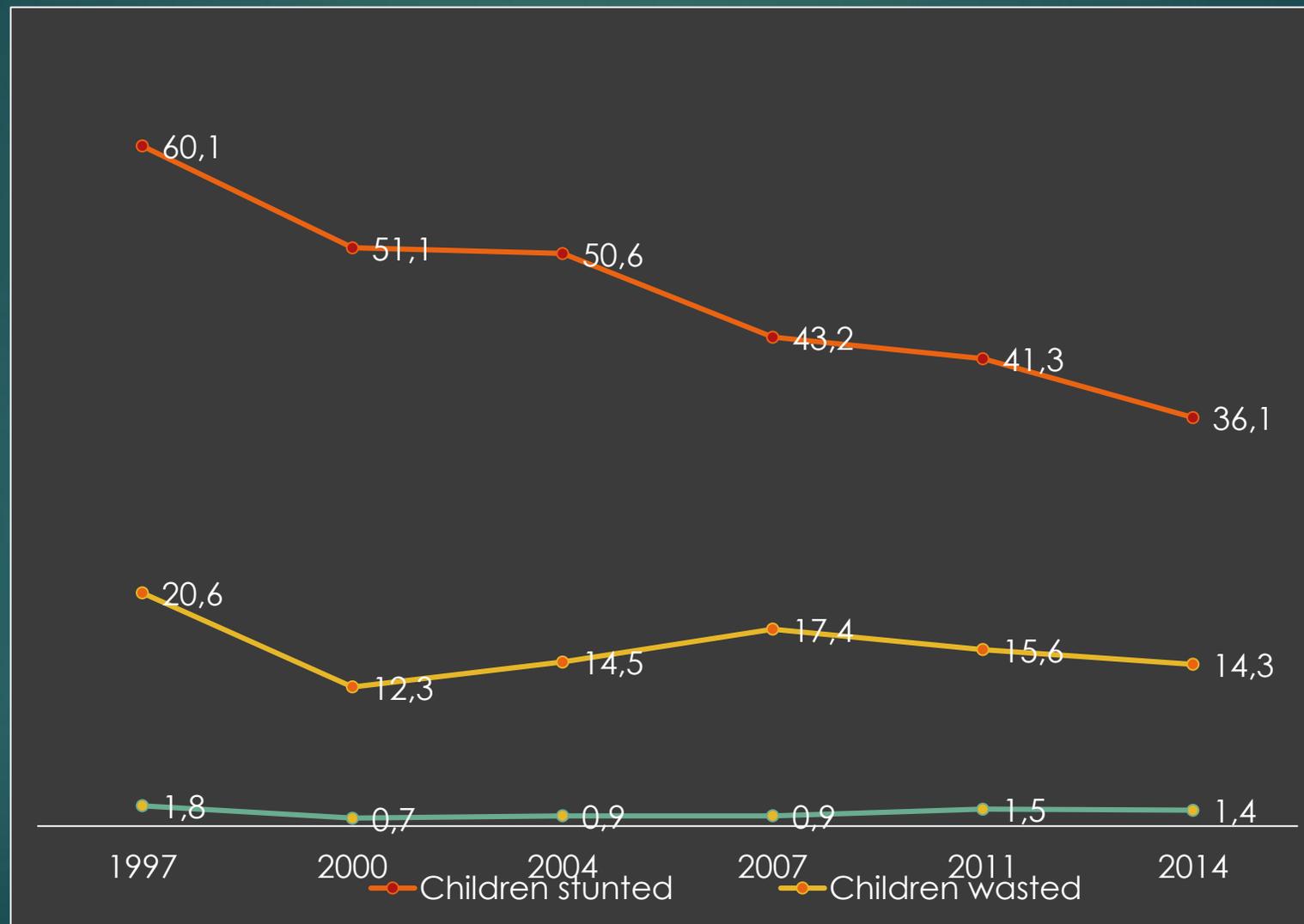
# Bangladesh

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# Bangladesh

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# Bangladesh: drivers of malnutrition

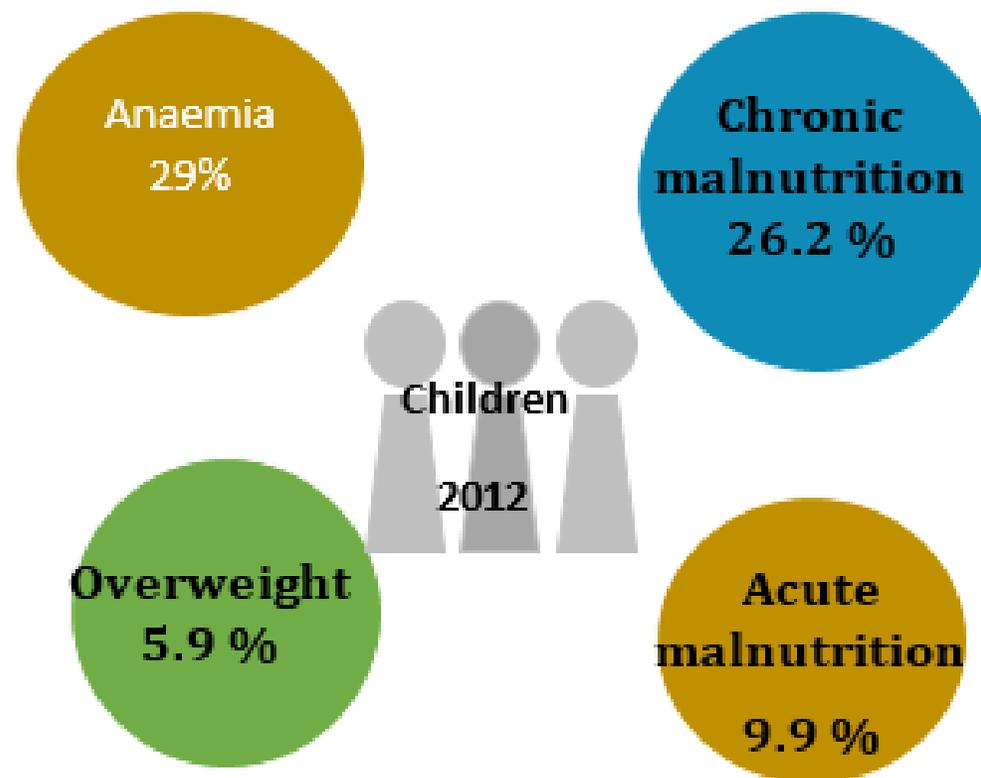
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- ▶ Strong association between wasting and stunting and multidimensional poverty
  - ▶ Why did wasting remain high despite economic growth and association between poverty and wasting?
- ▶ Acute problem of food insecurity (not much progress since 2007)
  - ▶ High reliance on rice by households and promotion of rice production caused prices to rise
  - ▶ Food production increased but food dietary diversity is low
- ▶ Limited provision of healthcare (especially prenatal care)
  - ▶ But very strong progress on water and sanitation
- ▶ Feeding practices still sub-optimal
- ▶ Very strong intergenerational transmission of undernutrition

# Assessment of policy responses

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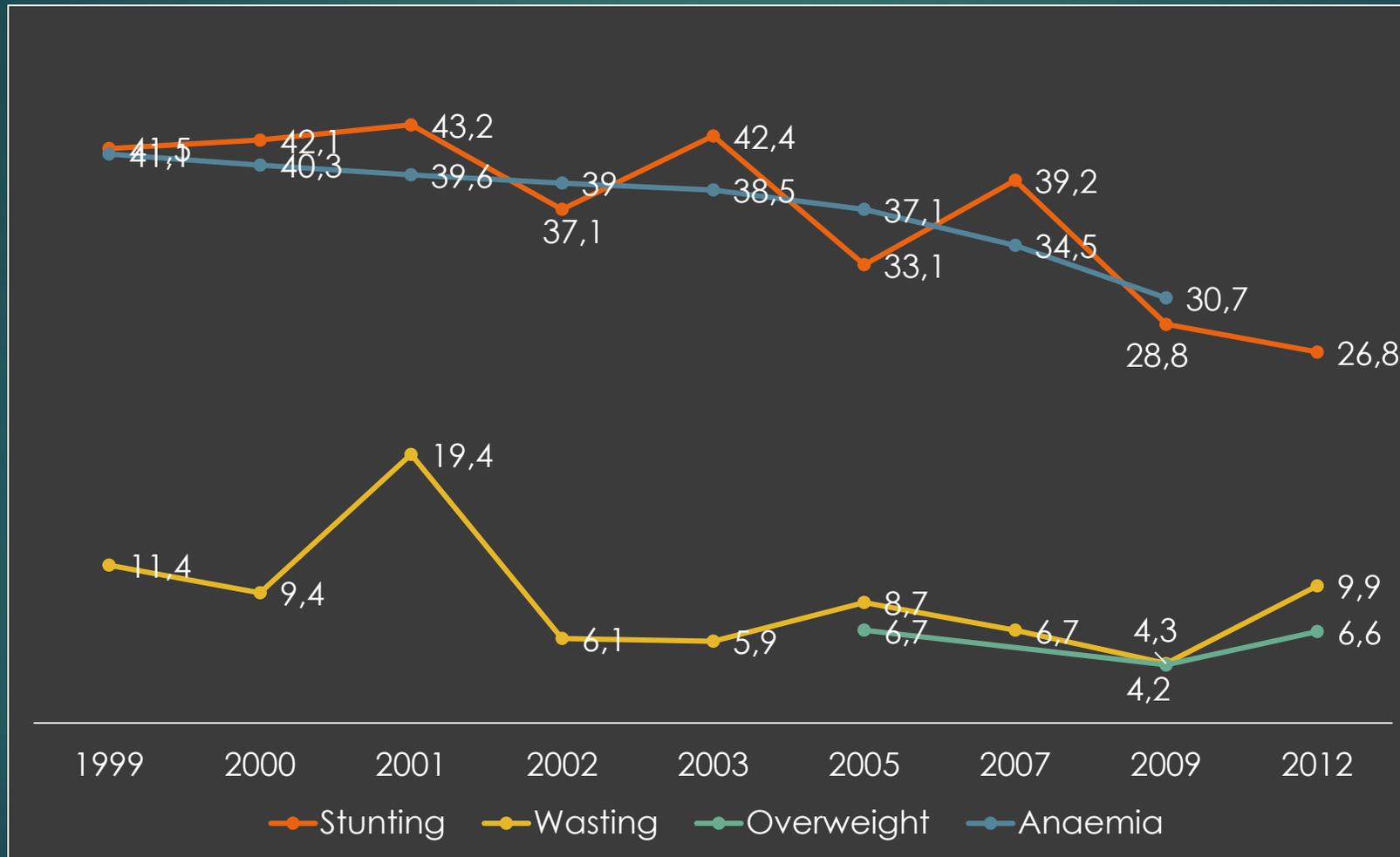
- ▶ Moderate level of political commitment
  - ▶ Ranks 14<sup>th</sup> out of 45 countries in the HANCI Index
  - ▶ But 9<sup>th</sup> on nutrition
- ▶ Strong focus on stunting
- ▶ Biggest weaknesses linked to poor healthcare, water and sanitation provision
  - ▶ But rapid progress on health (NGO and donor driven)
- ▶ Challenges with inter-sectorality
  - ▶ Possibly compounded by influence of international donors
  - ▶ But many innovative programmes, with positive role for government
- ▶ Food production increased, but too much reliance on rice
  - ▶ Kept prices high for the population
  - ▶ Contributes to low diet diversity



Source: TIDHS (2012), MOH and UNICEF (2010) for anaemia.

# Tajikistan

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# Tajikistan: drivers of malnutrition

- ▶ Wasting and stunting highly correlated with multidimensional poverty
  - ▶ But overweight is linked with affluence
- ▶ Secular reduction of under-nutrition linked with strong economic growth and poverty reduction
  - ▶ But poverty rose since 2008 due to the economic crisis and reduction of remittances
- ▶ Most food insecure country in Europe and Central Asia
- ▶ Diet diversity is insufficient, and linked with both under- and over-nutrition
- ▶ Challenges in healthcare provision, especially towards the poor and rural areas
- ▶ Strong intergenerational transmission of under-nutrition

# Assessment of policy responses

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- ▶ Markedly stronger political commitment since 2013
  - ▶ Current president recognised as a champion of nutrition
  - ▶ Many Ministries very active in malnutrition reduction
- ▶ Currently working on establishing a Common Results Framework (CRF) to improve inter-sectorality
- ▶ Nutrition now mentioned in National Development Goals
- ▶ Implementation of nutrition-specific and nutrition-sensitive policies are a challenge
  - ▶ Funding is often insufficient, especially for nutrition education
  - ▶ Inter-sectorality can be improved, no clear framework at the moment
  - ▶ Further buy-in from a number of ministries and agencies, and from the population, is required (to avoid domination by donors)
- ▶ Structural weakness of health sector

# Key messages

- ▶ Economic growth strongly linked with reduction of stunting and anaemia prevalence
  - ▶ Tends to go hand in hand with food security
  - ▶ Yet, economic growth will not suffice
  - ▶ No clear relationship with wasting
  - ▶ Linked with overweight
- ▶ Education is a key factor of malnutrition reduction
- ▶ Poor access to healthcare, and water and sanitation infrastructures, hold back progress
- ▶ Access to maternal and reproductive healthcare is a serious obstacle to malnutrition reduction
- ▶ Improving IYCF practices is a critical element of the fight against malnutrition

# Key messages

- ▶ Although malnutrition cannot be reduced to food, food insecurity remains a very significant driver
- ▶ Strong intergenerational of under-nutrition (especially stunting)
  - ▶ But with important variations across countries
- ▶ All countries strive for inter-sectorality
- ▶ Commitment to reduce malnutrition has been increasing in all countries, especially at central level of government
  - ▶ But what about health expenditures?
- ▶ Policies are strong on paper but implementation is often where the gaps are
- ▶ Fight against the double burden of malnutrition is insufficiently integrated

# Key recommendations

- ▶ Adopt the internationally recognised framework for nutrition policy
- ▶ Integrate the double-burden of malnutrition within all nutrition policies
- ▶ Ensuring a strong integration of global, regional and national policies
- ▶ Enacting policies is not enough, a critical focus on implementation is necessary
- ▶ Increased spending on nutrition and health is needed
- ▶ Tackle food security and seasonality...
- ▶ ...But aim for a broader focus on nutrition security
- ▶ Design, develop and deliver behaviour change communication (BCC) policies which target IYCF knowledge, attitudes and practice