

## **Ending Child Hunger and Undernutrition Initiative: oral report**

### **Background note**

#### **I. Background.**

1. Hunger and chronic undernutrition are recognized as the major underlying causes in over half of all deaths from infectious diseases among children under five years of age. There are 146 million undernourished children under five years of age living in developing countries. UNICEF and the World Food Programme (WFP) have collaborated closely with the World Bank in shaping the Ending Child Hunger and Undernutrition Initiative to address this challenge. The Initiative focuses on Millennium Development Goal 1, target 2, which is to halve by 2015 the proportion of people who suffer from hunger and undernutrition, and for which a key result indicator is to reduce the proportion of children under age five who are underweight.

2. If progress towards the achievement of this target continues at its current rate, *some 50 million children may not* be reached. It is this critical gap that the Initiative will seek to bridge. The Initiative has three major objectives:

(a) To stimulate, enable and assist national Governments to mainstream the elimination of child hunger and undernutrition within national policies and programmes based on monitoring and accountability for results;

(b) To provide adequate policy support and expert policy guidance, supported by clear, consistent and well-informed advocacy;

(c) To mobilize sufficient additional resources in support of national efforts, and support national efforts to target the use of resources in a cost-effective, consistent and coordinated manner towards the elimination of hunger and undernutrition among children and pregnant women.

3. Achieving these objectives requires building on and expanding partnerships that can help support practical actions at the national, district and community levels.

#### **II. Purpose of the report**

4. The purpose of this report is to update the UNICEF and WFP Executive Boards on actions taken by the two agencies, together with partner organizations, to further develop the Initiative. In November 2005, the WFP Executive Board welcomed a common Plan of Action for the elimination of child hunger in line with efforts to achieve Millennium Development Goal 1. The WFP Board received the draft Concept Note, prepared together with UNICEF and the World

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\* E/ICEF/2006/10.

Bank, which outlined the broad framework of an emerging partnership aimed at catalyzing global efforts to end child hunger and undernutrition. It took note of the proposed Initiative and acceded to the WFP Executive Director's request to support the development of a Plan of Action. Regular updates on the progress were requested. Representatives of UNICEF and the World Bank attended the WFP Executive Board's session in February 2006 and participated in discussions to further clarify the complementary and joint efforts of the three agencies and other institutional partners.

5. At its first regular session in January 2006, the UNICEF Executive Board received an oral report accompanied by a brief written paper on the Ending Child Hunger and Undernutrition Initiative. It also requested a further update on progress at its annual meeting in June 2006.

### **III. Action underway**

#### **Global awareness**

6. International organizations are underscoring the crucial role nutrition plays in the life cycle and its importance to the Millennium Development Goals. The United Nations Standing Committee on Nutrition has highlighted in its Action Plan and Strategic Framework that nutrition is critical to the achievement of the Millennium Development Goals. The World Health Organization has made nutrition one of its 15 new key areas. The World Bank's recent report, *Repositioning Nutrition as Central to Development*, is a landmark strategy. Other agencies have expressed an interest in technical collaboration on the Initiative, for example the World Bank, the Office of the United Nations High Commissioner for Refugees, the Joint United Nations Programme on HIV/AIDS, the African Development Bank, the Asian Development Bank and the Inter-American Development Bank.

7. The recent UNICEF report, *Progress for Children: A Report Card on Nutrition*, measures progress towards Millennium Development Goal 1 and shows that one of every four children under five years of age is underweight. Accelerated progress is needed to (a) reduce the number of low birth-weight babies; (b) increase the number of mothers exclusively breastfeeding their babies in the first six months; (c) solve food and nutrition and parental and child care problems (e.g., with complementary feeding for infants from ages 6-24 months); and (d) reduce iron and other micronutrient deficiencies.

#### **Progress in countries and regions**

8. Since 1996, there has been significant progress in strengthening national capacities related to monitoring national development goals for children. While the prevalence of children under age five years who are underweight has decreased globally since 1990, the rate of reduction needs to accelerate if the goal is to be achieved by 2015. In addition, sustainability is often a challenge. Forty-six countries (29 per cent) are on track to reach Goal 1, target 2, and there is insufficient progress in 27 countries (17 per cent) which are unlikely to reach the goal without improved progress. In some 25 countries (16 per cent), there have been setbacks or no significant progress. Nearly one half of the countries cited in the UNICEF report have insufficient data to demonstrate a trend.

9. Nearly three quarters of underweight children live in just 10 countries, and more than half live in Asia. In sub-Saharan Africa, the situation is worsening in 14 countries, where the number of underweight children has actually increased. Only East Asia and the Pacific and Latin America and the Caribbean are on track to reach the goal. South Asia and West and Central Africa are

making insufficient progress. Eastern and Southern Africa and the Middle East and North Africa are making virtually no progress. Gender is an important relevant issue, with girls negatively affected in South Asia and elsewhere.

10. At regional and country levels, there has been early and spontaneous participation from WFP and UNICEF country offices and regional offices in Africa, Asia and Latin America, with all of them helping to shape the global plan of action for the Initiative. Most of this support has been on the basis of experience gained from the WFP/UNICEF Memorandum of Understanding of May 2005 which supports current, nationally-led programmes that often involves the participation of NGOs, civil society organizations, the private economic sector and other international development partners.

#### **IV. Development of the Plan of Action**

11. Governments, international organizations, NGOs, civil society, technical institutions, the private sector and the media all have major and ongoing roles to play in ending child hunger and undernutrition. The formulation of a global programme plan of action will consider several strategic features such as:

(a) Increasing awareness and understanding of *opportunities and solutions for addressing child hunger and undernutrition*, including sharing experience between countries;

(b) Strengthening national policies and programmes that address *child hunger and undernutrition* and linking these to overall strategies for children, economic growth and social development;

(c) Intensifying direct community action, including strengthening *community capacities required for collective action* to fight child hunger and undernutrition.

12. Three inter-agency technical working groups will elaborate more specific strategies. Technical Working Group 1 will continue to develop a policy framework that is linked to national development policy frameworks, monitoring and accountability mechanisms, resource mobilization and costing strategies. Technical Working Group 2 will identify key initiatives with which the Initiative needs to be harmonized and elaborate the global support mechanisms required to support action in countries. Technical Working Group 3 will articulate nationally-led implementation and community-based leadership and participation.

13. As mentioned previously, efforts are already taking root in more than 20 countries under the WFP/UNICEF Memorandum of Understanding to support such national programmes as:

(a) **Packages of preventive and care services for families and communities**, including food where necessary, reflecting an integrative and responsive approach and multisectoral collaboration. Priority coverage for adolescent girls, newlywed females, pregnant women, lactating mothers and children under age five, particularly children in community-based care. Essential package combinations that are responsive to key local needs and culture include child growth monitoring and promotion; health, hygiene and nutrition education; preventive and curative health services; micronutrient supplementation where fortified food products are not accessible; de-worming; and household water treatment. These efforts complement – and are complemented by – efforts to increase access to immunization, bednets in malarial areas, HIV/AIDS prevention and family care services, and programme approaches seeking to address

disparity issues related to gender, cultural values, ethnicity, affordability of services and other issues. These actions are underpinned by an increasingly good evidence base;

(b) **Prevention and care for school-age children** as future parents. Hunger and undernutrition limit learning, children's attention spans and mental capacities. School feeding and take-home rations can contribute to increased enrolment, attendance, retention and learning achievement. Educating girls, and hence a future cohort of women, contributes to their overall health, nutrition and social status, and the reduction of child mortality and undernutrition among their children. Educating boys contributes to increased gender awareness, readiness and capacity for men to support gender development and take on important parenting roles;

(c) **Community and household food security.** Where food insecurity is a cause of hunger and undernutrition, programme approaches include using food as a "safety net" in communities with high levels of hunger and undernutrition while national and local systems are strengthened, as well as an incentive to stimulate community mobilization, participation and social networks of civil society.

14. The Initiative also intends to contribute to the achievement of other Millennium Development Goals, capitalizing on their synergistic interrelationship. It will also address the results of the focus areas of the UNICEF Medium-term Strategic Plan and the WFP Strategic Plan. In a broader context, the Initiative focuses on child hunger and undernutrition by mainstreaming gender issues that affect children and women, especially since maternal status and education have a high impact on the health and nutrition of children.

## **V. Immediate next steps**

15. The next steps are to:

(a) Prepare a Global Plan of Action by September for review by the WFP Executive Board in November 2006, and the UNICEF Executive Board in January 2007;

(b) Continue to consult and explore with 20 or more countries the development of options that will inform the design of the global plan of action that will provide complete alignment with other support initiatives for the Millennium Development Goals.

## **VI. Issues for discussion with the UNICEF Executive Board.**

16. Why have earlier global efforts failed? There are five major reasons: (a) weak national commitment to reduce malnutrition, as it often is not highly visible; (b) shortfalls in food production and related distribution and entitlement issues; (c) national funds are used for other, more costly programmes; (d) insufficient national technical and management capacities to manage large-scale nutrition programmes; and (e) the destabilizing effects of war, conflict, poor governance and economic decline.

17. Undernutrition among young children is caused by poor diets and feeding practices and high infectious disease loads. The resulting protein-energy malnutrition is not being identified adequately and the overall decline in child growth monitoring and promotion is helping to keep this problem largely invisible.

18. The mix and balance between prevention and remedial measures will vary for each country. They should be responsive to national priorities.

19. The role of parental and family care is a factor often under-appreciated in national efforts.
20. The relative effects of hunger and undernutrition to the survival, well-being and development of children need to be addressed through an integrated approach rather than separately.
21. Responsive and effective approaches should take into account the particular situations of individual countries, for example those that are: (a) on track to achieve Goal 1, target 2; (b) making progress, but at an insufficient rate to meet the goals; (c) not making progress or are even declining; and (d) countries for which there are insufficient data on key indicators.

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