

4. KEY INTERVENTIONS

The identification of the most appropriate interventions should be based on (i) a thorough analysis of the causes of undernutrition; (ii) a review of the evidence of efficiency and effectiveness; and, (iii) an assessment of the ability to attain results within the action's timeframe.

The European Commission supports comprehensive life-saving nutrition strategies to address undernutrition in emergencies which may include:

- Management of moderate and severe acute undernutrition
- Infant and young child feeding in emergencies
- Addressing acute undernutrition in adolescents and adults
- Management of micronutrient deficiencies
- Prevention and treatment of diseases
- Humanitarian food assistance
- WASH (Water, Sanitation, Hygiene)
- Information systems, capacity building, integration in the national systems, coordination, advocacy and operational research -while not entry points for intervention, depending on context may also be considered as priorities for support.



CASE STUDY: Niger

In 2011, Save the Children UK (SC UK) conducted a «Cost of Diet (CoD) assessment» in the Zinder Region of southern Niger. The CoD analytical tool, is designed to calculate the cost of the cheapest diet that meets the nutritional requirements of families based on locally available food. In this case, CoD analysis found that during the lean season, the minimum cost of this diet is far beyond the income levels of poor households. By identifying the size of this income gap, SC UK and other partners could design programming accordingly.

Depending on the social and economic situation of a household, the functioning of the market, the livelihood assets and the level of resilience, humanitarian interventions for nutrition can vary. The CoD tool can be very useful for understanding the difficulties of crisis-affected households in accessing nutritious food, and particularly for the promotion of IYCF practices for children older than 6 months based on appropriate complementary food that is available at local markets.

CASE STUDY: Pakistan

The attention generated as a result of the massive 2010 floods in Pakistan helped to highlight a previously neglected but ongoing crisis of persistent undernutrition. In this context, the international humanitarian response tended to concentrate on addressing acute undernutrition through food-based responses. Support to longer term investments such as food security, livelihoods and agriculture, was not explicitly linked to combating undernutrition.

As a result of growing evidence, advocacy and awareness around the nutrition agenda associated with humanitarian response, both government and development actors in Pakistan realised that if the log jam of undernutrition in Pakistan was to be broken for good, nutrition would have to be viewed as a development outcome and this could only be achieved by viewing nutrition through a political-economy lens.



European
Commission

ADDRESSING UNDERNUTRITION IN EMERGENCIES a roadmap for response

5. CORE MESSAGES

(i) ENSURING PRINCIPLED AND NEEDS-BASED SUPPORT: While specific groups (such as children under five, pregnant and lactating women, elderly people) can be considered most vulnerable, as a matter of humanitarian principle, DG ECHO supports all people suffering or at risk of undernutrition and will continue to ensure that humanitarian assistance is needs based, while working to meet the challenge of scaling up nutrition.

(ii) STRENGTHENING A MULTI-SECTORAL APPROACH: As the understanding of the problem has evolved, important innovations such as CMAM have paved the way for scaling up of nutrition specific response. But at the same time, there is increased recognition of the need for a multi-sectoral and thereby nutrition-sensitive approach to meet nutrition objectives, with the role of each sector in a specific context identified through robust and coordinated analysis of causes.

(iii) OVERCOMING THE HUMANITARIAN-DEVELOPMENT DIVIDE: Most emergencies occur in contexts already characterised by stunting and/or persistently high rates of wasting, as a result of serious structural factors lying beyond the scope of humanitarian assistance. The artificial divide between humanitarian and development agendas for nutrition must be overcome. In line with the EU Communication on Resilience, the aim is to support the most vulnerable communities based on joined up response, led by national government. Efforts to advance this agenda are already underway in crisis affected countries such as Ethiopia, Nigeria and Pakistan. In every crisis, a joint humanitarian / development framework for action, involving Government commitment to build national systems, is an essential precondition for effective response and enhanced resilience.

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Humanitarian
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Undernutrition is responsible for 45% of all deaths in children under five. This means 3.1 million preventable child deaths every year. It also causes irreversible impairment of growth and cognitive development for hundreds of millions more children. Around 70% of all stunted (chronically undernourished) and wasted (acutely undernourished) children live in South Asia. Increasing recognition that something must change has led to a significant shift in the way we look at the problem of undernutrition.

Building on the European Union Communication «Enhancing Maternal and Child Nutrition», the Staff Working Document «Addressing Undernutrition in Emergencies» (2013) of the European Commission's Directorate General for Humanitarian Aid and Civil Protection (DG ECHO) provides a clear roadmap for implementation of the humanitarian response in a new direction.

1. THE PARADIGM SHIFT

There has been increasing international attention to the nutrition agenda over last decade, accompanied by some major shifts:

(i) INCREASED POLITICAL AND FINANCIAL MOBILISATION AT GLOBAL AND NATIONAL LEVELS
Initiatives such as Scaling Up Nutrition (SUN), have focused international attention and promoted governmental commitment to scale up interventions to treat and to prevent undernutrition. Efforts to mobilise political commitment at country level (states having the primary responsibility for their populations) are currently underway.

(ii) IMPROVED KNOWLEDGE AND TOOLS TO ADDRESS UNDERNUTRITION
The CMAM approach (community-based management of acute malnutrition) signals a massive breakthrough in the effective treatment of children most at risk. By treating children in their communities, it allows increased coverage of nutrition programmes, reaching more children.



(iv) ACKNOWLEDGEMENT THAT UNDERNUTRITION NEEDS TO BE TACKLED FROM BOTH THE HUMANITARIAN AND DEVELOPMENT ANGLES IN ORDER TO STRENGTHEN RESILIENCE

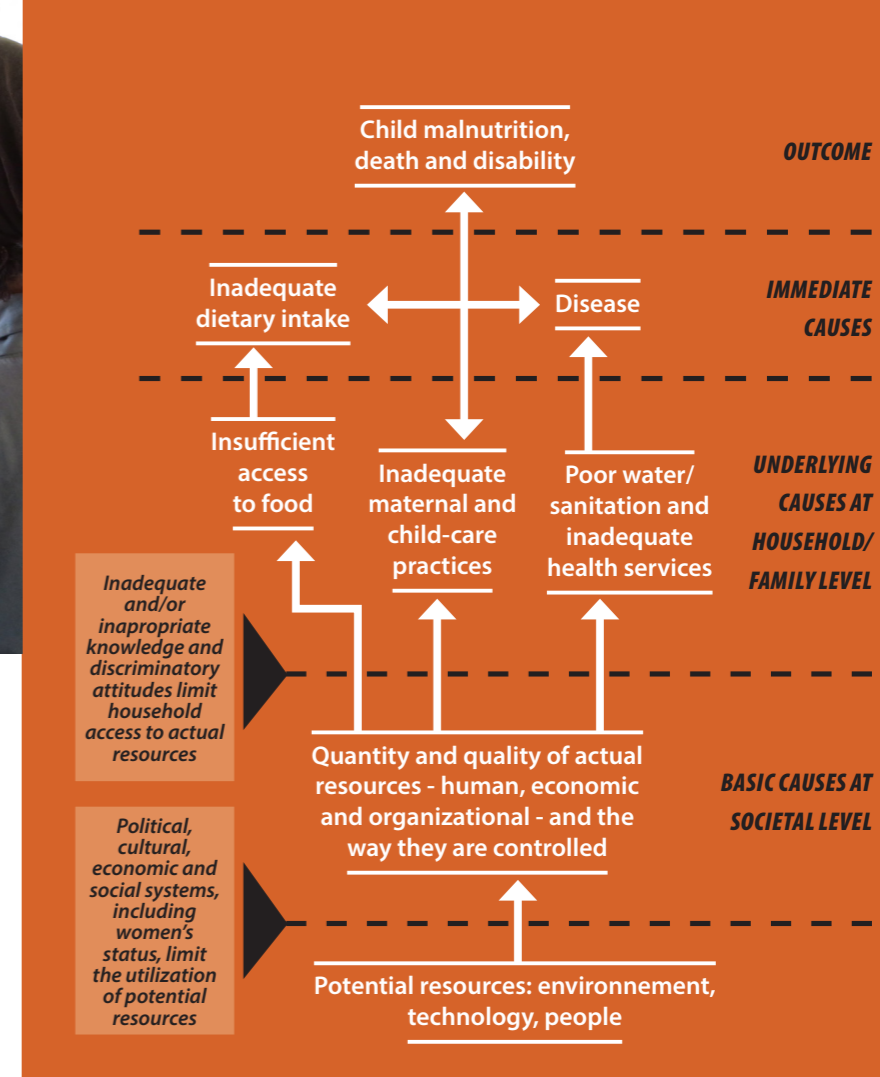
Most of undernutrition exists and persists outside emergency contexts. It causes enormous suffering and yet is entirely preventable. This means that undernutrition requires a joined up intervention from both humanitarian and development actors to ensure treatment as well as prevention of newly emerging undernutrition. The EU Communication «Enhancing Maternal and Child Nutrition», jointly prepared by DG ECHO and DEVCO, underscores this point. In recent years, both DG ECHO and DEVCO have significantly increased the proportion of funds allocated in line with nutrition objectives.

While significant progress has been made in all these areas, much more remains to be done.

2. THE CONCEPTUAL FRAMEWORK SUPPORTS BOTH A MULTI-SECTOR AND RESILIENCE FOCUSED APPROACH

Undernutrition is directly caused by inadequate food intake (quality and/or quantity) and/or by diseases. The nutritional status is usually the result of more than one factor. Importantly, the framework underscores the multifaceted nature of undernutrition, which requires a multi-sector response. This includes:

- sufficient access to food, in quantity and in quality, acknowledging that food needs are different depending on age, gender and moments in life
- adequate maternal and child care, for women and children to live in a healthy environment and to have appropriate feeding
- sufficient access to clean water, sanitation, appropriate hygiene and healthcare.



3. KEY PRINCIPLES

A crisis situation can significantly increase the prevalence of, and risks associated with, undernutrition, potentially leading to a surge in morbidity and mortality. The DG ECHO Staff Working Document «Addressing Undernutrition in Emergencies» defines the distinct role that humanitarian assistance can play. Infants, young children, pregnant and lactating women and elderly people are especially vulnerable although other groups may also require assistance.

The strategic priorities of the European Commission's response to undernutrition in emergencies are to:

- treat moderate and severe acute undernutrition
- tackle the immediate causes of undernutrition through nutrition, health and food assistance interventions
- address micronutrient deficiencies

On the question of when to engage, DG ECHO recognises that while globally accepted thresholds for emergency rates of mortality or acute undernutrition are important to take into consideration, where a situation is clearly worsening, and to save the maximum number of lives, humanitarians should not sit back and wait until these emergency thresholds have been crossed.

While short term humanitarian assistance is generally not appropriate for contexts with persistently high levels of undernutrition, engagement may be justified when non-intervention poses a serious humanitarian risk, where a positive impact is expected and where other actors are either unable or unwilling to act. In such cases, advocacy and coordination with development actors should accompany the response.

On the question of when to disengage, considerations again relate to careful analysis of the context and whether indicators are stabilising, whether other players have stepped in to meet needs, and whether core principles can be respected.

CASE STUDY: Ethiopia

Concern Worldwide launched a programme in Ethiopia to support the Ministry of Health in establishing adequate services to treat a large number of children with severe acute malnutrition (SAM) during non-crisis times.

Extensive scaling up of CMAM programmes by incorporating CMAM in the National Nutrition Strategy and its guidelines was instrumental to mitigate delays in setting up new therapeutic programmes in response to crises.

This case highlights the gains associated with a «system approach», where nutrition interventions in emergencies build on existing capacity. This approach is only possible in the presence of an appropriate funding mechanism that promotes bridges between humanitarian and development interventions.

(iii) GROWING RECOGNITION THAT TACKLING UNDERNUTRITION IN EMERGENCIES REQUIRES A MULTI-SECTOR APPROACH AND THE NEED TO PREVENT AS WELL AS TREAT

While treatment of severe acute undernutrition is essential to save lives, both during and outside of emergencies, it is increasingly clear that the focus should simultaneously be on actions to prevent further suffering. Effective investment in multi-sectoral approaches to tackle the underlying causes of undernutrition, is therefore essential.

Nutrition-Specific/Nutrition-Sensitive Interventions

The European Commission supports both nutrition-specific and nutrition-sensitive actions.

Nutrition-specific interventions address the immediate determinants of nutrition (food intake and/or disease) while nutrition-sensitive interventions (highlighted in the 2013 Lancet series) address underlying determinants e.g. access to food, social transfers, women's empowerment, child protection, schooling, water, sanitation and hygiene, health and family planning service, maternal mental health etc.