

35th Session of the UN Standing Committee on Nutrition (SCN)
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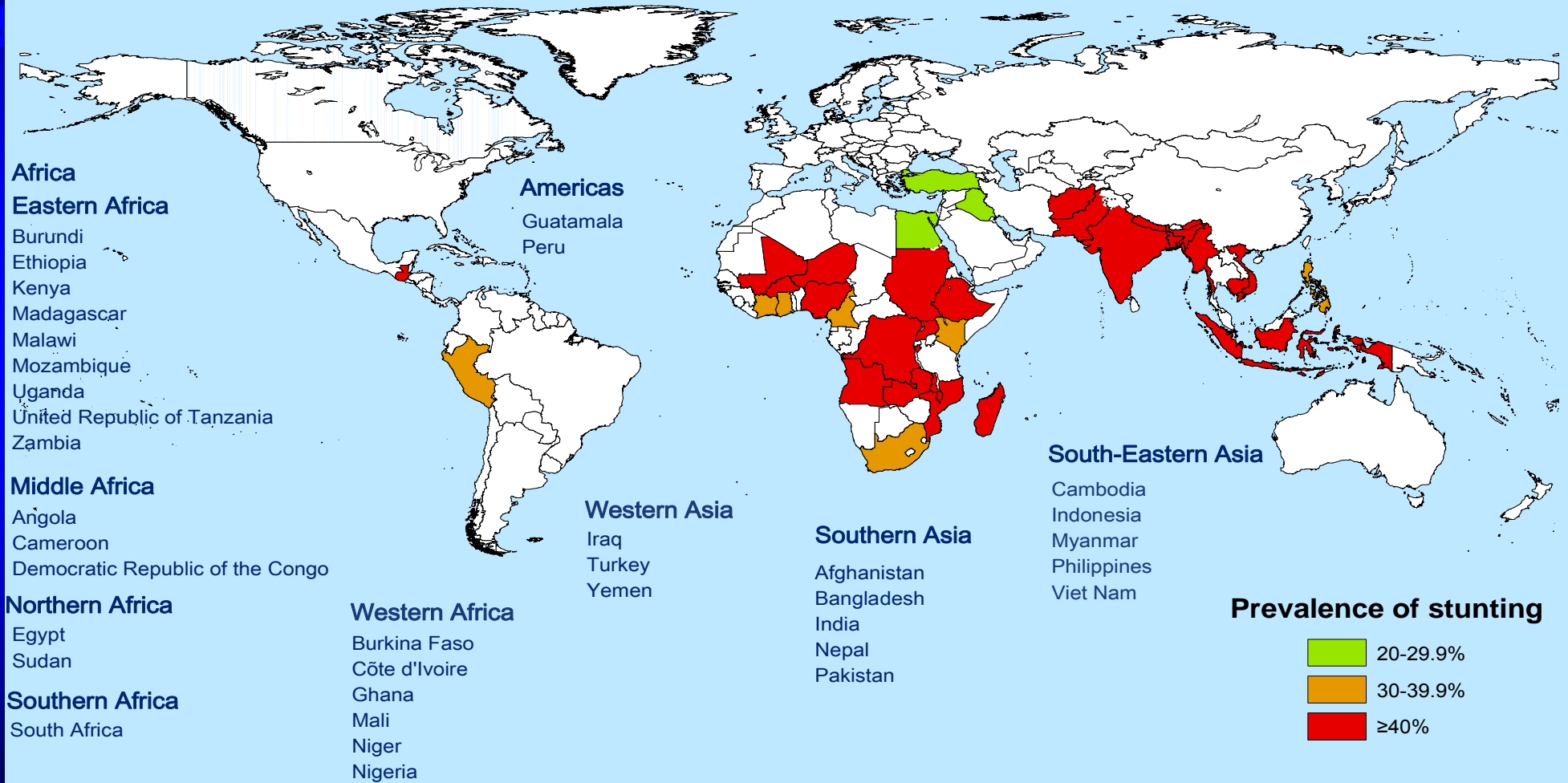
**Landscape Analysis on Countries' Readiness
to Accelerate Action to Reduce
Maternal and Child Undernutrition**

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Stunting - 36 high-burden countries



Landscape Analysis

Project Coordination Team:

- Department of Nutrition for Health & Development (NHD)
- Department of Child & Adolescents Health (CAH)
- Department of Making Pregnancy Safer (MPS)



- UN Standing Committee on Nutrition (SCN)

Partner Agency Group (chaired by UNICEF)

- Partner agency consultation in Geneva (Nov 2007)
- Partner agency follow-up consultation in NY (Dec 2007)

SCN Steering Committee

- Landscape Analysis as a standing agenda item for reporting and updating the progress



Ultimate Aim of the Landscape Analysis:

Lay the foundation to:

- **scale up effective nutrition action in the high-burden countries, and**
- **accelerate support to achieve the MDGs**



Specific objectives of the Landscape Analysis:

- 1. Identify and assess gaps, constraints and opportunities to scale up nutrition-related integrated actions in countries**
- 2. Develop a strategic action plan to guide accelerated action at country level based on potential international assistance**
- 3. Establish a baseline related to current status of nutrition and nutrition action in the high-burden countries**

Currently undertaking:

1. Desk review of 36 high-burden countries
2. Construction of on-line nutrition tracking system
3. Preparations for country assessment in 8 countries



Desk analysis

- ◆ Uses readily available sources of information
- ◆ Have 4 parts:
 1. Nature and distribution of nutrition problems
 2. Commitment
 3. Capacity
 4. Meta-indicator

} "Readiness"

General conditions and contextual factors that will affect the commitment and capacity to implement nutrition actions

Progress toward achieving MDG1 – 3 Groups

Rate of child underweight

Using Average Annual Reduction Rate (AARR)

On track: AARR greater than 2.6%

Insufficient rate: AARR 0.6 - 2.5%

No progress: AARR less than 0.5%

A faint world map is visible in the background of the slide, showing the continents in a light blue color against the dark blue background.

36 high-burden countries' progress towards achieving MDG1

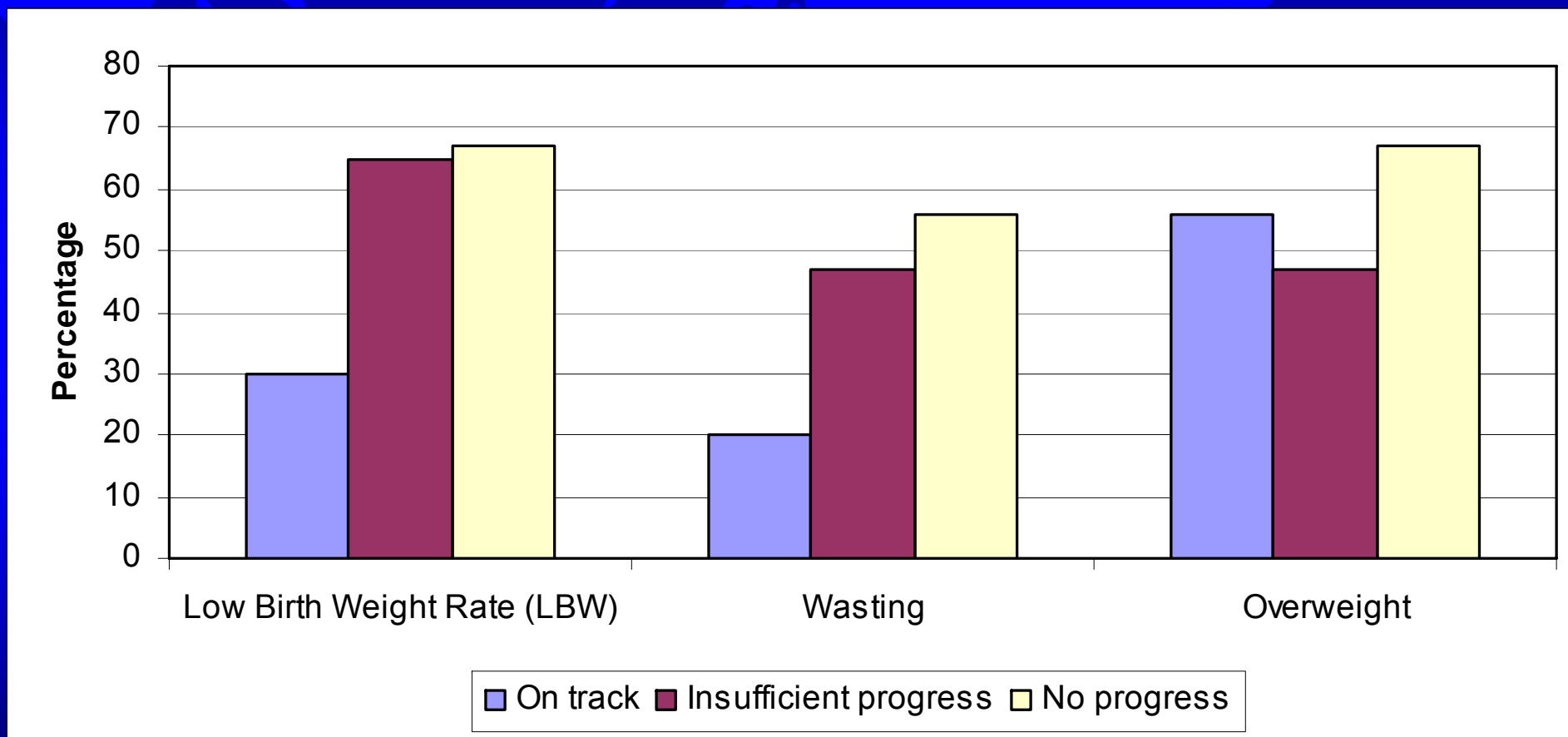
On track:	10 countries (28%)
Insufficient rate:	17 countries (47%)
No progress:	9 countries (25%)



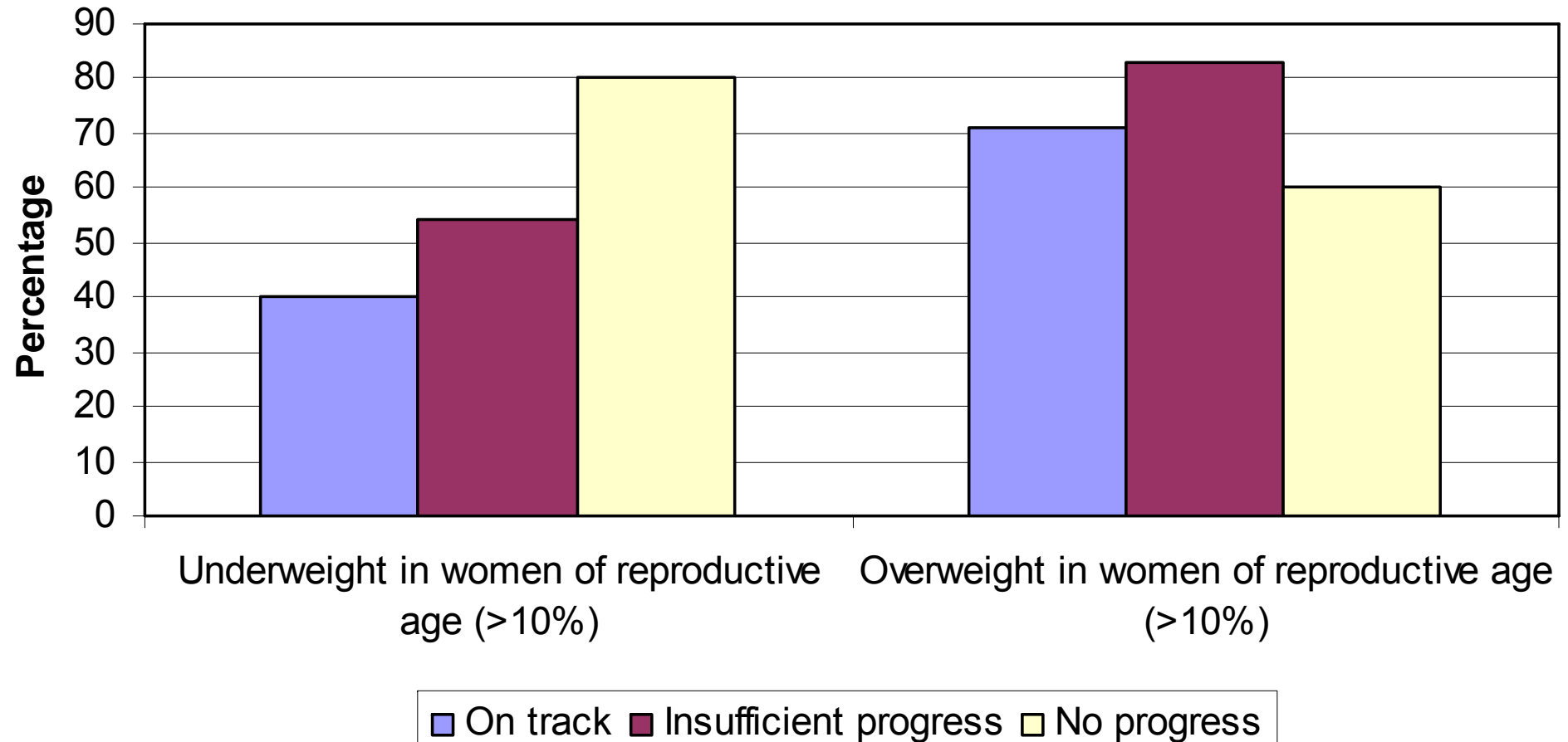
Nature, extent and distribution of nutrition problems

- ◆ Underweight
- ◆ Stunting
- ◆ Wasting
- ◆ Overweight
- ◆ LBW
- ◆ Adult female BMI
- ◆ Anaemia
- ◆ Vitamin A deficiency
- ◆ Iodine deficiency

Child Malnutrition



Maternal Malnutrition

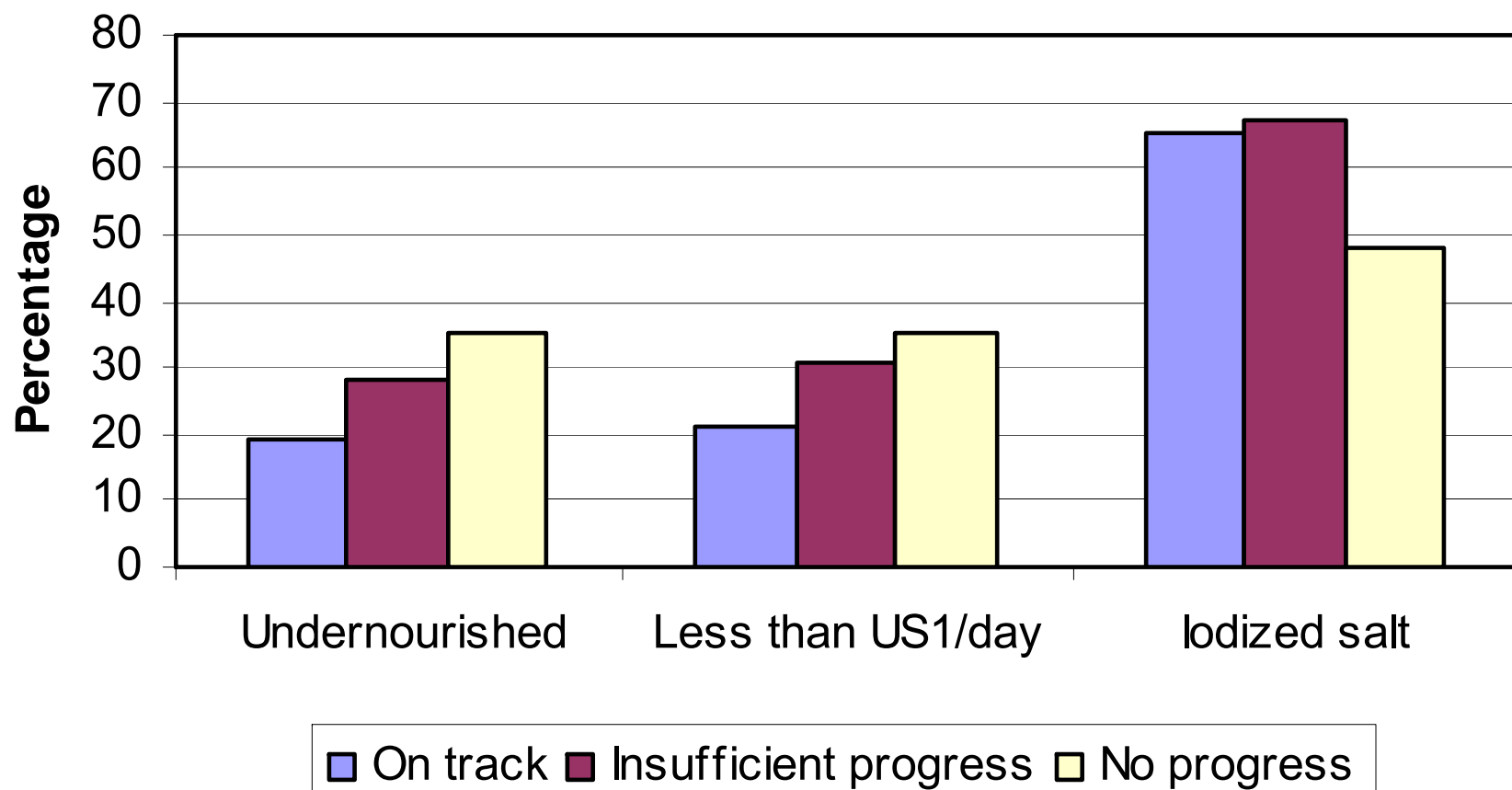


Micronutrient Deficiencies

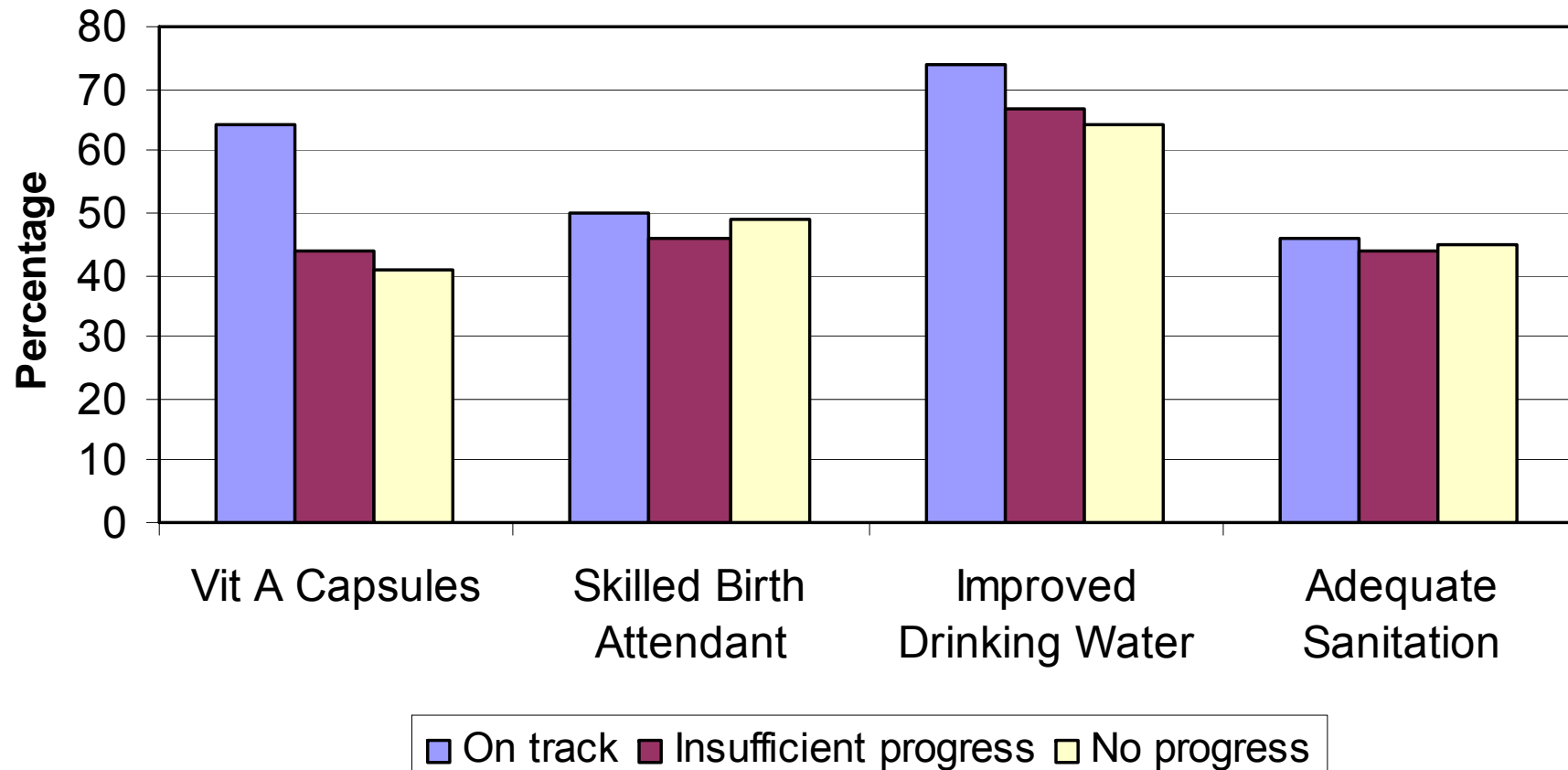
- Child anaemia of public health concern (>20%) in all 36 countries
- Child vitamin A deficiency also affects all 36 countries
- Anaemia in women of reproductive age of concern (>20%) in all countries
- 18 of countries have no iodine deficiency in school children
(*no apparent correlation with MDG 1 status*)



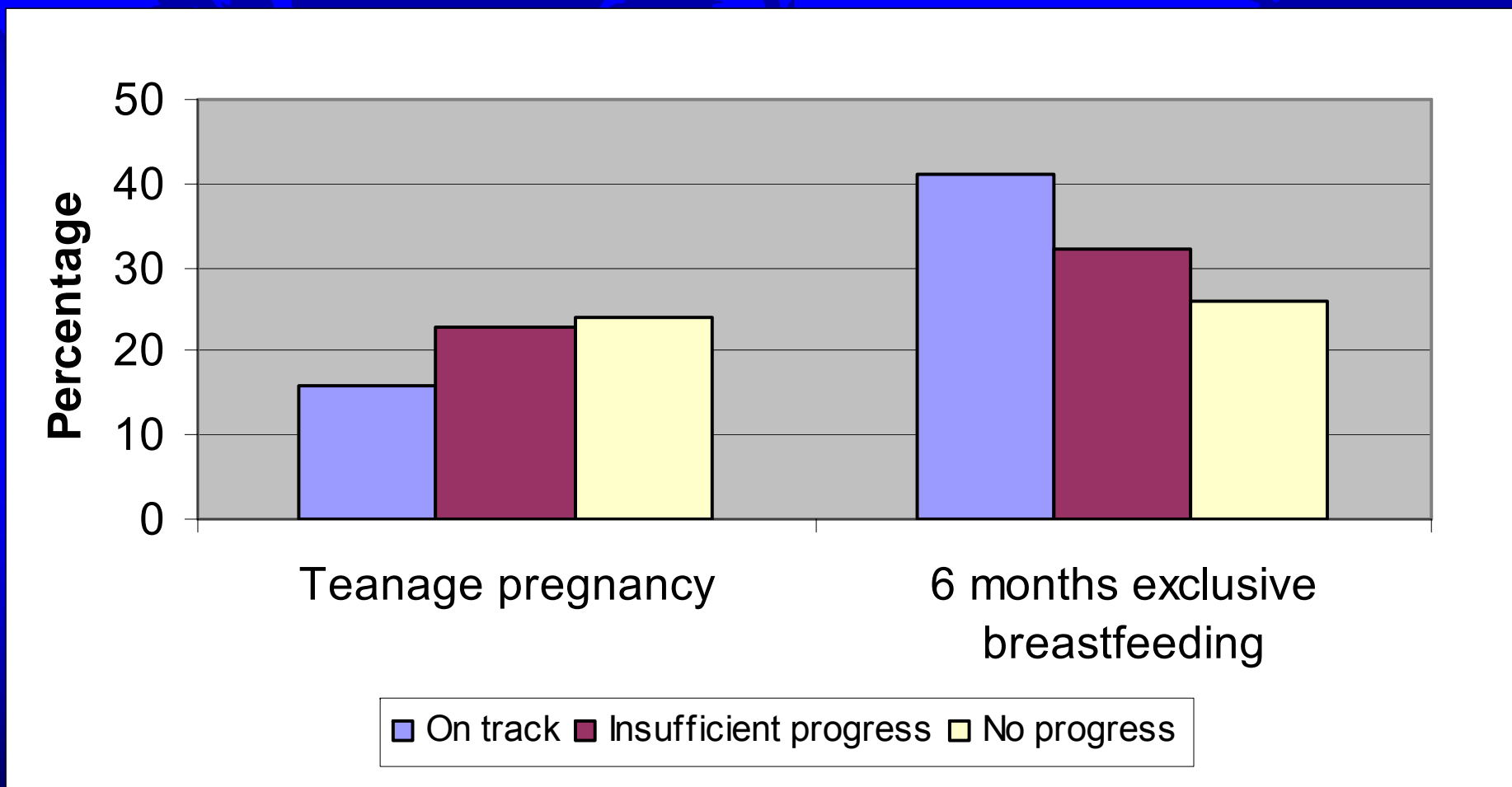
Food indicators



Health Indicators



Care Indicators



Commitment (examples of indicators)

Resources and legislation

1. *Prioritization of nutrition:*
 - Nutrition being part of PRSP or UNDAF
 - Implementation of the Code on breast-milk substitute
2. *Public health expenditure (percentage of GDP)*
 - Percentage of government expenditure for health
 - Per capita government and total expenditure on health

Policy and regulative environment

3. *Nutrition governance:*
 - Existence / budget for national nutrition plan or policy
 - Existence of budget line for nutrition in health budget
 - Existence of dietary guidelines or nutrition surveillance



UNDAF (UN Development Assistance Frameworks)

Countries were classified into 3 level of priority for nutrition and compared w/ progress in achieving MDG1:

- ◆ No relationship between nutrition priority level of UNDAF and progress of achieving MDG1

Inclusions of Lancet interventions:

- ◆ Micronutrients (42%)
- ◆ IYCF (39%)
- ◆ Treatment of SAM (27%)

Combination of 3 Lancet interventions:

- ◆ 11 countries (33%) had 2 or 3
- ◆ 30% had none covered



Nutrition governance

Having single element of nutrition governance

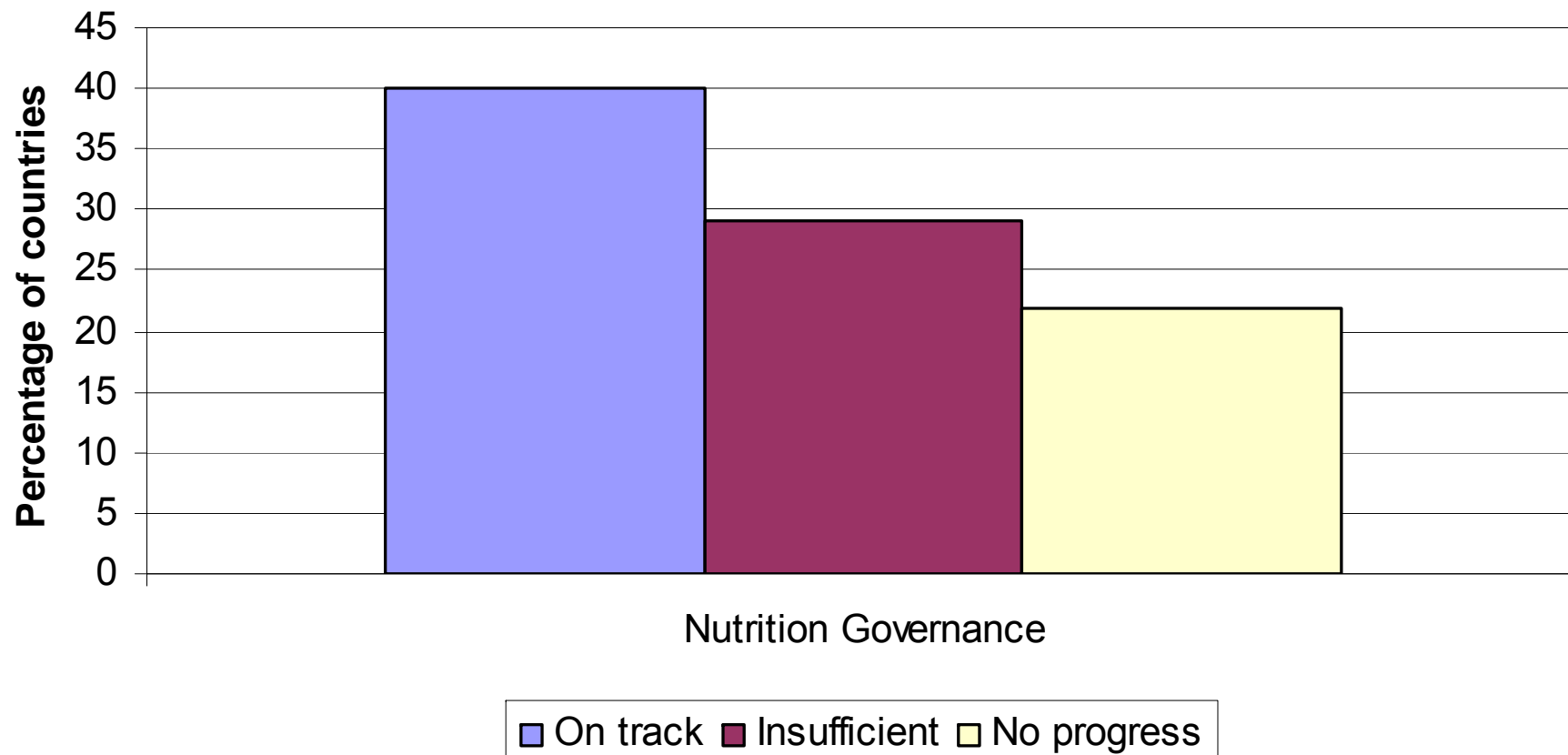


No significant relationship w/ progress of achieving MDG1, except:

- ◆ Existence of adopted national nutrition plan, policy/strategy and being part of development plan
 - on track: 60%
 - insufficient: 29%
 - no progress: 33%

- ◆ Implementation of regular nutrition surveillance
 - on track: 50%
 - insufficient: 35%
 - no progress: 22%

Nutrition governance combined



Meta indicators

1. Governance

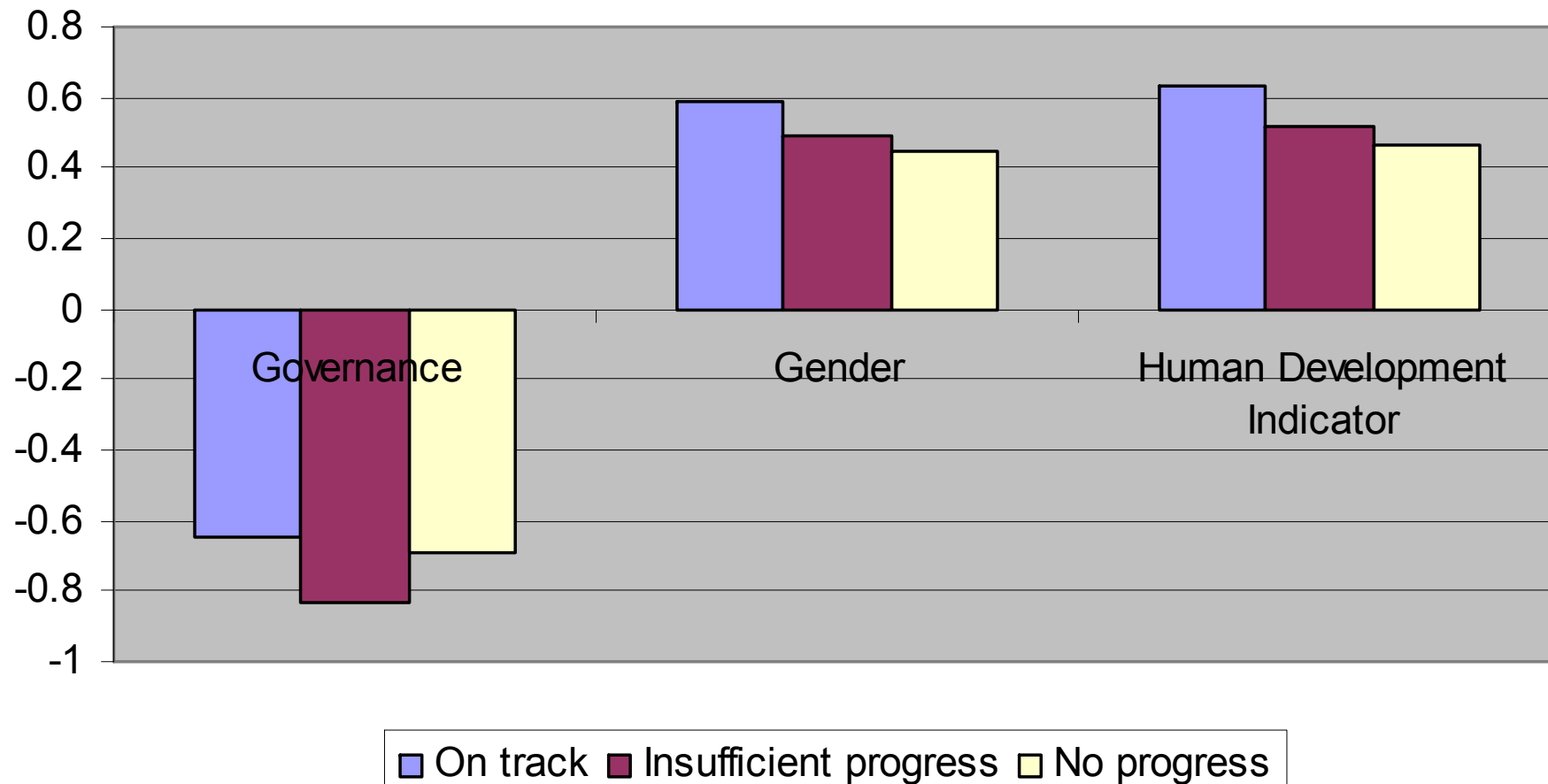
- *Political Stability and Absence of Violence*
- *Government Effectiveness and Regulatory Quality*
- *Rule of Law and Control of Corruption*

2. Gender development Indicator

3. Human development indicator

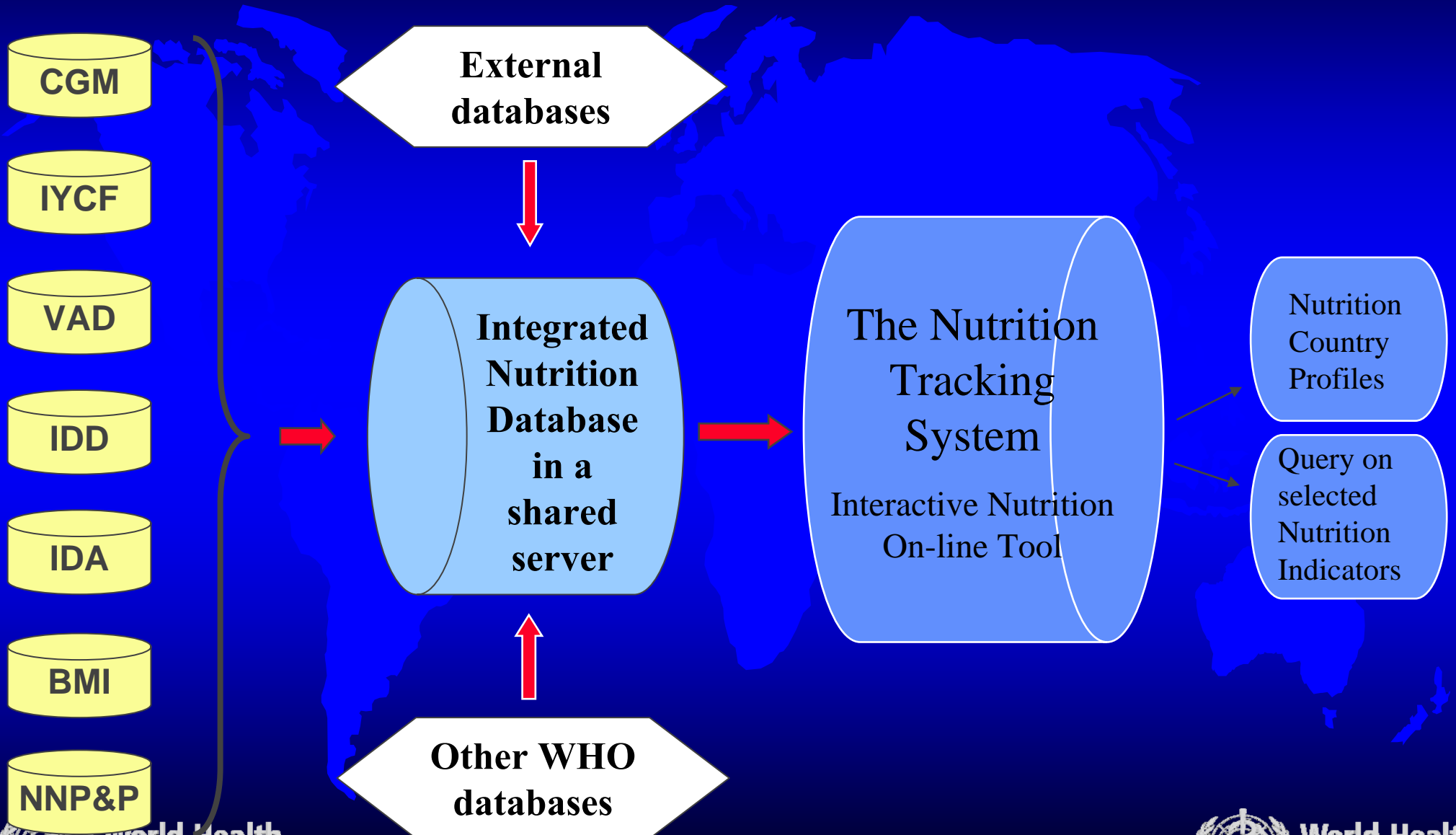


META Indicators



Nutrition Tracking System

based on 7 NHD databases plus internal and external databases



The Nutrition Tracking System Country Profiles

World Health Organization

Nutrition Tracking System (NTS) Country Profile

Cambodia

What are the current status of nutrition related indicators currently available within the Nutrition Tracking System? See below.

Nature, Extent and Distribution of Nutrition Problems

UNDERWEIGHT (WAZ<-2)

YEAR	CHILDREN < 5 YRS (%)	SOURCE
1996	42.6	S
2000	39.5	S
2005	20.4	S
2006	18.4	S

PROPORTION OF CHILDREN LESS THAN EXCLUSIVELY BREASTFED

YEAR	CHILDREN < 6 MONTHS (%)	SOURCE
2005	60.0	S
2000	11.4	S
1998	6.0	S

COMPLEMENTARY FEEDING PROPORTION OF INFANTS WHO RECEIVE SOLID, SEMI SOLID, OR SOFT FOODS

YEAR	CHILDREN 6-9 MONTHS (%)	SOURCE
2005	81.7	S
2000	76.6	S

% OF CHILDREN WITH DIARRHOEA WHO RECEIVED PERT AND CONTINUED FEEDING

YEAR	%	SOURCE
2005	59.0	S

- Key indicator summaries in different categories
- Link to original source – surveillance methodology

- Summary picture of the state of nutrition in a chosen country

- Next Steps**
- Further filter most important indicators to form a more succinct summary
 - Improve layout and design to facilitate understanding

In-depth country assessment

- ◆ 8 countries

(Burkina Faso, Cambodia, Ghana, Guatemala, Madagascar, Peru, South Africa, Viet Nam)

- ◆ Preparations for country assessment

- Mapping of key stakeholders
- Mapping of existing, on-going nutrition-related programmes, projects, activities
- Reviewing draft country assessment tools
- Setting up the timing of country assessment

