Nutrition resilience during crises

Strengthening systems to safeguard the nutrition of vulnerable children and women

SUMMARY BRIEF OF THE FORTHCOMING GLOBAL RESILIENCE REPORT | October 2023

The polycrisis’ devastating impact on nutrition

Over the past three years, millions of vulnerable people have suffered from the harsh impacts of a devastating polycrisis—largely caused by the effects of the COVID-19 pandemic, climatic and economic crises, and new and protracted conflicts that have deepened food and nutrition insecurity. Beyond the direct health and economic impacts on individuals, these crises disrupted the key systems—food, health, education, water and sanitation, and social protection—that support access to nutritious foods, essential nutrition services, and positive feeding and care practices for children and women.

This brief provides a summary of an upcoming report that describes the impact of the polycrisis on nutrition outcomes, nutritious diets, nutrition-related services, and feeding and care practices. It also highlights the experiences of different countries, offering valuable lessons regarding the resilience of systems to safeguard nutrition in times of crisis. Lastly, the report builds upon these findings and lessons learned to propose policy and programmatic recommendations for strengthening the nutrition resilience of systems, before, during, and after a crisis.
Despite the lack of available and comparable data, there are indications that acute malnutrition rose significantly among women and children in the countries most affected by the food and nutrition crisis and that the polycrisis had a detrimental impact on food and nutrition security in low- and middle-income countries.

The report finds that despite the immense challenges and disruptions, many countries have demonstrated their ability to adapt, absorb and transform their systems in response to the polycrisis, and in doing so, were able to blunt its effect.

We captured how some governments strengthened and adapted food, health, water and sanitation, education, and social protection systems to maintain and even expand critical services to protect nutrition among the most vulnerable groups. Countries that were already leveraging multiple systems to deliver critical nutrition services were better equipped to adapt their response to the polycrisis and maintain and scale up services. We also describe how community-based actions were leveraged to build trust, tackle misconceptions, and bring services closer to where vulnerable women and children live. Moreover, our analysis of country experiences highlighted how the use of innovative digital technologies and strong coordination platforms made systems more adaptable in the face of crises.

**NUTRITION RESILIENCE**

The capacities that enable multiple systems—food, health, water and sanitation, education, and social protection—to prepare for, respond to, and recover from crises in ways that safeguard diets, services and practices and contribute to equitable nutrition outcomes, with a focus on the most vulnerable.
LESSONS LEARNED
Systems demonstrated capacities for nutrition resilience

We analysed the experiences of several countries, including the Bahamas, Brazil, Cambodia, Colombia, Ethiopia, Ghana, India, Indonesia, Kenya, Liberia, Nigeria, Peru, Rwanda, Sierra Leone and South Africa regarding the absorptive, adaptive, and transformative resilience capacities of the systems that safeguard nutrition during the polycrisis. A synthesis of lessons learned is summarized below:

LESSON 1
All systems have the potential to be resilient in safeguarding nutrition during a crisis
For all five systems there are country examples of resilience in safeguarding nutrition during the polycrisis. For example, many governments extended financial support measures to strengthen the resilience capacities of the food system; health systems delivering key nutrition services through routine health services were able to adapt to the pandemic mitigation measures; education systems pivoted to alternative delivery platforms for delivering school meals; and social protection systems demonstrated agility at scale during the pandemic.

LESSON 2
Countries with the flexibility to leverage nutrition interventions across multiple systems were well placed to be able to safeguard nutrition in the context of the polycrisis
For example, in Ghana, the health and education systems worked together to deliver iron-folic acid supplements to adolescents. In Peru, coordinated efforts between the food system and social protection system were made to scale-up fortified food production and distribution to meet the growing demand for social assistance.

LESSON 3
A focus on reaching the most vulnerable groups, particularly through the social protection system, was an important factor in safeguarding nutrition
To support women in South Africa, the government expanded the eligibility criteria for its Child Support Grant, benefitting an additional seven million people, nearly all of them women, who received child support. School meal programmes faced immense challenges during the pandemic with the closure of schools around the world. Many countries, such as the Bahamas, Brazil, Cambodia and Kenya, pivoted to using alternative delivery platforms.

LESSON 4
Expanding and strengthening local capacities and empowering communities were critical strategies for safeguarding nutrition during the polycrisis
In Indonesia, the health system adapted its programme for screening and early detection of child wasting from a community health worker to a family-centred approach. Community health workers trained caregivers to detect wasting in children at home using colour-coded measuring tapes.

LESSON 5
Shared management information systems, innovative technologies, collaborative platforms, and swift decision-making were enabling factors that made systems more resilient in safeguarding nutrition
In South Africa, the application process for social protection was digitized to manage the massive influx of applicants and expand the number of people whose livelihoods or incomes were affected by the COVID-19 pandemic.
RECOMMENDED POLICY AND PROGRAMME ACTIONS

Drawing from these lessons, we offer the following recommendations for policy and programme actions to strengthen the nutrition resilience of systems, before, during, and after a crisis:

1. Put in place policies and programmes that enable all systems to be adaptive, absorptive, and transformative in the face of future shocks and crises.

2. Increase the resilience capacity of key systems—especially the food, health, and social protection systems—to maximize the prevention of malnutrition in countries most vulnerable to crises.

3. Leverage investments made during humanitarian crises to ensure that humanitarian and development efforts offer a continuum of services.

4. Strengthen community capacities and empower and engage with communities as participants and contributors to the nutrition resilience of systems.

5. Strengthen data collection and build robust information systems to measure changes in access to nutrition foods, essential services, and positive care practices before and after shocks.

Conclusion

Amid the devastating polycrisis that has disproportionately impacted the most vulnerable and left the world grappling to recover, there are important stories of resilience. Many countries have demonstrated the capacity of their systems to absorb, adapt, and transform in response to shocks in ways that have safeguarded access to nutritious diets, essential nutrition services, and positive care and feeding practices for the most vulnerable families.

These achievements were not accidental; they were the result of purposeful investments in strengthening programmes, policies, and synergies between multiple systems to make them better equipped and more accountable for nutrition results. In reflecting on and learning from these experiences, governments and their partners can seize this opportunity to build more sustainable systems and a healthy and equitable future for children and families everywhere.

Acknowledgments

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