



Preserving progress on nutrition in time of crisis: What must health systems do?

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Why invest in improving nutrition?



Undernutrition underpins 45% of child deaths globally,





What does it take to deliver impact on nutrition?

- Reach the first 1000 days
- Embed high impact nutrition interventions
- Engage client populations to create demand
- Address underlying social determinants
- **But:**
 - Missed opportunities abound in health systems
 - Global movements to scale up effective nutrition interventions and achieve universal health coverage have not been connected to help each realise their full potential



Missed opportunities to address nutrition via health systems globally

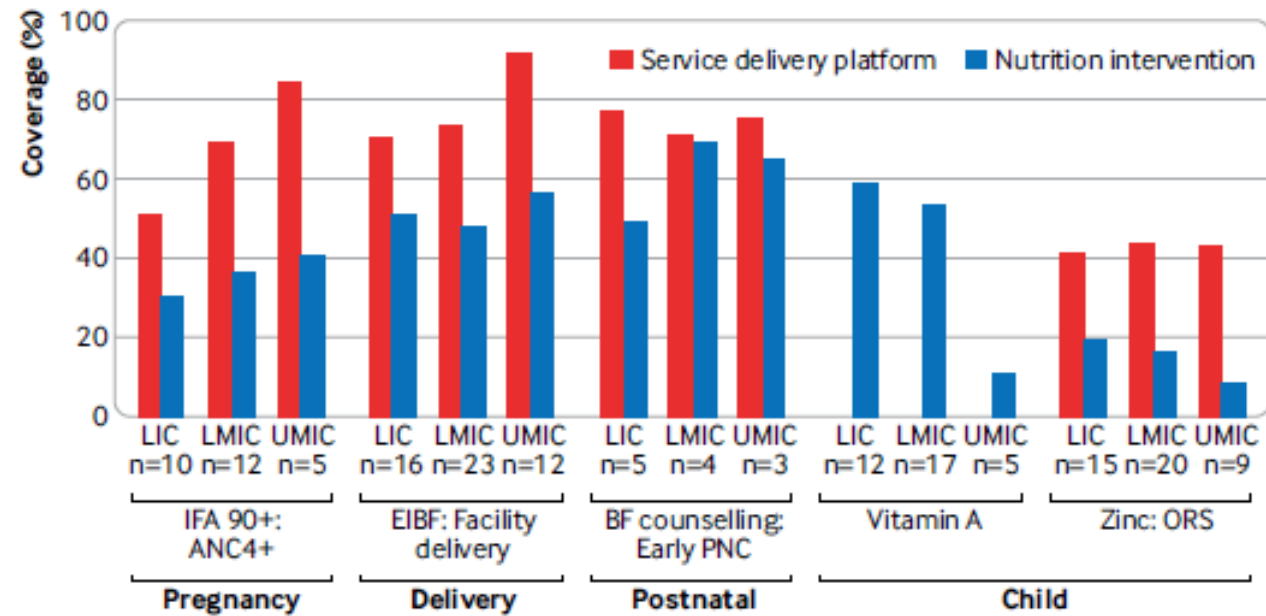


Fig 1 | Pooled estimates of coverage of nutrition interventions and their respective health service delivery platforms by World Bank income group among countries with nationally representative Demographic and Health or Multiple Indicator Cluster household surveys between 2013 and 2018. ANC=antenatal care; BF=breastfeeding; EIBF=early initiation of breastfeeding; IFA=iron folic acid; LIC=low income countries, LMIC=lower middle income countries; n=number of countries contributing to the pooled estimate; ORS=oral rehydration solution; PNC=postnatal care; UMIC=upper middle income countries



In COVID-19 in India, programmatic changes have been made to health and nutrition service delivery around the world



Center to facility based service
7 states



Center based to home delivery
13 states



8 states



Growth monitoring suspended
13 states

Frontline worker roles expanded to support COVID-19 prevention activities
Mobile technology used to reach frontline workers and beneficiaries



Modeling estimates suggest that reductions in service delivery for core health and nutrition services, together with economic challenges that increase child wasting will result in huge costs

- **ROBERTON paper – mortality estimates**



What are some examples of critical health systems opportunities that should not be missed for nutrition

Pregnancy

- Counseling
- Weight gain monitoring
- Micronutrients

Preventive child health

- Counseling and support for infant feeding
- Growth assessments
- Micronutrients
- Referrals to malnutrition treatment

Curative child health

- Growth assessments
- Counseling
- Referrals to malnutrition treatment

Across all adult contacts, screening for NCDs, dietary counseling



Essential nutrition services cannot take a backseat as health systems services are restored

- Mothers and babies not reached today with essential nutrition services = human capital lost
- Health systems already reach families in the first 1000 days
- Service protocols, even in COVID-19, must include actions to address critical nutrition actions so opportunity gaps are reduced
- Data systems to track service delivery must also integrate nutrition indicators



Photo: Shawn Sebastian for IFPRI