

## **The SCN Four Country Case Studies**

**Integrating food and nutrition interventions in national development plans in order to accelerate the achievement of the MDGs in the context of realizing the human right to adequate food**

### **A Synthesis of Findings and Recommendations**

*SCN Consultant Team: Roger Shrimpton, Uwe Kracht, Elisabetta Recine, Flavio Valente*

## **Executive Summary**

In preparation for its 32<sup>nd</sup> Session the SCN has carried out Country Case Studies (CCS) in Brazil, Bolivia, Angola and Mozambique looking at how adequately food and nutrition programmes are included in national development plans in order to help meet the Millennium Development Goals (MDGs) and how to strengthen them in the context of realizing the Human Right to Adequate Food (HRAF). The objectives of the CCS exercise were directed at both process and outcome, with the intention not to just arrive at a diagnosis of the situation in each country, but also to create a capacity to better understand the issues involved among a group of national development actors. A workshop was held in Brazil in August to launch the process and another one in November to review the results and experience gained. This report is a synthesis of the lessons learned by the consultant team in carrying out the CCS exercise.

In each country a three step process was followed, consisting of assessment; analysis and recommendations for action. The assessment was done by a small core group of nutrition professionals that collected and assembled all the relevant information ready for analysis. The second stage of analysis was carried out by a wider group of development actors through participatory group work facilitated by the core group. The analysis focussed on how to strengthen food and nutrition content of national development and poverty reduction plans aimed at achieving the MDGs. The wider group of development actors that performed the analysis and agreed on the recommendations in the CCSs were the ones involved in managing and delivering those programmes with food and nutrition capable of contributing to the achievement of the MDGs, as well as members of civil society that are involved in or affected by the issues concerned.

In order to achieve a common understanding among the broader set of development actors a series of information material and lectures were shared during the inter-sectoral analysis workshop. This common understanding covered the importance of nutrition for achieving the MDGs, the concept of food and nutrition security (which includes the three elements: availability, access, and utilization), the importance of protecting foetal and infant growth in the context of the life cycle, and examples of the terms respect, protect and fulfil (facilitate, provide), used to describe governments' obligations for realizing the right to adequate food.

The assessments revealed that there is an enormous amount of "noise" around nearly all the key food and nutrition indicators. The terms hunger and malnutrition are not always used with the same meaning by different actors. Consequently the key messages often lack consistency and are contradictory. The focus that the first MDG puts on hunger as defined by adequacy of energy intake and malnutrition as defined by child underweight, is counter productive in this sense, since these terms exclude hidden hunger which affects a far greater proportion of the population, and obfuscates the problem of overweight and obesity, which in all four case study countries increasingly co-exists with stunting, especially in poor urban populations. Food and nutrition professionals need to re-appropriate the words "hunger" and "malnutrition" and try to re-educate the rest of the development community to use the indicators appropriately. The right to adequate food must be equated with being free from hunger and malnutrition (including overt and hidden hunger and undernutrition and overnutrition). In all CCSs the problem definition was presented in terms of the proportion of the population whose needs were being met, not as the proportion of the population whose right to adequate food was being violated.

There is also a lack of common understanding across food and nutrition in development actors around issues of vulnerability. Discussions of vulnerable tended to concentrate on population groups that are socially and economically vulnerable, with little reference to biological vulnerability. There is also little common understanding of the importance of maternal nutritional status and its links to suboptimal foetal growth and development and henceforth the potential for stunting, for impairing child development potential, for reducing adult earning capacity, or for increasing the risks of obesity and chronic disease later in the life cycle. There was no notion in any of the Case Studies that the pursuit of food security (increased energy intakes as per the MDG on hunger), was likely to generate increased risks of chronic degenerative diseases in the future unless due attention was paid to nutrition security (improved maternal nutrition and infant feeding) and to diet quality not just quantity.

The capacity building objectives of the country case study exercise were only partially met. The participatory analysis did help a cross sectoral group of food and nutrition in development actors in each country to better understand the importance of food and nutrition interventions for achieving the MDGs. However it did not clarify what food and nutrition inputs are. In fact, on the contrary, the organization of all the food and nutrition inputs in webs of causality related to the MDGs made it harder to categorize and classify these food and nutrition inputs. Despite these limitations the exercise was still considered to be extremely useful for revealing the gaps, showing areas of overlap and similarity and for better understanding the general lack of coordination between food security and nutrition security activities. The exploration of the human rights aspects of food and nutrition programmes served more for participants to become familiar with the new concepts, and to identify the need for further more in-depth work, than to generate a clear understanding of whether such programmes contributed to respecting, protecting, and/or fulfilling the right to adequate food and to be free from hunger and malnutrition.

The case study exercise reveals that while poverty reduction and MDG achievement are high priority in all four countries, food and nutrition interventions to reduce hunger and malnutrition are not sufficiently developed in the national development plans for achieving the MDGs. There is a generalized lack of appreciation of the synergies to be gained by

keeping food security and nutrition security actions linked together. Little or no priority is given in any of the national development plans to the periods of high biological vulnerability, or for maternal nutrition in particular. The dominant "nutrition in development paradigm" operating in all countries seems to be that hunger and malnutrition are caused by poverty and ignorance, and that they will improve if livelihoods (economic growth and incomes) and education services improve. The idea that the proactive solution of hunger and malnutrition can be a platform for accelerating development is not commonly understood by the development actors. The exception perhaps is that of Brazil where the Zero Hunger programme, which has enormous political priority, has shown a demonstrable effect on reducing poverty which may have additional effects on hunger and malnutrition. The Zero Hunger programme could be considerably strengthened if its linkages with food and nutrition security related activities were better articulated, as part of a more decentralized approach. It would seem that a process of strengthening Zero Hunger has been sparked by the CCS exercise, and this process is ongoing.

In order to try to organize the various food and nutrition interventions in a logical fashion, a food and nutrition policy framework was developed, organized by life cycle stages. All four country case studies revealed that there was no common understanding about what programme components are needed to ensure the achievement of both food and nutrition security. In recognition that a policy is what it does not just what it plans to do, these policy areas were further exemplified as their lowest level activities, arranged in accordance with their importance at different stages of the life cycle. These direct food and nutrition interventions are those that should be developed by the state in addition to creating a propitious macroeconomic environment, in order not only that the right to adequate food and to be free from hunger and malnutrition can be realized, but also so that MDG achievement can be accelerated. The five food and nutrition intervention policy areas are: food production; food processing and fortification; food supplementation; micronutrient supplementation; and education for dietary change. These are the "direct" food and nutrition actions that are related to ensuring the adequate supply and consumption of energy and nutrients to the population. They are consistent with the "availability", "access" and "utilization" aspects of food and nutrition security used in all four case countries.

The institutional and legal frameworks for realizing the right to adequate food are best developed in Brazil, although it still has a long way to go for the right to be realized by all. Although all four countries are signatories to human rights covenants that include the right to food, and three of the case study countries have incorporated some provision related to the right to adequate food into their constitution, the actual respect, protection and fulfilment of this right remains elusive in all four countries. There is still a lack of clear definition and understanding of the content of this right at the national level, let alone clear justiciable provisions on the right to food as such at the district and community level. In order for the right to adequate food and freedom from malnutrition to be realized then the clear definition of what these entitlements are is a fundamental first step. The creation of a comprehensive food and nutrition policy framework as proposed in this synthesis should contribute towards this. Once these component parts are established, and responsibilities apportioned, the attribution of obligations should become an easier task.

The Brazilian experience with its National Food and Nutrition Council is one that the other three countries would do well to try to emulate, with recent events in Bolivia

opening a window of opportunity in this regard. Without such a high level national coordinating body it will be difficult to create a sufficiently articulated set of food and nutrition policies and programmes that will allow the realization of the right to adequate food (i.e. to be free from hunger and malnutrition in all their forms) as well as accelerating achievement of the MDGs.

The realization of the right to adequate food will also depend on how community participation and mobilization aspects of this overarching policy framework are orchestrated at municipal level through a decentralized approach. Without such community participation the coverage of any of the food and nutrition interventions will preclude that the poorest of the poor and the most socially discriminated are reached and their rights realized. In order for this to happen there is an urgent need to revisit the concepts of hunger and malnutrition and to establish a common vision and language across all relevant sectors and actors. As part of such a thrust the use of child growth measurements also needs to be revisited looking at both overnutrition and undernutrition aspects. In parallel a meaningful set of messages needs to be developed that are capable of mobilizing the poorest of the poor to participate in their own development and to realize the right to adequate food, including the institution of a recourse mechanism in case of violations of this right.

The challenge for the SCN and the CCS teams is how to build on the momentum gained and to sustain it. The process started by the CCSs has indeed been a very rich one, and is ongoing in all four countries. The international nature of the "SCN" presence has certainly raised the profile of food and nutrition issues, and the participatory capacity building approach adopted has opened up many new discussions and provoked much cross fertilization of ideas between the multisectoral groups that participated. The SCNs Strategic Plan outlines the intention of working through the UNDG to strengthen the capacity of UN country teams to be able to develop more adequate CCA and UNDAF processes. The idea then being that in this way there would be some further input into the development of the CDF and the PRSP processes, such that their food and nutrition content would be strengthened. However, this intention never materialized, and PRSPs continue to have poor food and nutrition components in most countries across the globe. The SCN needs to try to address these problems and seek ways to strengthen the food and nutrition content and conceptualization of these various UN assessment and planning exercises. Perhaps a start could be made with the four Case Study countries. The question is "how"?

The recommendations for priority follow-up actions of each of the four country studies provide a basis for exploring requirements and opportunities for SCN support at the country level. The Bolivian study, for example, identifies the formulation of a coherent rights-based food and nutrition policy and strategic implementation plan, in the context of consolidating the institutionalisation of the food and nutrition council, as a key priority. Mozambique and Angola have similar priorities, but the urgency of their cases is compounded by two factors: firstly the severity of their hunger and malnutrition problems; secondly their serious lack of human resources with training in food and nutrition sciences. Brazil's challenges are different and relate to how to promote the decentralization of food and nutrition security interventions, as well as the explicitation of the various dimensions of the HRAF, so that it becomes justiciable. How could the SCN, collectively and through its individual members support such undertakings if such requests were made? How could SCN working groups be effectively mobilized for that purpose? How can the SCN contribute to

maintaining and carrying forward the momentum generated by the CCS exercise? These are some of the key issues in the four countries, on which the symposium and subsequent working groups are invited to initiate further discussions, with the understanding that they will be carried forward after the 32<sup>nd</sup> session.

More generally, beyond the CCS examples described in this CCS synthesis, the UN agencies involved in promoting food and nutrition activities, both acting alone and together through the SCN, can take a lead role in trying to help governments create the overarching policy and legal frameworks for realizing the right to adequate food as described in this report. No single agency may have the breadth of expertise or mandate to cover such a broad spread of programme areas, while the SCN mandate may suite it to such a task. In addition a UN system wide communication and partnership building strategy is urgently needed to create a common vision among the UN agencies on how to promote the realization of the right to adequate food. In addition agreement needs to be brokered on the appropriate terminology and language to be used to describe a single set of monitoring and evaluation indicators for measuring progress towards the realization of the right to adequate food. The SCN and all of its constituents should seize upon the opportunity provided by the approval of the Voluntary Guidelines for realizing the right to adequate food and make their realization the backbone of future efforts to realize a world that is free from hunger and malnutrition.

Finally, the lack of adequate human resources trained in food and nutrition is perhaps the most serious problem encountered by the CCS exercise. The situation is a serious constraint in Mozambique and Angola. The training of food and nutrition development actors in order to help orchestrate and facilitate such an approach will require considerable attention in order to ensure that curricula used are not out of date and intrinsically clinical and dietetic in orientation. Even Brazil, despite having a large contingent of nutrition professional and many degree courses in food and nutrition related subjects, still does not have enough public nutrition professionals working in the system. The SCN should explore ways through its membership to contribute to the continued capacity building efforts in all four of the case study countries, with emphasis on capacity building in public health nutrition and in realizing the right to adequate food.