



Food and Agriculture Organization
of the United Nations

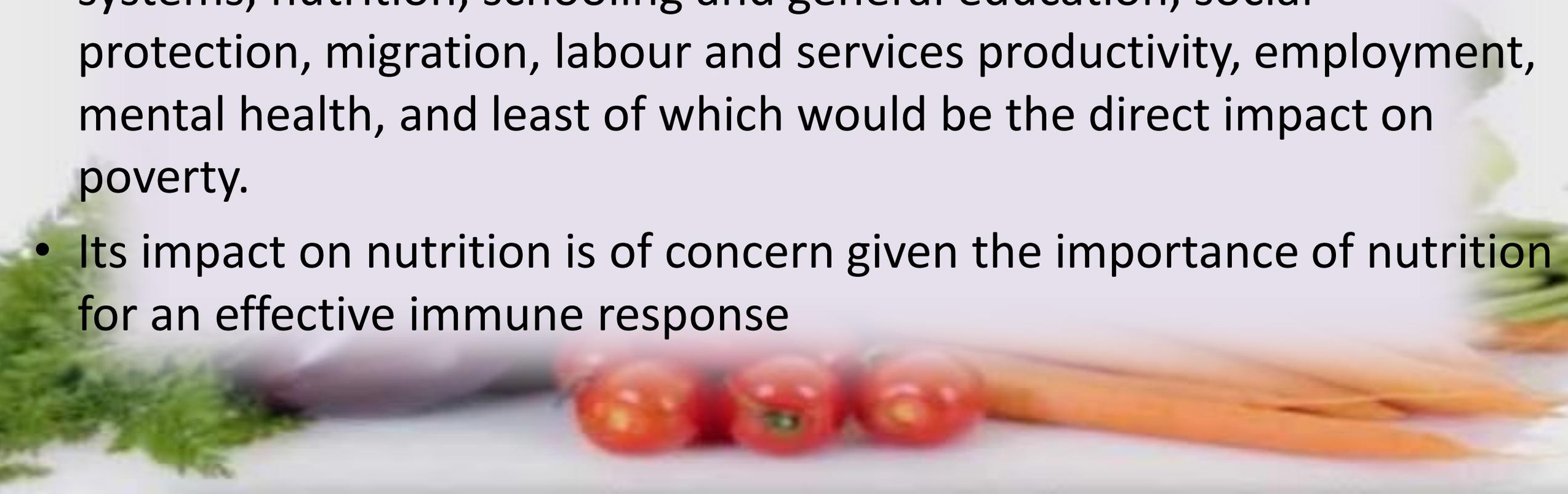
COVID-19 and Nutrition Nexus

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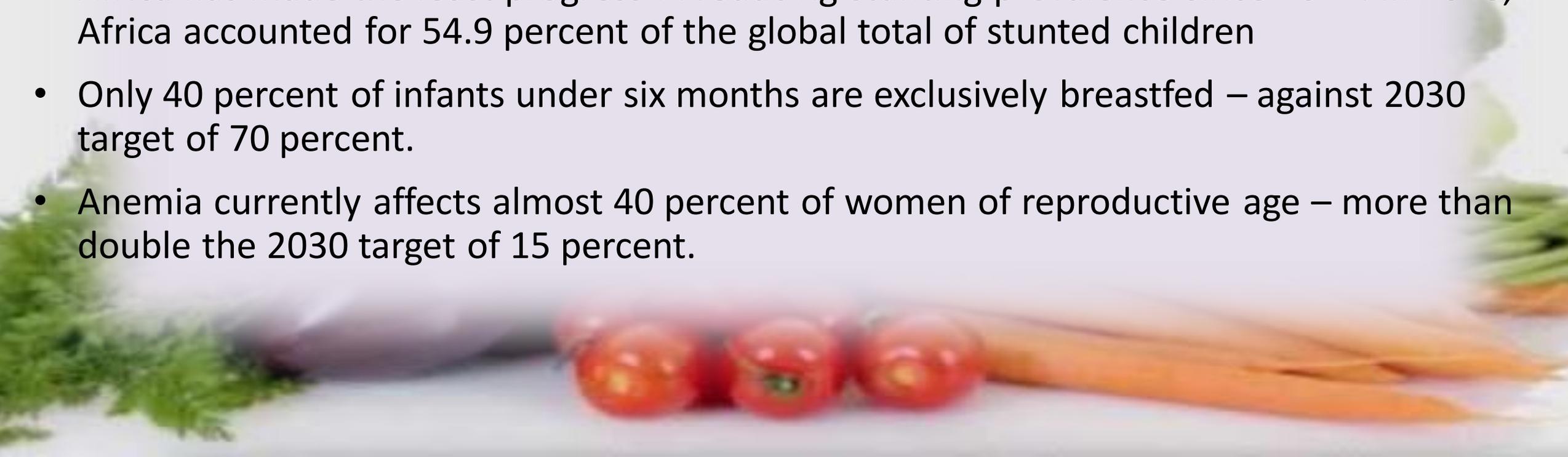
Introduction

- COVID-19 is not just a health nor medical issue, but a pandemic with a grave multiplicity of resultant negative outcomes for various sectors of the economy - including agriculture and agribusiness, food systems, nutrition, schooling and general education, social protection, migration, labour and services productivity, employment, mental health, and least of which would be the direct impact on poverty.
- Its impact on nutrition is of concern given the importance of nutrition for an effective immune response

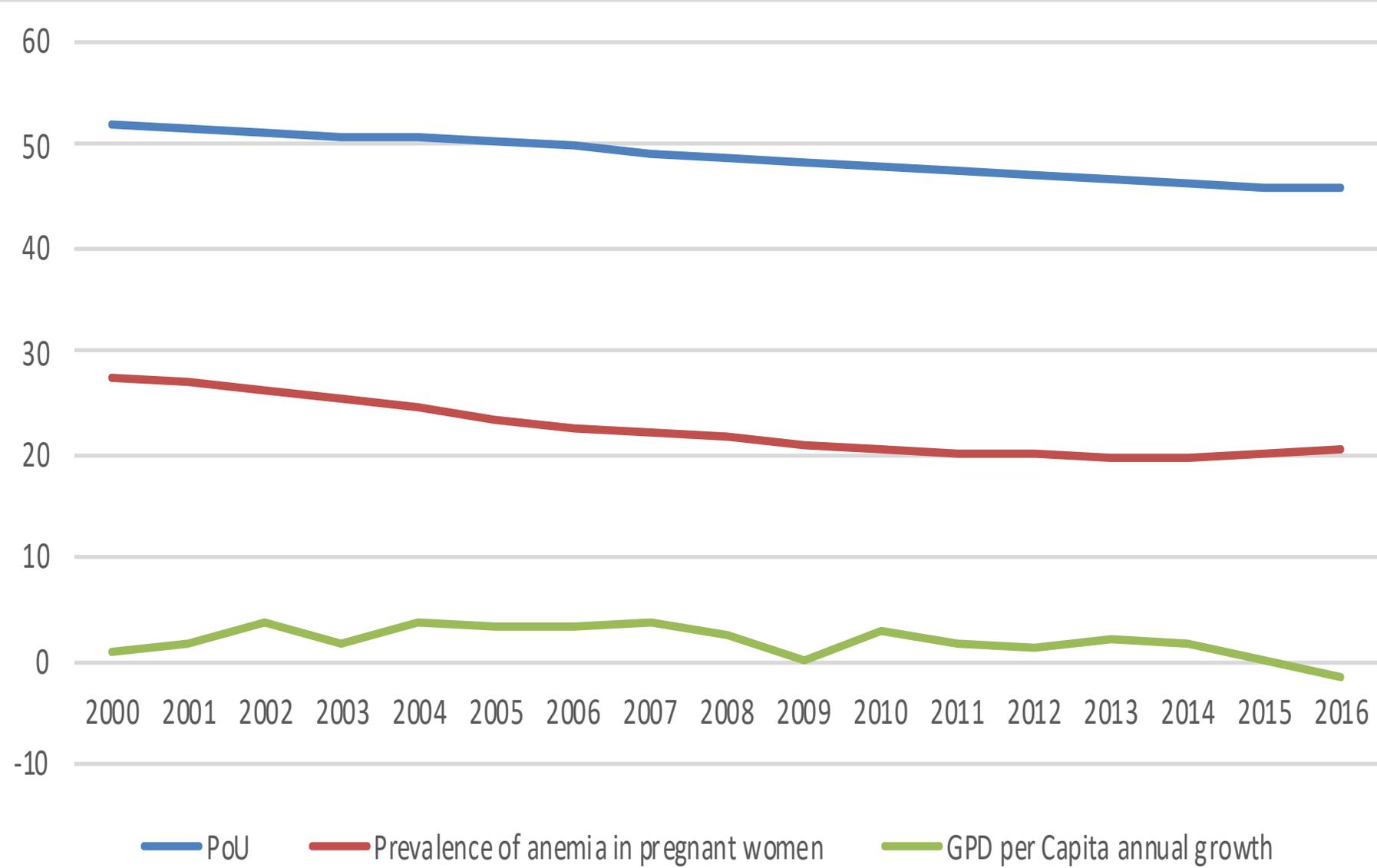


The Statistics

- There are 239 million in sub-Saharan Africa who are undernourished.
- According to the FAO Global Information and Early Warning System, 34 out of the 44 countries currently in need of food external assistance for food are in Africa.
- Africa has the highest level of food insecurity of 27% using the FIES
- Africa has made the least progress in reducing stunting prevalence since 2012. In 2018, Africa accounted for 54.9 percent of the global total of stunted children
- Only 40 percent of infants under six months are exclusively breastfed – against 2030 target of 70 percent.
- Anemia currently affects almost 40 percent of women of reproductive age – more than double the 2030 target of 15 percent.



SOME ECONOMIC AND NUTRITION TRENDS



COVID-19 Prevention and Malnutrition

COVID outbreak and emergency measures by countries

- Restricted human movements and government-imposed “lockdowns” and closure of non-essential services and schools – school feeding affected immediately and directly
- Slow economic activities

Spill over to food markets

- Disruption in production activities
- Informal trade disruptions
- Increase food prices
- Reduced household income

Increasing levels of malnutrition

- Household food insecurity and malnutrition – both in urban and rural households



Nutrition and Economic Growth Relationship

- Regression analysis on the relationship between GDP growth rates and anemia in pregnant women shows that a 1% growth in annual GDP per capita reduces anemia by 0.4 %. Likewise, a 1% growth in GDP per capita reduces PoU by about 0.1 %, ceteris paribus. There is a rather weak multiplier effect of GDP per capital growth rate and reduction of undernourishment.
- This is mainly because of issues to do with income distribution as tracked using the GINI coefficient for example. Another reason is the low implementation of inclusive pro-poor policies. – **Direct interventions are therefore more effective in fighting malnutrition at household level**
- Despite the weak GDP pass through to reducing undernourishment, a recession to at least negative 1 % will still add about 30 million hungry people per annum in SSA. This number will be higher the deeper the recession in terms of magnitude and duration.

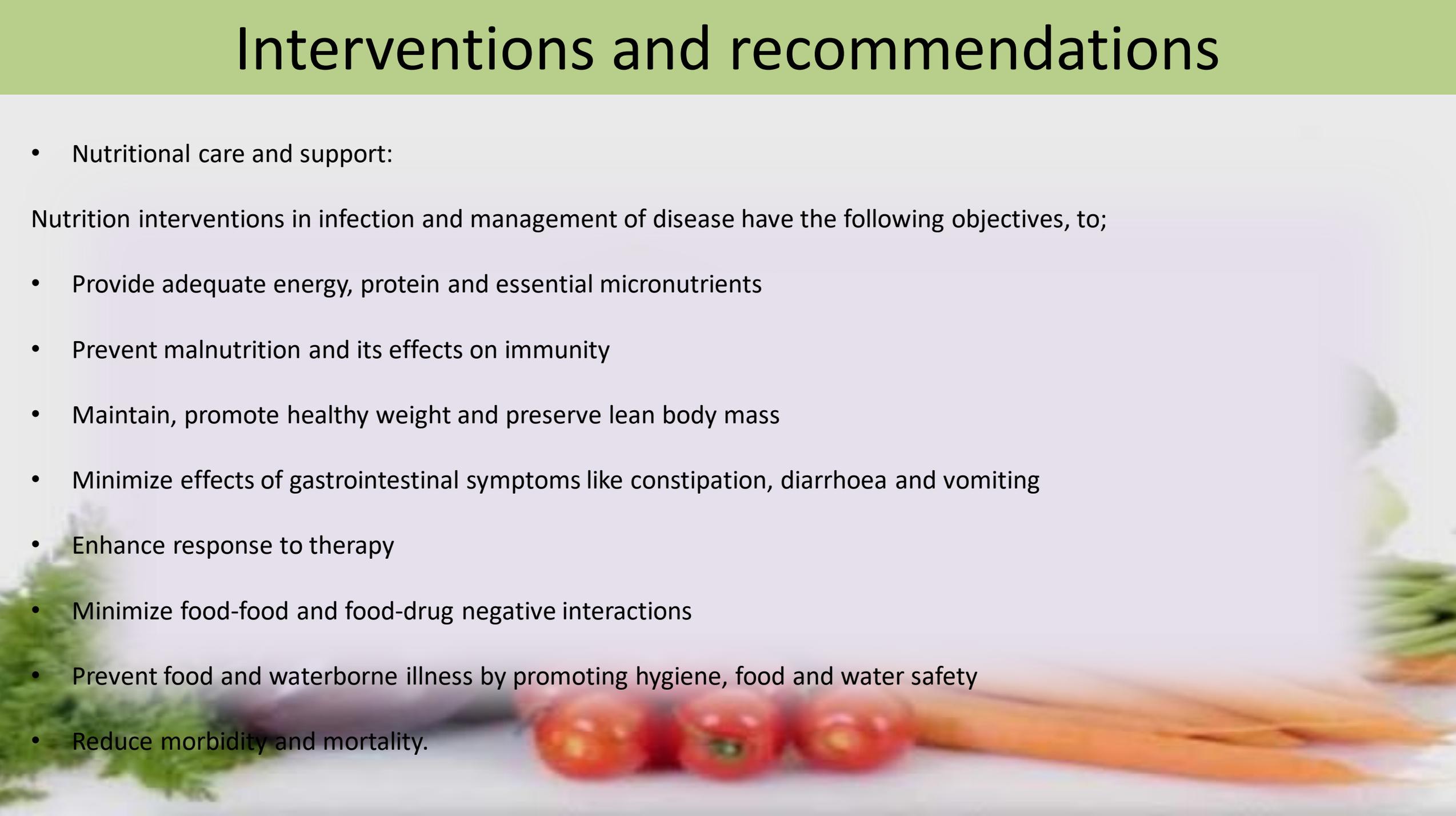
Key messages

- From economic analysis, the COVID-19 is expected to add about 30 million more hungry people a year in SSA, taking a modest annual recession of -1%
- First, it is important to save lives by stopping the spread of the disease as part of a UN coordinated response through social mobilization, training and awareness raising activities via FAO networks of extension services and animal health workers.
- Country level analysis and targeting the poor and most vulnerable for social safety nets will be very important in alleviating the impact of the COVID-19 outbreak on malnutrition in the short term. Direct interventions through social grants and provision of food and clean water will be very important.
- Farmers need to be supported to increase their productivity and access to markets to supply food to urban dwellers, increasing their income and resilience. Innovation that promote private sector participation and demand-supply matching will be very important at this time. Short value chains should be prioritized.
- Strengthening food reserves at national and regional levels should be considered. Food reserves are stocks of food products held by a public entity. The considered products should be food products with content in calories or nutrients that render them important for food and nutrition security.
- Joining efforts in crucial. Countries should strengthen networks and communication and promote multi-stakeholder collaboration and partnerships to safeguard against a food and nutrition catastrophe. The impact of the COVID-19 is not only a health problem but a crisis that also threaten food and nutrition security and the achievement of SDGs.

Interventions and recommendations

- Nutritional care and support:

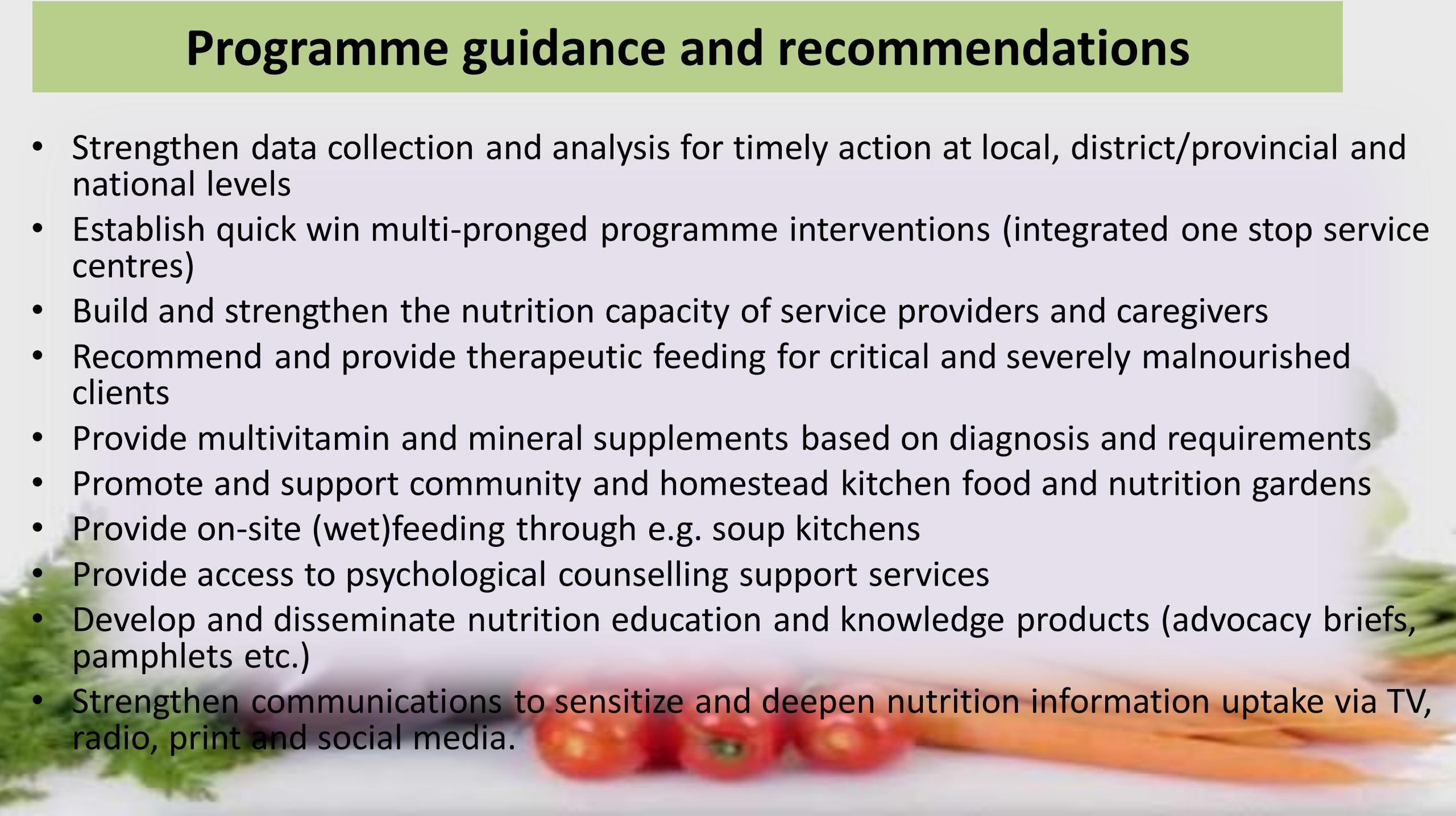
Nutrition interventions in infection and management of disease have the following objectives, to;

- Provide adequate energy, protein and essential micronutrients
 - Prevent malnutrition and its effects on immunity
 - Maintain, promote healthy weight and preserve lean body mass
 - Minimize effects of gastrointestinal symptoms like constipation, diarrhoea and vomiting
 - Enhance response to therapy
 - Minimize food-food and food-drug negative interactions
 - Prevent food and waterborne illness by promoting hygiene, food and water safety
 - Reduce morbidity and mortality.
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Government Policy Recommendation for consideration

- Review interlinked policies that impact nutrition and food systems to improve access and scale
- Mobilize and increase financing for nutrition
- Provide smart agriculture subsidies - prioritizing small holder farmers - to support production, processing, and distribution of food commodities
- Keep vigil on demand and supply chains of agricultural products and on strengthening the coordination of food systems for healthy diets
- Pay and improve attention to nutritious food (nutrient dense) value chains – fruits, vegetables, dairy, fish, meat, legumes, pulses, and nuts
- Coordinate with and support the food industry to fortify key food commodities and go to scale; for example, enforcing mandatory food fortification
- Maintain and improve movement of food commodities within and across borders
- Provide food parcels or vouchers as part of the broader social assistance and safety net schemes
- Ensure the continuation of an equivalent of a nutritious school meal provision (during school closures, lockdowns and term breaks)
- Monitor food pricing spikes and volatility to improve access to nutritious foods
- Establish and stock food banks
- Build stronger links between health and other referral systems
- Tap into traditional (governance) structures and local knowledge systems to strengthen nutrition strategic focus and implementation
- Enforce and monitor phytosanitary and related standards to ensure food safety and quality
- Develop, strengthen and maintain functional national food and nutrition surveillance systems
- Take this opportunity to support countries with the development of national food based dietary guidelines and to roll out the ICN2 framework of action on nutrition.

Programme guidance and recommendations

- Strengthen data collection and analysis for timely action at local, district/provincial and national levels
 - Establish quick win multi-pronged programme interventions (integrated one stop service centres)
 - Build and strengthen the nutrition capacity of service providers and caregivers
 - Recommend and provide therapeutic feeding for critical and severely malnourished clients
 - Provide multivitamin and mineral supplements based on diagnosis and requirements
 - Promote and support community and homestead kitchen food and nutrition gardens
 - Provide on-site (wet)feeding through e.g. soup kitchens
 - Provide access to psychological counselling support services
 - Develop and disseminate nutrition education and knowledge products (advocacy briefs, pamphlets etc.)
 - Strengthen communications to sensitize and deepen nutrition information uptake via TV, radio, print and social media.
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**Thank you for
your attention!**

