Pakistan Integrated Nutrition Strategy (PINS)

Nutrition, Food, Agriculture, WASH and Health Clusters Working Group
Purpose of the Presentation

• To present a comprehensive and integrated strategy for short, mid and long term response to the current critical problem of undernutrition of women and children in Pakistan.
• To clarify roles of nutrition-related sectors, particularly Agriculture, related to the Government of Pakistan and Provincial Government efforts to reduce malnutrition.
• To identify some preliminary steps for moving forward
The Problem
Trends in Malnutrition

GAM

- National
- Sindh
- Punjab
- Linear (Sindh)
- Linear (Punjab)

2002: 18%
2003: 16%
2004: 13%
2005: 10%
2006: 10%
2007: 13%
2008: 14%
2009: 14%
2010: 14%
Trends in Malnutrition

Stunting

2002 2003 2004 2005 2006 2007 2008 2009 2010

National Sindh Punjab Linear (Sindh) Linear (Punjab)
## Comparison with other countries

<table>
<thead>
<tr>
<th>Country</th>
<th>U5 mortality rank (worst is ranked #1)</th>
<th>Low birth weight (%)</th>
<th>Stunting (%)</th>
<th>Wasting (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pakistan</td>
<td>42</td>
<td>32</td>
<td>42</td>
<td>14</td>
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<tr>
<td>India</td>
<td>49</td>
<td>28</td>
<td>38</td>
<td>19</td>
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<td>Ethiopia</td>
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<td>12</td>
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<td>Guatemala</td>
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<td>12</td>
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<td>Thailand</td>
<td>125</td>
<td>9</td>
<td>16</td>
<td>5</td>
</tr>
</tbody>
</table>

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Pakistan Integrated Nutrition Strategy
Integration and Synergy

"...synergy is the ability of a group to outperform even its best individual member."

Malnutrition is a manifestation of multiple factors and needs a multi-sectoral approach.

1. Conceptual integration
2. Programmatic complementarity
3. Geographic convergence
Conceptual Integration
Nutrition Conceptual Framework

**Short-term consequences:**
Mortality, morbidity, disability

**Long-term consequences:**
Adult size, intellectual ability, economic productivity, reproductive performance, metabolic and cardiovascular disease

Maternal and child undernutrition

- Inadequate dietary intake
- Disease
- Household food insecurity
- Inadequate care for Women and Children
- Insufficient health services & unhealthy environment

Income poverty:
- employment, self-employment, dwelling, assets, remittances, pensions, transfers etc

Lack of capital:
- financial, human, physical, social and natural
- Inadequate education

Social, economic and political context

Immediate causes

Underlying causes

Basic causes
Disaster Prevention

Disaster = Natural Hazard + Vulnerable Population

Without being able to control natural hazards, all effort should be directed at reducing the size of the vulnerable population through prevention of undernutrition.
Programmatic Complementarity
Interventions with impact on immediate causes

**Agri / Food / Nutrition / Health / WASH**

### Maternal and child undernutrition

- **Inadequate dietary intake**
- **Disease**

- Nutrition and health education and promotion
  - **Agri / Food / Nutrition / WASH**
- Timely, access to quality and adequate food
  - **Agri / Food / Nutrition**
- Micronutrient supplementation:
  - **Nutrition**
- Treatment of acute malnutrition
  - **Nutrition / Health**
- Infant and young child feeding (IYCF) promotion and support
  - **Nutrition / Health**

- Essential health package to prevent and treat the communicable disease:
  - **Health**
- Hygiene promotion in health facilities, households:
  - **Health / WASH**
- Quality water to every home:
  - **WASH**
Interventions with impact on underlying causes

**Maternal and child undernutrition**

- Livelihood support to food insecure HH (i.e., gardens, livestock, fisheries) **Agri**
- Ensuring Local Food availability (i.e., irrigation) **Agri**
- Food processing and storage for improved family diet **Agri**
- Food fortification **Agri / Food / Nutrition**
- Improved support to breastfeeding and CF **Nutrition / Health**
- Support to birth spacing **Nutrition / Health**
- Access of women and girls to ANC and PHC **Health**
- Facility and CMAM implementation **Food / Nutrition / Health / WASH**
- Access of women and girls to micronutrient supplements **Nutrition**
- Household water treatment and storage **WASH**
- Chlorination of water at the source **WASH**
- Improved sanitation **WASH**
- Health system strengthening **Health**

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Interventions with impact on basic causes

**Agri / Food / Nutrition / Health / WASH**

- **Income poverty:** employment, self-employment, dwelling, assets, remittances, pensions, transfers etc

- **Lack of capital:** financial, human, physical, social and natural
  Inadequate education

- **Social, economic and political context**

- Conditional Social Transfers
  Food / Nutrition / Health

- Livelihood generation, small business enterprises, local marketing, income generation
  Agri

- Adolescent girls’ education (through 2º school)
  Agri / Food / Nutrition

- Advocacy for Province nutrition budget
  Agri / Food / Nutrition / Health / WASH

- Training CMAM, IYCF
  Agri / Food / Nutrition / Health / WASH

- NIS, Monitoring, Surveys, Evaluations
  Agri / Food / Nutrition / Health / WASH

- Supply chain management
  Agri / Food / Nutrition / Health / WASH

- Women’s literacy programs
  Agri / Nutrition / Health / WASH

- Integrated Nutrition Policy, Strategy and Guidelines
  Agri / Food / Nutrition / Health / WASH

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Geographic Convergence
Pakistan Integrated Nutrition Strategy

Conceptual integration, Program Complementarity, and Geographic convergence

• Define clear short term, medium term, and long term interventions and targets by using the immediate, underlying, and basic interventions described above.
Maternal and child undernutrition

Immediate causes

Social, economic and political context

Basic causes

Lack of capital: financial, human, physical, social and natural inadequate education

Income poverty: employment, self-employment, dwelling, assets, remittances, pensions, transfers etc

Basic causes

Inadequate dietary intake

Disease

Underlying causes

Insufficient health services & unhealthy environment

Inadequate care for Women and Children

Household food insecurity

Inadequate care for Women and Children

Income poverty: employment, self-employment, dwelling, assets, remittances, pensions, transfers etc

Inadequate dietary intake

Maternal and child undernutrition

Short Term

Medium Term

Long Term

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Pakistan Integrated Nutrition Strategy

Conceptual integration, Program Complementarity, and Geographic convergence

• Begin all interventions immediately.
• Treatment of Global Acute Malnutrition (GAM and SAM);
• Preventive interventions to improve women’s and children’s health, the environment
• Improvements in human and social capital.
Moving Forward

Integrated sectors Approach

In conjunction with Government and other Partners:

• Identify a core list of sectoral input and process indicators for monitoring short-term, mid-term and long-term progress

• Identify a core list of joint outcome / impact indicators (requiring multi-sector input)

• Use a combination of sentinel sites, local OTP, SFP, and SC reporting data, plus local and periodic national surveys to identify trends. Train local resources in using data for decision making.

• Develop a joint integrated workplan with timeline for each stage: short, mid- and long term.
Stewardship

Embrace and work towards the “3 One’s” Concept

• Maintain a National and Provincial Multi-sectoral Nutrition Board, that reports to the Provincial Chief / Health Minister and/or the Prime Minister.

• Simplify the Nutrition Information System by reducing the reporting forms; develop good models for evaluation.

• Maintain an intersectoral working group made up of the 5-6 nutrition-related sectors that provides a coordinating framework and technical input to the Nutrition Board, and that mainstreams nutrition into all development and humanitarian projects.
Duty Bearers Coordination

- National and Provincial Government
- NDMA
- PDMA
- UN
- INGOs / NGOs/ Civil Society Organizations
- Donors
Thank you