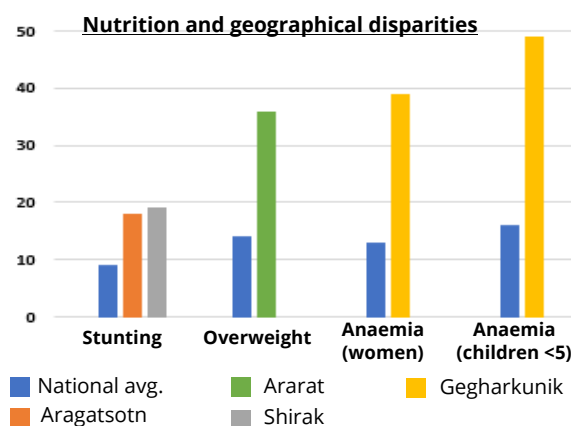
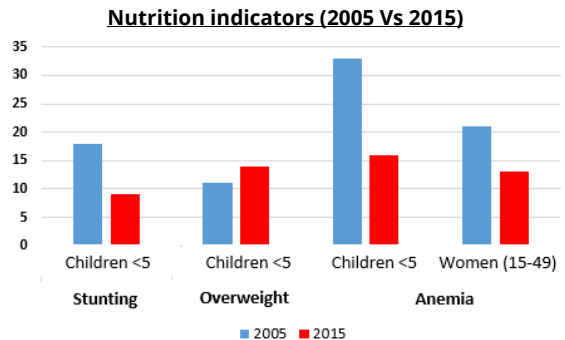


# WFP Armenia- Strengthening national systems to address malnutrition

SAVING  
LIVES  
CHANGING  
LIVES

In Armenia, food insecurity and malnutrition most of the time go hand in hand with each other, affecting the most vulnerable groups of the population and being further exacerbated by uneven macroeconomic progresses, regional and social disparities. Following the 2008 global economic crisis, the number of food insecure households in Armenia doubled, reaching worrisome levels in those northern provinces that are not following the same development path as the rest of the country, particularly in Shirak (24.2%), Tavush (22.6%) and Lori (19.5%) all of them being higher than the national average (16%). The 2018 Global Nutrition Report identified the coexistence of two forms of malnutrition in Armenia, namely overweight and anaemia. However, wider sets of data on the prevalence of malnutrition and micronutrient deficiencies among key population groups such as pregnant women, infants and young children is scarce and no surveillance systems to monitor child growth and micronutrient deficiencies (such as iron-deficient anaemia) are in place yet.

## THE NUTRITION STATUS IN ARMENIA



Presently, the Armenia Demographic and Health Surveys (ADHS) are the main sources of nutrition information in the country. If on the one hand the latest results from 2015 allegedly reported that stunting rates were halved by two over the last five years, on the other hand the pre-conditions which would sustain such improvements are not improving themselves in the first place. This is particularly true considering the poverty rates (one in three people in Armenia was living below the poverty line for the same year), the weak implementation of effective social safety nets, the stagnant expenditures on education and the health sector, as well as the worrisome food insecurity levels across the country.

Further, the same results also depict social and geographical inequalities reflected into higher malnutrition levels for some population groups. This is the case of stunting rates being almost double the national average in Aragatsotn and Shirak; the already high levels of overweight being almost three times higher in Ararat and the same would be applied to anaemia rates among women and children in Gegharkunik. Given these conflicting results, the same ADHS and international partners alike concluded that additional analyses will be needed to support the Government of Armenia cohesively assessing the nutritional status of its population and to better understand the root causes of malnutrition.

## DIETARY KEY FACTS OF ARMENIA

- Almost 50% of food consumption consists on staples;
- Armenians consume higher levels of salt, saturated fat and sugar-sweetened beverages compared to worldwide averages;
- Irregular meals intake and omission of breakfast is a common behaviour;



- Less than 50% of primary school aged children have breakfast every day before going to school;
- Overweight is the only indicator from the ADHS having increased from 2005 to 2015.

**Several nutrition indicators (food diversity among children aged 6-23 months and the prevalence of anaemia among children under 5) are positively associated with mothers' education levels.**

## THE IMPACT OF MALNUTRITION ON INDIVIDUALS AND THE ARMENIAN SOCIETY

Malnutrition represents a public health challenge for every country and affects the overall potential of nations reducing economic productivity, potential earning of individuals, and the human capital of nations. Thus, hindering economic growth and development. The cost of undernutrition and micronutrient deficiencies to the society is estimated between 2 to 3% of the global GDP. In addition, increasing rates of overweight and obesity are linked to increased child mortality and maternal morbidity, as well as an increase in Non Communicable Diseases (NCDs). NCDs are estimated to account for 93% of all deaths in Armenia and represent a major public health risk.

**Malnutrition, however, is a solvable problem as low-cost, effective interventions are available. The 2019 Global Nutrition Report concluded that for every \$1 spent on infant and young child nutrition, there is an expected \$16 return on investment through reduced health care costs and increased productivity.**



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## FOUR DIFFERENT YET INTERCONNECTED NUTRITION ACTIVITIES

### 1. ASSESSING THE NUTRITION SITUATION AND ROOT-CAUSES OF MALNUTRITION IN ARMENIA

The first area of intervention will focus on the holistic analyses to re-assess and complement the findings from the 2015 ADHS. This to have a clear picture on the different indicators defining malnutrition and to better understand the root-causes of malnutrition to support the government developing evidence-based policies and setting-up the subsequent results monitoring tools. Key to the success of this activity will be the already reached cooperation agreement and joint work with the Ministry of Health, UNICEF and WHO. WFP will be focusing on the prevalence of micronutrient deficiencies among children under five and women in reproductive age.

**Updated informative statistics on the nutrition situation of the Armenian population will be available and provided to the government and its partners to identify appropriate responses for the interconnected drivers of malnutrition.**

### 2. SUPPORT THE GOVERNMENT DEVELOPING A NUTRITION POLICY

One of the priorities for the newly established Government is to transition to a policymaking model based on strategic planning, evidence and data analysis. For this reason, the roll-out of the analyses on existing levels and causes of malnutrition will be pivotal in formulating a national response strategy in Armenia to improve nutrition. Historically, many different strategies and subsequent legislative measures have been adopted in Armenia to improve young child nutrition, support breastfeeding and promote healthy lifestyles. However, albeit these initiatives are relevant from the point of view of a prioritisation of the window of opportunity, their main focus on children under five limits the scope of existing strategies to address nutritional aspects from a multidimensional point of view and life-cycle approach. Since several social, political, cultural and economic factors affect the nutritional well-being of the population, the existing strategies also have a limited opportunity to address the direct and underlying system actors, the drivers and dynamics that affect food availability, and the access and utilization of food.

**Administrative and legislative frameworks that incorporate life-cycle and food system approaches are in place to tackle the root-causes of malnutrition in the country.**

### 3. ENHANCING NUTRITIONAL EDUCATION AND BEHAVIOUR CHANGE FOR HEALTHY CONSUMPTION HABITS

Food utilisation is deeply embedded within the social and cultural norms of each society. To complement the studies on the root causes of malnutrition in Armenia, WFP will start by carrying out a formative research with a twofold objective, to assess: I) the eating habits of individuals leading to poor micronutrient and vitamin consumptions and II) the way social behaviours influence food consumption. The results of such analyses will in turn inform the design of two interventions carried out by WFP and its partners to promote healthy dietary behaviours of the Armenian society, thus, stimulating the demand and utilisation of nutritionally diversified food.

#### Social Behaviour Change Communication (SBCC)

**Targeted population groups acquire healthy dietary behaviours and their food and nutrient needs are met.**

Since knowledge is necessary, but not sufficient for nutrition-related behaviour changes, WFP will use a set of different communications approaches, activities and tools to positively influence behaviours. By tailoring the approaches to the context and people's need and using evidence-based assessments to formulate effective SBCC campaigns, WFP will aim to tackle the underlying social dimensions of nutritional behaviours.

#### Leverage on the School Feeding programme as a transformational platform to support nutrition

**WFP will promote healthy lifestyles and implement nutrition education in schools**

Within the government-led "*Healthy schools*" initiative, WFP will promote physical activities and healthy lifestyles within the school environment. In addition, WFP will support the government-led "*Healthy lifestyle*" formal education initiative by complementing the existing nutrition curricula with innovative approaches and methods and expanding the curricula to a wider range of schoolchildren.

### 4. MAKING THE SCHOOL FEEDING PROGRAMME MORE NUTRITION-SENSITIVE

Thanks to the initiatives aimed at increasing the nutrition awareness and stimulating nutrition behaviour change among schoolchildren, parents and community members alike, schools can become active actors in local markets with their direct purchases of nutritionally diversified food to enrich the food basket of daily school meals. This new demand will be linked to WFP parallel investments in support of local producers, supply chain processes and access to markets in light of a sustainable nutrition-sensitive food value chain which aims to stimulate the local production of and demand for affordable, high quality and nutritionally diversified food. In parallel, WFP will support the schools to redesign the existing school meals menus to ensure the consumption of nutritionally-balanced food baskets, train kitchen staff to sustainably implement these new changes, as well as support schools to ensure effective food management, quality controls and food hygiene practices.

**Increased schools' access to locally produced nutritionally diversified food, reflected into daily provisions of sufficient, safe and nutritious meals to schoolchildren.**

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