

For Lack of Will

Child Hunger in Africa



AFRICAN CHILD POLICY FORUM (ACPF)

African Child Policy Forum (ACPF) is an independent, not-for-profit, Pan-African institute of policy research and dialogue on the African child. ACPF was established with the conviction that putting children first on the public agenda is fundamental for the realisation of their rights and wellbeing and for bringing about lasting social and economic progress in Africa.

ACPF's work is rights based, inspired by universal values and informed by global experiences and knowledge and is committed to Internationalism. Its work is guided by the UN Convention on the Rights of the Child (CRC), The African Charter on the Rights and Welfare of the Child (ACRWC), and other regional and international human rights instruments. ACPF aims to specifically contribute to improved knowledge on children in Africa; monitor and report progress; identify policy options; provide a platform for dialogue; collaborate with governments, intergovernmental organisations and civil society in the development and implementation of effective pro-child policies and programmes and promote a common voice for children in and out of Africa.



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List of Acronyms and Abbreviations

ACPF	African Child Policy Forum
ACRWC	African Charter on the Rights and Welfare of the Child
ADB	African Development Bank
ARNS	African Regional Nutrition Strategy
AU	African Union
CAADP	Comprehensive Africa Agriculture Development Programme
CFI	Child-Friendliness Index
CRC	Convention on the Rights of the Child
DHS	Demographic Health Survey
DRC	Democratic Republic of Congo
FAO	Food and Agriculture Organization
FIES	Food Insecurity Experience Scale
GDP	Gross Domestic Product
GHI	Global Hunger Index
IFAD	International Fund for Agricultural Development
MAD	Minimum Acceptable Diet
MDD	Minimum dietary diversity
MMF	Minimum Meal Frequency
PoU	Prevalence of Undernourishment
SDG	Sustainable Development Goal
SUN	Scaling-up-Nutrition
UDHR	Universal Declaration of Human Rights
UNICEF	United Nations International Children's Emergency Fund
WFP	World Food Programme
WHO	World Health Organization

Preface

It is a paradox that we should be talking about Child Hunger in this era of the *Africa Rising* narrative and 30 years after the adoption of the CRC. But here we are. Child hunger remains a persisting and a pressing problem in Africa.

Child hunger is the most extreme form of child deprivation. Hunger kills, often silently and slowly. It affects and damages children's health, hinders their capacity to learn, and reduces their ability to earn as much as their better-off peers. No less significantly, it diminishes children's sense of worth, their self-esteem and dignity. It also leads to anti-social behaviour and crime. It is a most demeaning form of deprivation with huge personal, social and economic costs.

And it is a huge problem in Africa.

It should be given the utmost priority in public policy. Africa's population is expected to reach 2.5 billion people in 2050, and its child and youth population will hit the one billion mark. If current trends continue and corrective measures are not taken, Africa could have one billion undernourished, malnourished, hungry children and young people by the middle of the century.

Child hunger is fundamentally a political problem. It is the offspring of the unholy alliance of political indifference, unaccountable and bad governance, and economic mismanagement. Persistent, naked, and brutal though the reality is, it remains a silent tragedy, one that remains largely unacknowledged and tolerated, perhaps because it is a problem faced by the voiceless.

The severity and scale of the problem is such that it requires nothing short of a radical and transformative political and economic agenda. It means above all: (i) political commitment at the highest level; (ii) a constitutional or legal commitment to ensure that no child goes hungry and to make it obligatory for governments to provide universal access to a minimum acceptable amount of food for all children; (iii) provision of targeted social safety nets for the poor, especially child- and female headed households; and (iv) the institution of school-feeding programmes across regions and communities.

Hunger defiles human dignity, destroys lives, and deprives nations of their future wealth and their human capital too. Action is urgently needed. The issue is not resource limitation, though the demands on the public purse cannot be denied. The real culprit is that we have a broken governance system and an unresponsive political leadership that is indifferent to the plight of the poor, especially to the millions of children that suffer, albeit silently, the pangs of everyday hunger. The solution lies in public mobilization and a sustained and vigorous Africa-wide movement to hold our governments accountable. That is what is needed, and that is what all of us and the human rights community and civil society in Africa should do.

Assefa Bequele

Executive Director

Key Findings and Messages

Child hunger is unacceptably high and on the rise

Millions of children in Africa go hungry

- Ninety per cent of children do not meet the criteria for minimum acceptable diet.
- Sixty per cent of children do not meet the minimum meal frequency.
- In 2017 alone 14 million children were affected by wasting.

Child hunger has huge personal, social and economic costs

- Globally, a child dies every three seconds due to hunger, which is equivalent to 10,000 children everyday.
- In low and middle income countries, child undernutrition contributes to about 45% of under-5 child mortality. One third of child deaths in Africa is attributable to micronutrient deficiencies.
- Children's physical and mental development depends on the amount and quality of food they take, especially in the first 1000 days or the first two years of life. Children who get insufficient food are likely to develop less optimally than others – they are stunted and suffer from health complications.
- Hunger has immediate and long-lasting adverse effects on the physical, emotional and intellectual development of children, on their life-time experiences and earnings, and on a country's economic performance. Hungry, stunted children do less well in school and suffer from low self-esteem. They are less healthy and productive, earn less and therefore have lower incomes as adults than their peers. All of this of course has direct impact on a country's economic performance. It is estimated that child hunger costs African countries between 1.9 and 16.5% of their GDP. Stunting alone is estimated to have reduced Africa's present GDP per capita by 10%. Ensuring that children have enough food is, therefore, not as glibly characterized a "social welfare" waste, but an investment in people's wellbeing, social justice and a country's economic future.
- On the other hand, by failing to invest in nutrition early in children's lives, countries will miss out from making huge savings. For every dollar spent on nutrition early in a child's life, up to USD 85 can be saved in Nigeria, USD 80 in Sudan, and USD 60 in Kenya.
- A reduction of the prevalence of undernutrition to half of the 2009 level by the year 2025 can generate annual average savings ranging from USD 3 million to USD 376 million.
- A study covering 15 African countries showed that meeting the 2025 World Health Assembly target for stunting will add USD 83 billion to national incomes.

Poverty is the number one driver of child hunger

- Access to food is primarily the result of poverty and inequalities in income. The proportion of people in extreme poverty in sub-Saharan Africa was estimated at 41% in 2015. Poverty is especially serious amongst children.
- The proportion of children in extreme poverty in sub-Saharan Africa was estimated to be 49% in 2013.

Child hunger is worsened by inadequate political commitment

Government efforts to protect the rights of children to food have not been enough

- Africa is not on track to meet SDG 2 of ending hunger, achieving food security and improved nutrition and promoting sustainable agriculture by 2030.
- African countries committed themselves to an African Regional Nutrition Strategy (2015-2025) with ambitious targets. Yet, more than half of African countries are currently off course to meet the targets set out in this Strategy.
- Only ten countries met their commitment under the Comprehensive African Agricultural Development Programme to allocate at least 10% of their annual public expenditure to agriculture.
- Thirty-four countries are off course to meet the target of reducing childhood wasting to less than five per cent by 2025.
- And, only 9 countries are on course to meet the target of reducing stunting by 40% by 2025.

Countries that are child-friendly, according to ACPF's Child-Friendliness Index, and have placed children at the centre of their public policy, have fewer children going hungry

- Countries such as Mauritius and South Africa, which are among the most child-friendly countries, according to the Child-friendliness Index, ranked the lowest in the Global Hunger Index.
- Central African Republic and Chad, which are at the bottom of the Child-friendliness Index, ranked the highest in the Global Hunger Index, characterized as having an “extremely alarming” and “alarming” levels of hunger, respectively.

Uneven and unequal economic growth

- Growth in Africa over the last two decades has been impressive by historical and world standards. But it has not been inclusive, with little impact on child hunger. Economic growth, without appropriate pro-poor policies, is not sufficient to address child hunger. For example:
 - Despite a 2% average annual growth in GDP per capita, stunting in Kenya increased by 2.5%.
 - In the DRC, despite a 2% average annual increase in GDP per capita, the decline in stunting was only 0.5%.
 - A 4% average annual growth in GDP per capita did not lead to any reduction in stunting in Nigeria.

A broken food system that hampers access to nutritious food

- Increases in food production have not resulted in better quality diets for children.
- Agricultural production focuses more on major cereal crops than on more nutritious food such as pulses, fruits, and vegetables.
- Nutrient-dense foods are in limited supply, inaccessible or unaffordable.
- In Ethiopia, for instance, eggs, meat, fish, poultry, fruits and vegetables each contributed less than 1% to the food energy supply, and dairy products contributed less than 2%.

Child hunger is compounded by economic and gender inequality

Children from poor and rural backgrounds suffer the most from hunger

- In some countries, the prevalence of stunting is twice as high among rural children as among urban children.

Women and girls are disproportionately affected by hunger

- Globally, about 60 percent of people who go hungry are female.
- Nearly half a billion women and girls, a large number of whom live in Asia and Africa, do not have access to nutritious food.
- 110 million women of reproductive age in Africa suffer from anaemia, facing the risks of higher rates of morbidity and mortality for both the mother and the child and impairing the child's cognitive potential.

Conflict and climate change have complicated the continent's child hunger dynamics

Politically stable countries have fewer numbers of children going hungry

- Three quarters of all stunted children under the age of five live in countries affected by armed conflict.
- The proportion of undernourished children is 2-3 times higher in zones where there are protracted conflicts than in other zones. Access to food markets and humanitarian food aid is impossible in many conflict zones.
- In 2017, conflict was the major driver of acute food insecurity in 18 countries where almost 74 million food-insecure people were in need of urgent assistance.
- In some active conflicts, starvation is still used by warring parties as a weapon of war.

Countries hard-hit by climate change and extreme weather conditions faced the largest food emergency

- In 2015-16, following the El Niño phenomenon, more than 10 million people needed food aid in Ethiopia, while about 40 million people in the southern African region suffered food insecurity.
- In 2017, climate shocks led to acute food insecurity in 23 countries, affecting over 39 million people, the majority of which were in Africa. This included 8.5 million in Ethiopia, 5.1 million in Malawi, 4.1 million in Zimbabwe, and 3.4 million in Kenya.
- By 2050, due to adverse climate change effect, water availability will be reduced resulting in potential mean production losses for sub-Saharan Africa which are 22 percent for maize, 17 per cent for sorghum and millet and 18 per cent for groundnut.

What is to be done?

Recognise the urgency of child hunger and ensure greater political commitment

- Africa will have to feed 2.2 billion people and a billion children and young people by 2050. The political trajectory and the economic and technological future of the continent will be determined by how well fed and educated these one billion children and young people are. ACPF studies on the current state of child nutrition and quality of education suggest a very serious human development crisis unfolding unless radical and transformative policies are put in place. This therefore means that there must be government commitment to giving greater political visibility to ending child hunger.
- Specifically, ending child hunger and children's right to food must be entrenched in constitutional and other legal instruments.

Adopt an economic and budgetary policy that is pro-children and pro-poor

- Children should come first in the design of economic, especially budgetary policies. The merit of budgetary policies should be anchored to the question of whether or not or how far governments are making the maximum effort to provide for the physical wellbeing, the health and education of children and young people.
- This also means adopting policies that are pro-poor and investing in sectors and communities where the poor live especially rural areas. Governments must commit at least 10% of annual public expenditure to agriculture as agreed in the Comprehensive Africa Agriculture Development Programme.

Adopt a policy of universal access to food for all children

- No child should go hungry. This is a moral and development imperative. In the same way that the principle of universal access to education and, in some countries, universal access to health is now accepted as a commonly accepted and integral part of the social contract, African governments must commit themselves to the principle that no child should ever go hungry and therefore to the principle of universal access to minimum acceptable diet for all children.
- This should be complemented by a policy that provides targeted safety net programmes for the poor and the vulnerable, especially women.

Develop nutrition-sensitive and nutrition-focused policies targeting early childhood and mothers

- Nutrition policies should prioritise the critical first thousand days from conception through to the first two years of life and mothers.
- Implementing nutrition-related behavioural change programmes leads to positive outcomes in child wellbeing.

Institute school-feeding programmes

- Schools can be an effective means of assuring that no child goes hungry. Complex though they may be, governments should adopt locally or community-tailored school-feeding programmes involving parents and local communities.

Bridge the gap between rhetoric and action

- One of the most serious and recurring problems in the policy area is the gap between policy commitments and practice. In this, as in other social and development areas, a critical area for government attention is improving policy coordination and building implementation capacity. The need for such improvement is especially important to prevent and respond to climatic vulnerabilities and conflicts.

Establish a mechanism for regular monitoring and accountability

- Governments should establish a mechanism for statistically monitoring their performance to end child hunger.
- Knowledge or statistics is the foundation for effective action. Governments should promote evidence-based policy making and ensure that monitoring data feeds into policy and programmatic action.

1. Child Hunger in Africa: Persistent and on the Rise

Hunger is one of the most pressing political, economic, moral and existential conundrums facing Africa today. Globally, more than 821 million people suffer from hunger.¹

About 59 million children are stunted and 14 million are wasted in Africa indicating the huge magnitude and severity of child hunger on the continent.

According to FAO, despite continuous and significant progress globally in reducing hunger, progress in Africa has remained slow compared to other regions (see Figure 1).

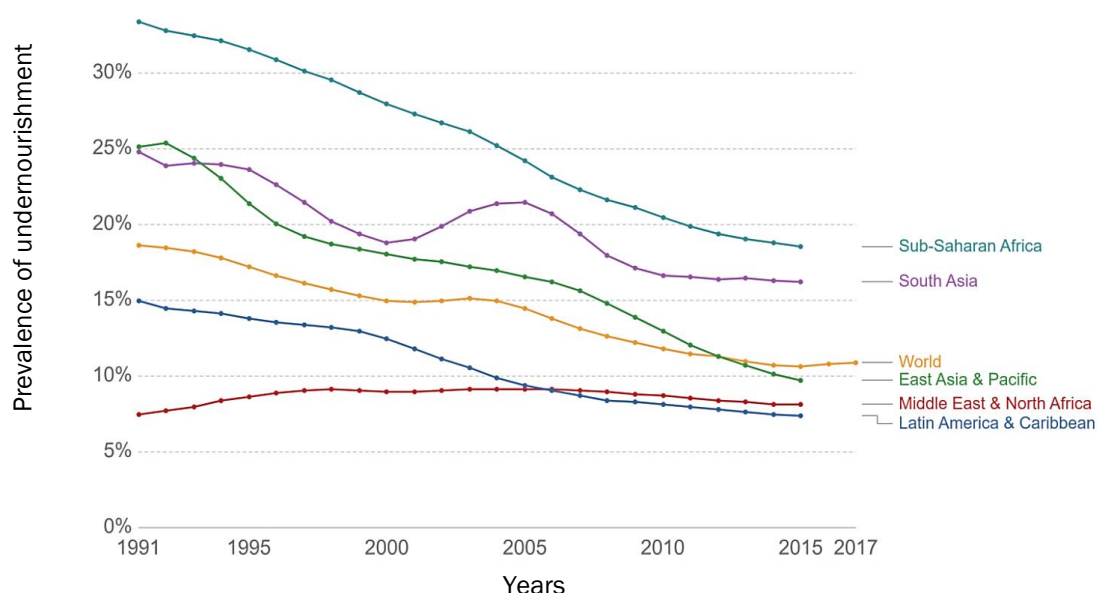
Child hunger: What we mean

Child hunger refers to food deprivation ranging from a complete absence of food or starvation to malnutrition resulting from insufficient quantity or quality of food and essential nutrients, or a combination of these.

Child hunger also refers to micronutrient deficiencies (vitamins and minerals) that occur when the quality of food people eat does not meet their nutrient requirements. Such deficiencies, also described as hidden hunger, impair growth, cognitive development, and affect vital cellular functions.

Child hunger is a violation of children's basic right to food. States obligation to ensure children's access to adequate food are well articulated in various international and regional human rights instruments.

Figure 1: Trends in the proportion of people undernourished by regions

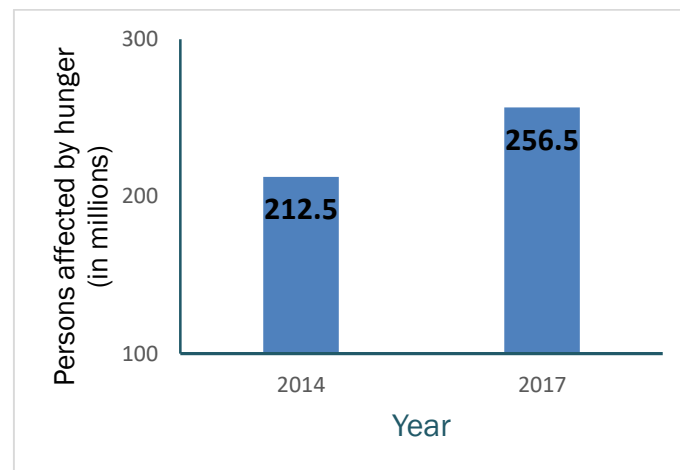


Source: Based on data from FAO 2019

There has been an increase in the number of people who are malnourished from 212.5 million in 2014 to 256.5 in 2017. By 2018, more than 20% of the continent's population was undernourished (see Figure 2).

Given Africa's rapid population growth, the decline in PoU hides an increasing trend in absolute figures which have further accelerated in the last three years.²

Figure 2: Increase in the number of people undernourished between 2014 and 2017



Source: FAO, IFAD, UNICEF, WFP and WHO 2018.

The recently developed Food Insecurity Experience Scale (FIES) (Figure 3),³ collected directly from representative samples of individuals or households, shows one in three Africans goes hungry for a day or more (severe food insecurity) (see Figure 4).

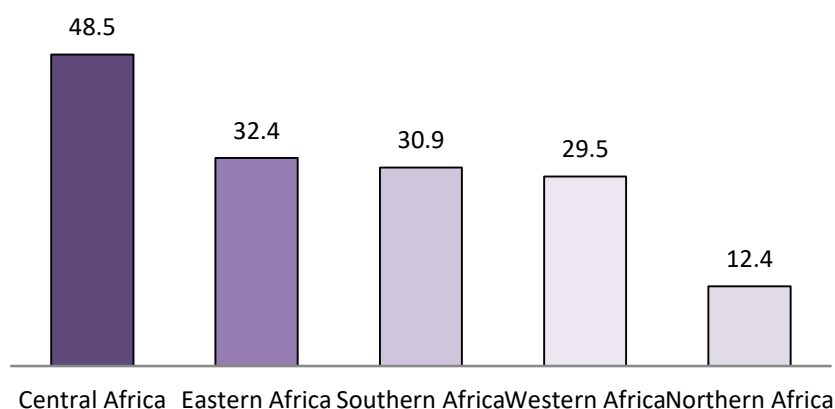
Figure 3: Level of food insecurity measured by the Food Insecurity Experience Scale (FIES)



Source: WHO (2017).¹⁰

The prevalence of hunger and severe food insecurity in 2014-17 was highest in central Africa, where about half of the population faced severe food insecurity, followed by eastern Africa where the corresponding figure was above 32%.

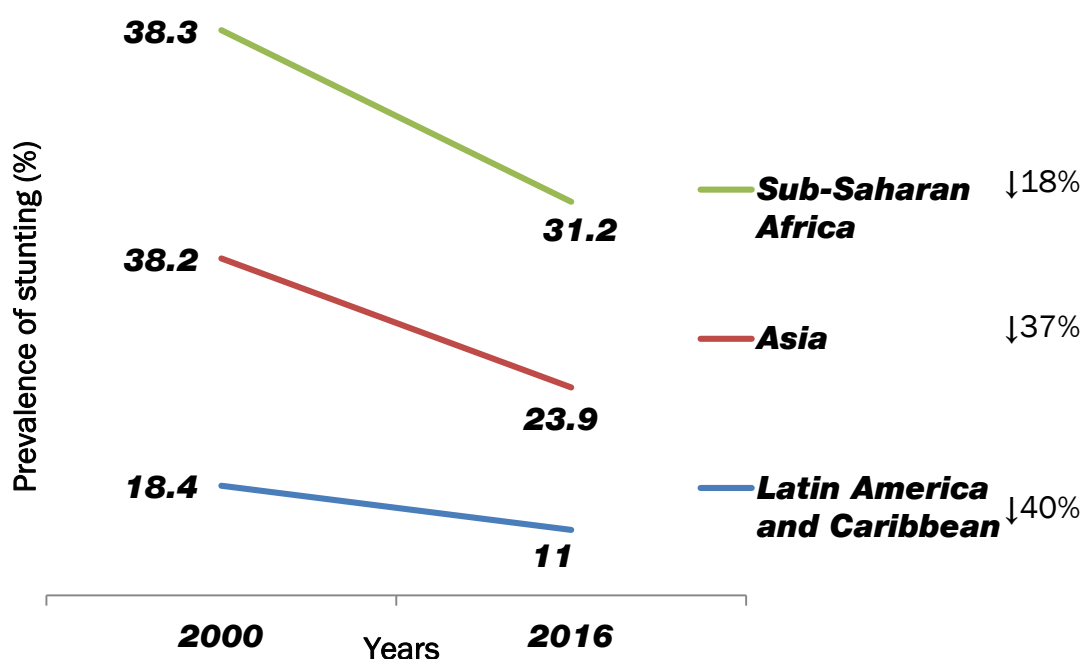
Figure 4: Current prevalence of hunger and severe food insecurity by sub-region



Source: Based on DHS data

Undernutrition indicators such as stunting and wasting are also important markers of child hunger. At global level, child stunting declined significantly from 2000 to 2016 (see Figure 5). The decline in Africa is much lower than other regions. While the prevalence went down to 37% in Asia and 40% in Latin America and the Caribbean, it declined only by 18% in Africa. One in three African children are still stunted.

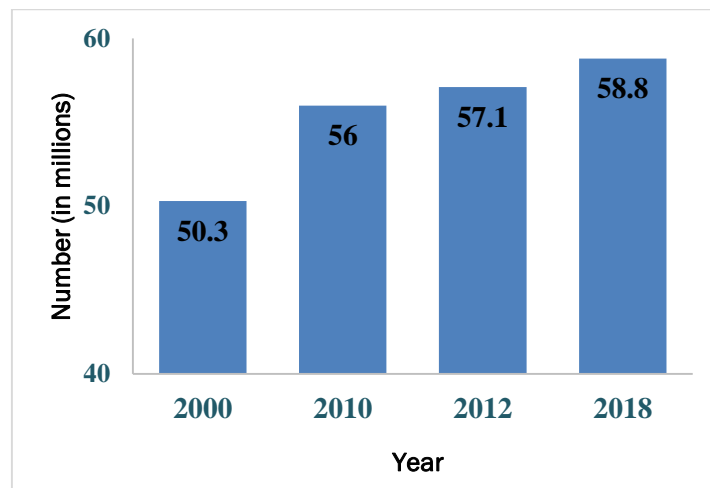
Figure 5: Rate of reduction in child stunting between 2000 and 2016 by region



Source: authors' representation from data presented in The State of Food Security and Nutrition in the World 2018.⁴

Although there is a percentage decline in stunting from 38% in 2000 to 31% in 2018, the number of children who are stunted has actually increased in absolute terms, from 50 million in 2000 to 59 million in 2018 (see Figure 6).

Figure 6: Increase in absolute number of children suffering from stunting between 2000 and 2018

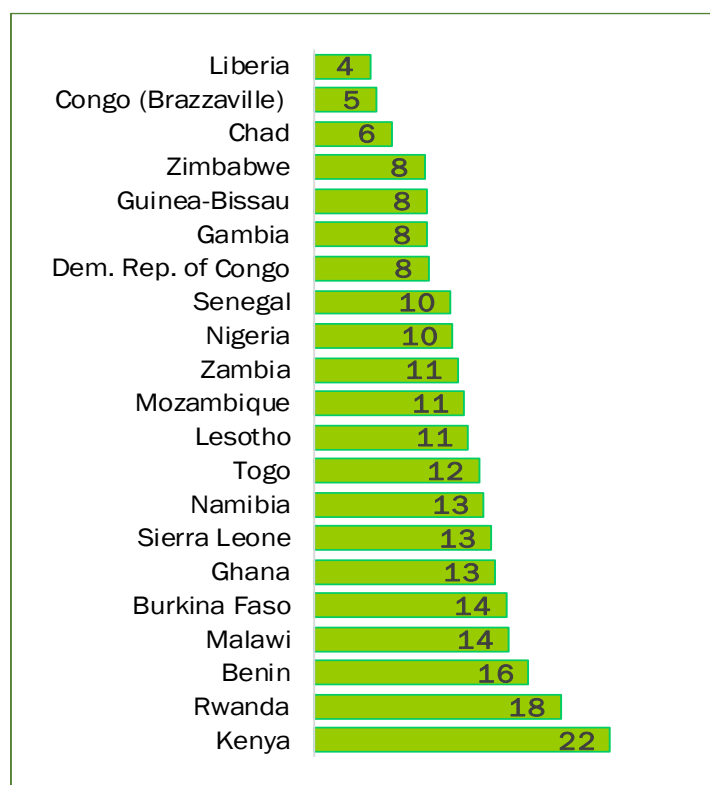


Source: Based on data from UNICEF, WHO and World Bank - Joint Child Malnutrition Estimates 2019. ⁵

Wasting is another important indicator of child hunger. More than 10% of child deaths are attributed to wasting worldwide.⁶

The World Health Organisation (WHO) has set a 'minimum acceptable diet (MAD)' to serve as a standard to gauge children's feeding practices. It shows whether or not children aged 6-23 months are consuming sufficient and diverse food in a required frequency. Using this minimum acceptable diet indicator, the proportion of children in Africa receiving a minimum acceptable diet stands at only nine percent. It is even lower in countries such as Liberia, Congo and Chad (see Figure 7).

Figure 7: Proportion of children aged 6-23 months receiving a minimum acceptable diet for selected countries



Source: ACPF 2018

As shown in Figures 7, the proportion of children who meet the minimum acceptable standard in terms of quality, quantity and frequency, is extremely low despite an overall increase in food production. Furthermore, only two in five children meet the minimum meal frequency; about one in five meets the minimum dietary diversity; and fewer than one in ten meet the criteria for minimum acceptable diet.

The Global Hunger Index (GHI) was developed to capture the various aspects of hunger with a focus on four key indicators: PoU, child stunting, child wasting, and child mortality. The Index scores these indicators from zero (no hunger) to 100 (most extreme hunger). In between are five categories: extremely alarming (≥ 50), alarming (35-50), serious (20-35), moderate (10-20), and low (<10). Analysis of the GHI scores from 2000 to 2018 shows that only two countries (Algeria and Tunisia) fall under the “low” category, while seven countries (Ghana, Gabon, Senegal, Egypt, South Africa, Mauritius and Morocco) fall under the “moderate” GHI score category (see Table 1). The rest of the countries fall under “extremely alarming”, “alarming” and or “serious” categories.

Table 1: Countries with the highest and lowest Global Hunger Index Scores in Africa, 2018

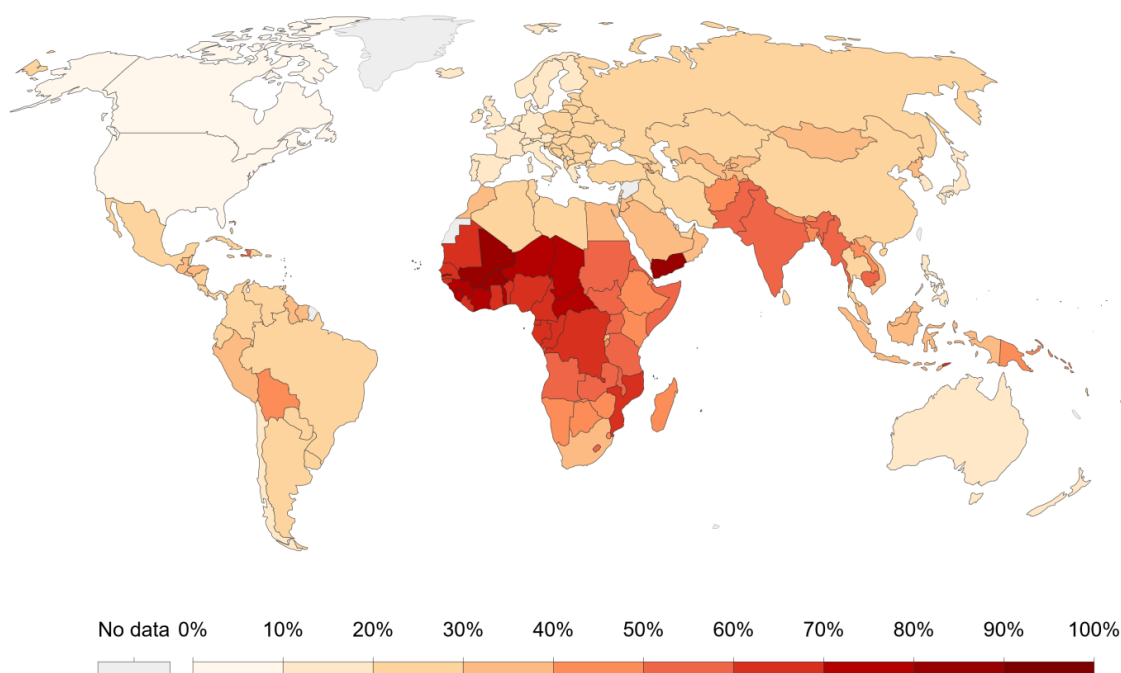
Country	GHI_2018 Score	Severity based on GHI_2018
Central African Republic	53.7	Extremely Alarming
Chad	45.4	Alarming
Madagascar	38.0	Alarming
Zambia	37.6	Alarming
Ghana	15.2	Moderate
Gabon	15.4	Moderate
Senegal	17.2	Moderate
Egypt	14.8	Moderate
South Africa	14.5	Moderate
Mauritius	11.0	Moderate
Morocco	10.4	Moderate
Algeria	9.4	Low
Tunisia	7.9	Low

Source: 2018 Global Hunger Index⁷

An important aspect of hunger that was not captured by the various measurements is hidden hunger. Hidden hunger refers to deficiencies in micronutrients such as vitamins and minerals. Women and children are disproportionately affected by hidden hunger.⁸ It is estimated that a third of all child deaths attributed to undernutrition are related to hidden hunger.⁹

In the absence of a comprehensive indicator, hidden hunger is often measured through a proxy indicator- anaemia¹⁰. Most African countries also have an alarmingly high prevalence of anaemia, in some case exceeding 50% among preschool children (see Figure 8).

Figure 8: Geographic distribution of anaemia in preschool children, 2016



Source: World Bank 2018

Taken together, all the above measures of hunger indicate that child hunger is unacceptably high despite the moderate progress made in the past decade. The pace of change remains slow and uneven.

As ACPF noted in its *African Report on Child Wellbeing 2018*, Africa is indeed on the verge of a serious human development crisis, mainly due to high levels of child undernutrition on one side and the huge child and youth population that is expected to reach one billion in 2050 on the other. Unless radical and transformative measures are taken to invest heavily in children and youth, Africa will not be able to become a continent where everyone lives and thrives to fulfil his/her full potential.

2. Child Hunger: The Cost

There is a huge cost of failure to invest in reducing child hunger: Globally, a child dies every three seconds due to hunger, which is equivalent to 10,000 children every day. In low and middle income countries, child undernutrition contributes to about 45% of under-5 child mortality. It is also estimated that a third of all child deaths are related to micronutrient deficiency, also called hidden hunger.¹¹ Furthermore, than 10% of child deaths are attributed to wasting worldwide.¹²

Table 2: Child Mortalities Associated with Undernutrition, 2014 estimates

Countries	% total child mortalities associated with undernutrition
Ethiopia	28
Uganda	15
Egypt	11

Source: AU et al. (2014).¹³

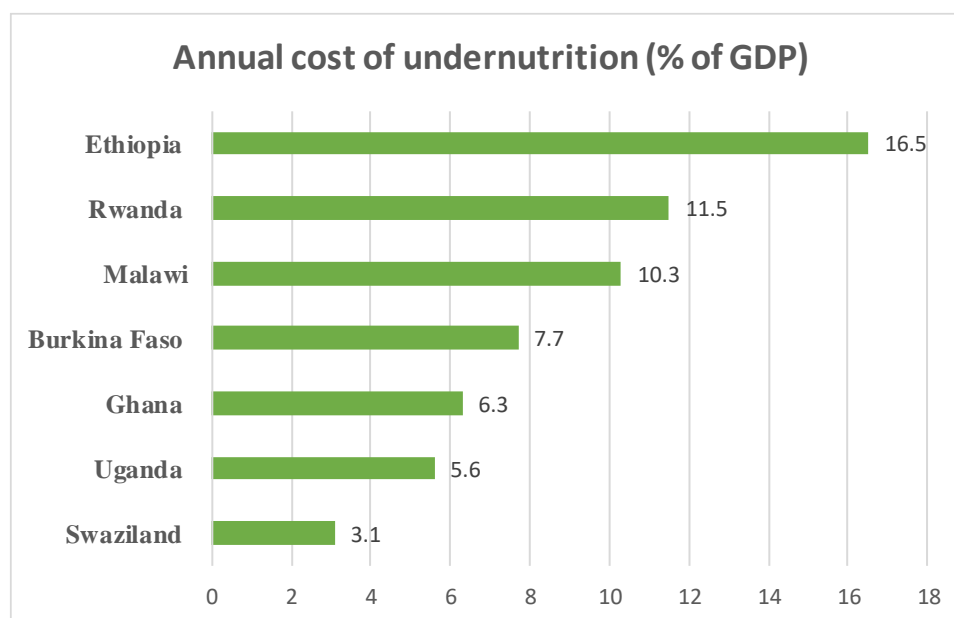
Hunger is not only a major cause of child mortality but it is also a major contributor to the disease burden among children. Child undernutrition generates health costs equivalent to between 1 and 11 percent of the total public budget allocated to health.¹⁴ Beyond its immediate effects, child hunger has long-lasting adverse effects on the physical, emotional and intellectual development of children, on their life-time experiences and earnings, and on a country's economic performance. In early childhood, it affects children's physical growth, resistance to disease and the size and structure of their brain. It also affects cognitive and physical performance - undermining the education, productivity and future earnings of those affected.¹⁵

Hungry, stunted children do less well in school and suffer from low self-esteem. A 2014 study showed that the expected number of schooling years achieved by a student who was stunted is as much as 1.2 years lower than the expected schooling for a student who was never undernourished. There is a higher rate of school repetition among children who were stunted that ranges from 2 to 4.9 percent.¹⁶

Stunted children are also less productive, earn less and therefore have lower incomes as adults than their peers. All of this has direct impact on a country's economic performance.

It is estimated that child hunger costs African countries up to 16.5% of their GDP (see Figure 9).

Figure 9: Annual cost of undernutrition as percentage of GDP

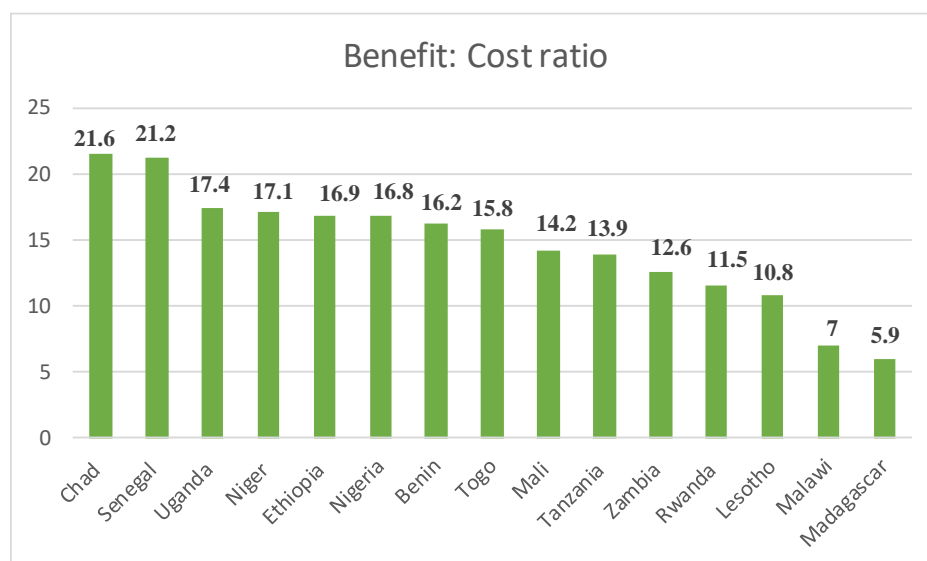


Source: Based on AU et al. 2014

Stunting alone is estimated to have reduced Africa's present GDP per capita by 10%.

Investing in reducing child hunger has a huge economic benefit: For every dollar invested in reducing stunting, there is return of about USD 22 in Chad, USD 21 in Senegal, and USD 17 in Niger and Uganda. The rate of return is even higher if the investment is made early in the child's life. For every dollar spent on nutrition early in a child's life, up to USD 85 can be saved in Nigeria, USD 80 in Sudan, and USD 60 in Kenya.

Figure 10: Benefit: Cost ratios associated with reduction in stunting in selected African countries



Source: Hoddinott (2016)

Every dollar spent on childhood nutrition in the first 1,000 days of a child's life returns an average USD 45 and, in some cases, as much as USD 166.¹⁷ Similarly, a reduction of the prevalence of undernutrition to half of the 2009 level by the year 2025 can generate annual average savings from USD 3 million to USD 376 million. Another study covering 15 African countries showed that meeting the 2025 World Health Assembly target for stunting will add USD 83 billion to national incomes of African countries.¹⁸

Hunger also has a hidden, psycho-emotional cost. Going hungry is a humiliating experience, with the potential to diminish the sanctity and dignity of the human person. Hunger, many times, forces people to resort to other equally humiliating experiences, such as trading sex for food or being subjected to bonded labour and slave-like working conditions.

Ensuring that children have enough food is, therefore, not as simplistically characterized a "social welfare" imperative, but a human right and an investment in people's wellbeing, social justice and a country's economic future.

3. Child Hunger: The Drivers

There are numerous factors behind child hunger in Africa. The key ones include:

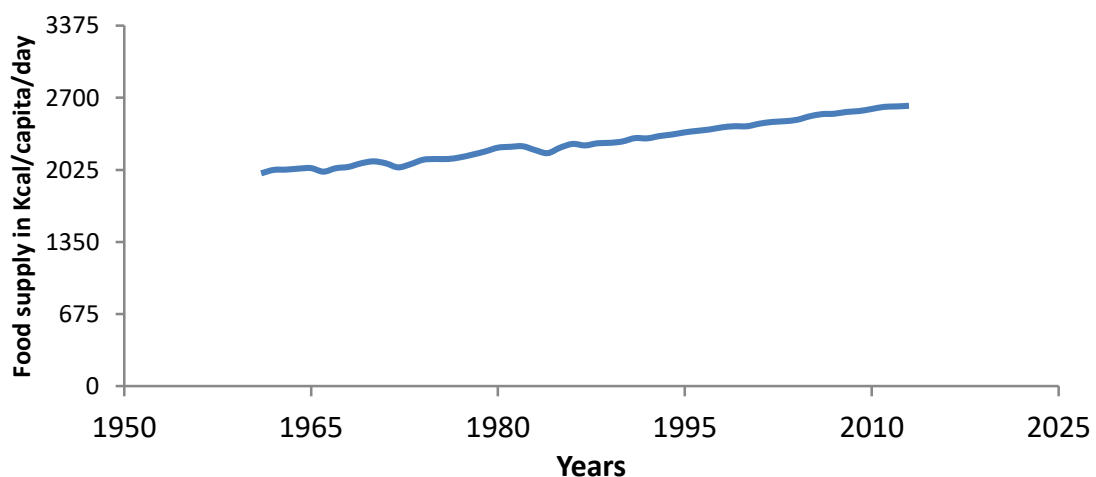
- The poverty of our nations and peoples
- The failure of our governments to protect children's right to adequate food
- The failure of development policy in Africa to deliver equitable growth
- The prevalence of a broken food system
- War and conflict and effects of climate vulnerabilities in large parts of Africa

A few words on some of these important drivers of child hunger.

3.1 A broken food system

Africa's food supply has increased considerably in the past five decades. When expressed in terms of daily calories per person, Africa's food supply has increased from an average daily consumption of less than 2000 kilo calories per person in the early 1960s to about 2600 kilo calories per person in 2013 (see Figure 11). These aggregate figures, however, do not show the disparities in individual consumption.

Figure 11: Trends in food production in Africa expressed in average daily per capita kilocalories, 1961-2013



Source: Based on FAO statistics

Box 1: Proxy measures of children's access to minimum standard of diet and quality

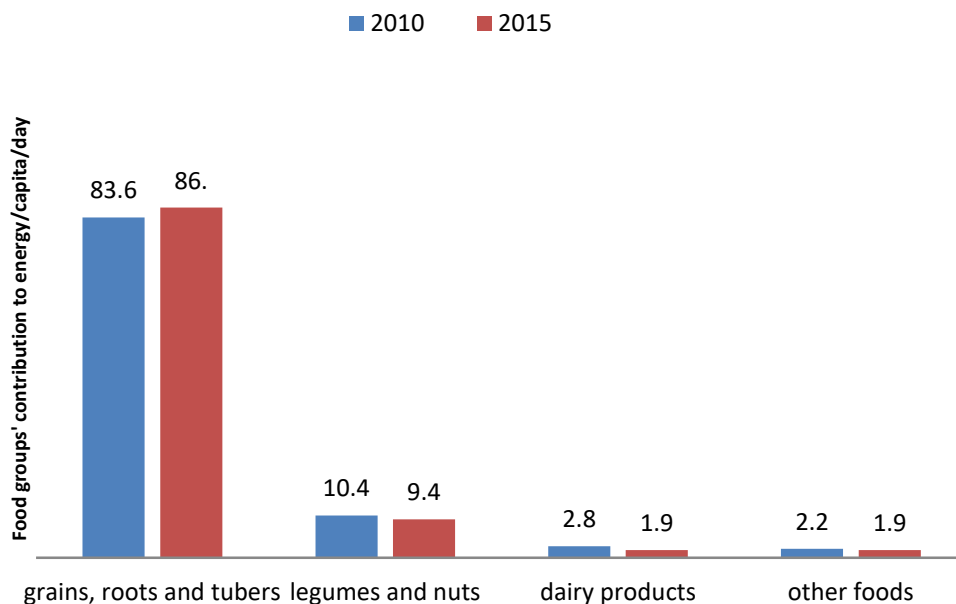
Minimum Meal Frequency (MMF): defined as receiving solid or semi-solid food at least twice a day for infants 6-8 months and at least three times a day for children 9-23 months

Minimum dietary diversity (MDD): diet includes at least four out of the seven food groups (infant formula, milk other than breast milk, cheese or yogurt or other milk products; foods made from grains, roots, and tubers, including porridge and fortified baby food from grains; vitamin A-rich fruits and vegetables (and red palm oil); other fruits and vegetables; eggs; meat, poultry, fish, and shellfish (and organ meats); legumes and nuts.

Minimum Acceptable Diet (MAD): children meeting both MDD and MMF

The discrepancy between increased production and children's access to minimum acceptable diet is partly due to limited crop diversity and of course poor knowledge of nutritional needs. Nutrient-dense foods such as pulses, fruits, and vegetables are generally produced in lesser amount than cereal crops and are therefore largely inaccessible and unaffordable. In Ethiopia, for example, a significant proportion and volume in the increase in food production, from 2010-2015, came from cereal crops.

Figure 12: Composition of food groups produced in Ethiopia



Source: Baye et al.

Conversely, there was a serious shortfall in nutrient-dense foods such as fruit, vegetables and meat - all of which are necessary for preventing hidden hunger and promoting child

growth (Figure 12).¹⁹ Nutritional knowledge and access to markets are also as important as the quantity and quality of food production.²⁰

Ensuring minimum acceptable diet for all requires making nutrient-dense foods affordable and accessible at all times. However, prices of nutrient-dense foods such as animal-sourced diets are much higher in Africa than in other regions.²¹

Furthermore, the already high prices of nutrient-rich foods seem to increase at a faster rate than those of our commodities. A recent study evaluating the cost of a minimum dietary diversity for women in Ghana and Tanzania found prices of nutrient-dense foods such as fruits rose faster than national inflation rates, a trend also reported in Ethiopia and elsewhere.²² If Africa is to address child hunger, policies must be introduced to ensure nutrient-dense foods are produced adequately and affordable to all.

The food system in Africa is broken - the significant increase in food production witnessed in recent years is not matched with diversified and affordable diet to children.

3.2 Inequalities

Child hunger in Africa is partly driven by geographical, rural-urban and gender inequalities. Aggregated regional and national data, although useful for tracking progress, mask disparities at the lower administrative levels and across various groups of populations, thus making it difficult to identify groups where action is needed.

Gender inequalities: Girls, in many African societies, are the last to eat and might also be excluded from nutritious food. They are offered the leftover usually after male household members got more than their fair share of the food on the table. This results in girls being trapped in a cycle of malnutrition, where they give birth to a malnourished and underweight child, with compromised cognitive capacity and productivity, and the cycle continues.

Similarly, according to estimates, 10 to 20 per cent of pregnant women in lower-income countries are vitamin A deficient. This is a micronutrient essential for proper cell growth, and the formation of the heart, lungs, kidneys and other organs in the baby. About 110 million women of reproductive age in Africa suffer from anaemia, facing the risks of higher

rates of morbidity and mortality for both the mother and the child and impairing the child's cognitive potential.

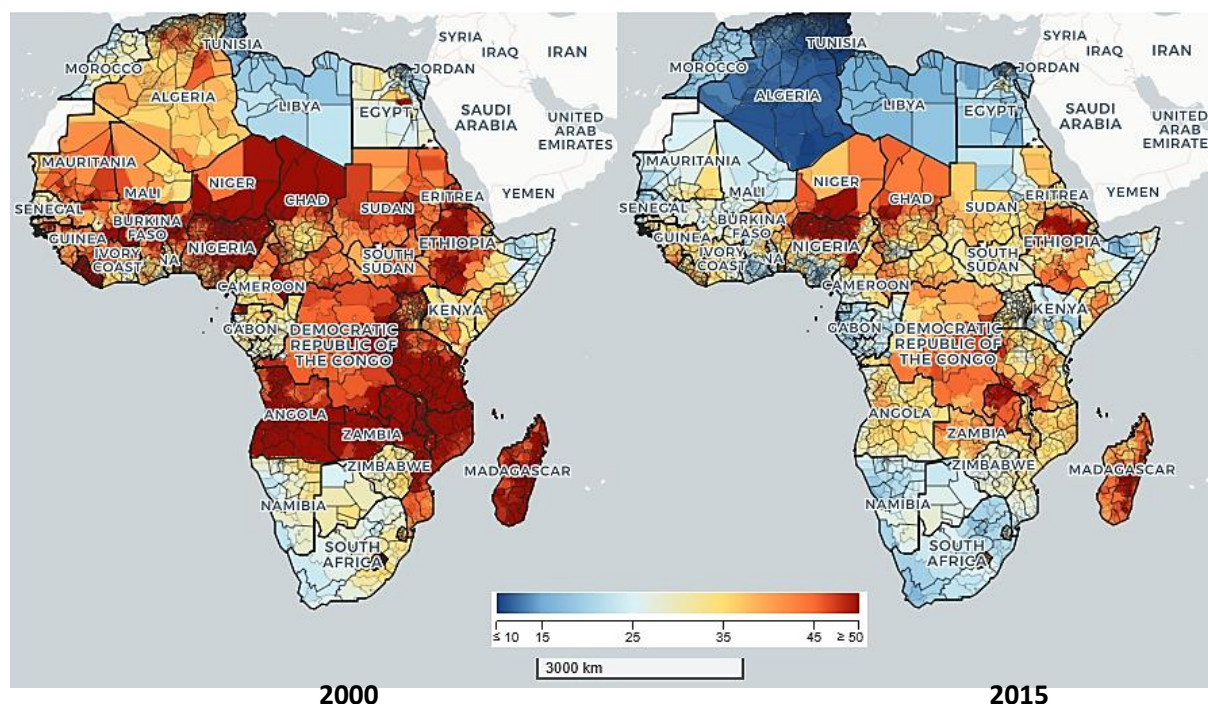
Girls who get access to proper and sufficient nutrition are more likely to succeed in school and in their communities, hence more likely to earn more [up to twenty per cent more than those without schooling], more likely to get married later, delay pregnancy and improve the chance that their newborn survives and thrives. Studies have also shown that literate mothers are more likely to make sure their children are vaccinated, nourished, and educated, and are more likely to earn better income to help support their families.

Under such circumstances, investing in women becomes the easy way out of the cycle of malnutrition. According to FAO, if women farmers had the same access to resources as men, the number of hungry people in the world could be reduced by up to 150 million due to productivity gains.

There is a multiplier effect in addressing the gender dimension of hunger.

Rural-urban inequalities: There are urban-rural variations in the prevalence of child hunger and malnutrition. Figure 13 shows estimates for child stunting in subnational 5km x 5km grids based on existing data. The left-hand map shows the distribution of stunting in 2000 compared to 2015 on the right, illustrating the remarkable reduction across Africa. However, it also reveals the lack of progress in some hotspots including northern Zambia, Madagascar, Burundi, Northern Nigeria, Southern Niger, part of Chad and Northern Ethiopia. Furthermore, there are striking differences within some countries such as Nigeria, where regional variations in the stunting rates vary from less than 10% in some parts of the country to more than 50% in others. Understanding what drives these geographical inequalities is critical to designing appropriate interventions and significantly reducing the prevalence of stunting.

Figure 13: Regional and in-country variations in distribution of stunting. 2000 and 2015



Source: adapted from <https://vizhub.healthdata.org/lbd/cgf>

There are many reasons for geographical disparities in child hunger. These include differences in environmental conditions; whether or not there is peace and stability; extent of infrastructural development; and differences in levels of economic development. Figure 14 illustrates that stunting prevalence is higher in rural than in urban areas in almost all African countries. In Burundi for example, the prevalence of rural stunting is about twice that of urban areas. In many parts of the continent, vulnerable and marginalised rural populations remain trapped in a vicious cycle of poverty, ill health and despair resulting from poor infrastructure, low income, gender inequality and limited access to education and health services.

Figure 14: Prevalence of stunting by rural-urban residence, 2017



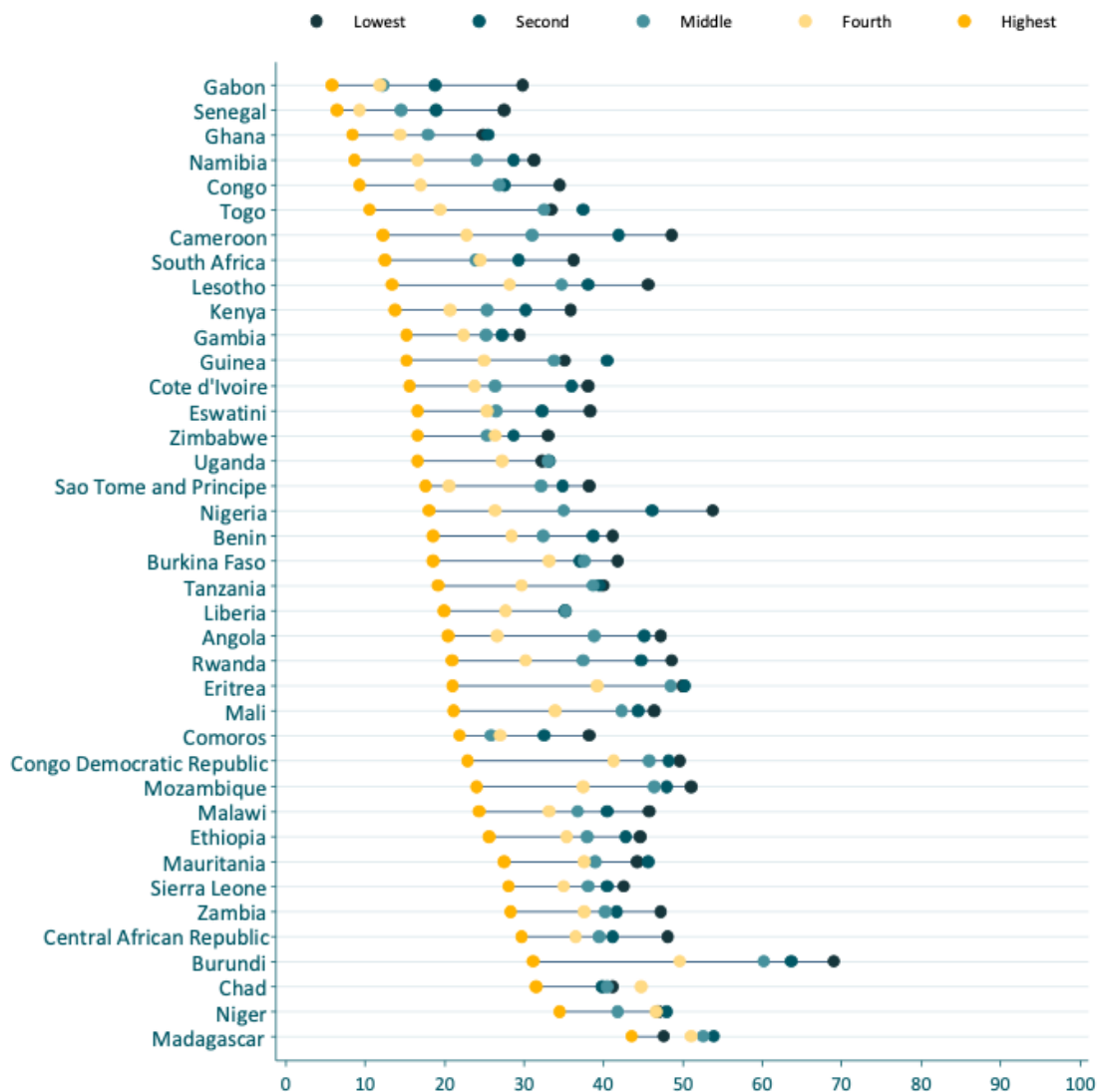
Source: based on DHS data

Income inequalities: Access to food is primarily the result of poverty and inequalities in income. The proportion of people in extreme poverty in sub-Saharan Africa was estimated at 41% in 2015. Poverty is especially serious amongst children. The proportion of children in extreme poverty in sub-Saharan Africa was estimated to be 49% in 2013, most of whom are likely to go without food or with insufficient food.

In addition to poverty, income inequalities are also the other driver of child hunger. In most African countries, there are striking differences in stunting by household income

levels: children in relatively richer families are less likely to be stunted. There is a stark difference in stunting between children in the poorest and the richest households, for example, in Burundi, Cameroon, Nigeria and Lesotho (see Figure 15).

Figure 15: Prevalence of stunting by wealth quintile, 2017



Source: based on DHS data

Children in poor families and those living in rural settings are the most affected by child hunger.

3.3 Non-inclusive economic growth

In theory, economic growth should directly or indirectly benefit vulnerable groups including children through improved access to food, nutrition and other basic services. However, Africa's economic growth has not resulted in a commensurate reduction in child hunger. Analysis of 121 DHS surveys from 36 low-and-middle income countries supports this argument.²³ Economic growth, although important, is not enough to eliminate child hunger. It needs to be accompanied by nutrition-sensitive policies and interventions aimed at addressing hunger.

Box 2: Economic growth and associated stunting changes

A 2% average annual increase in GDP per capita (in 2011 international USD) was associated with:

- 4 % reduction in stunting (2000-17) in Algeria
- about 2.5 % increase in Kenya
- less than 0.5% reduction in the DRC

Similarly, a 4% average annual increase in GDP was related to:

- 3% annual reduction in stunting in Ghana, but no change in Nigeria

Source: World Bank

3.4 Climate change, migration and conflict

Extreme weather events, migration and conflicts have increased in number and intensity in several African countries.²⁴ The impact of climate change on hunger is well established and documented. The recent El Niño phenomenon in eastern and southern Africa is illustrated in Box 3 as an example. Extreme weather manifested in prolonged drought or flooding undermines crop and livestock production. It limits the availability and accessibility of food and leads to food price hikes, migration, civil unrest and conflicts, which perpetuate starvation, undernutrition, and hunger.²⁵ Inadequate government responses also exacerbate these problems.

Box 3: The El Niño phenomenon and its effect on children

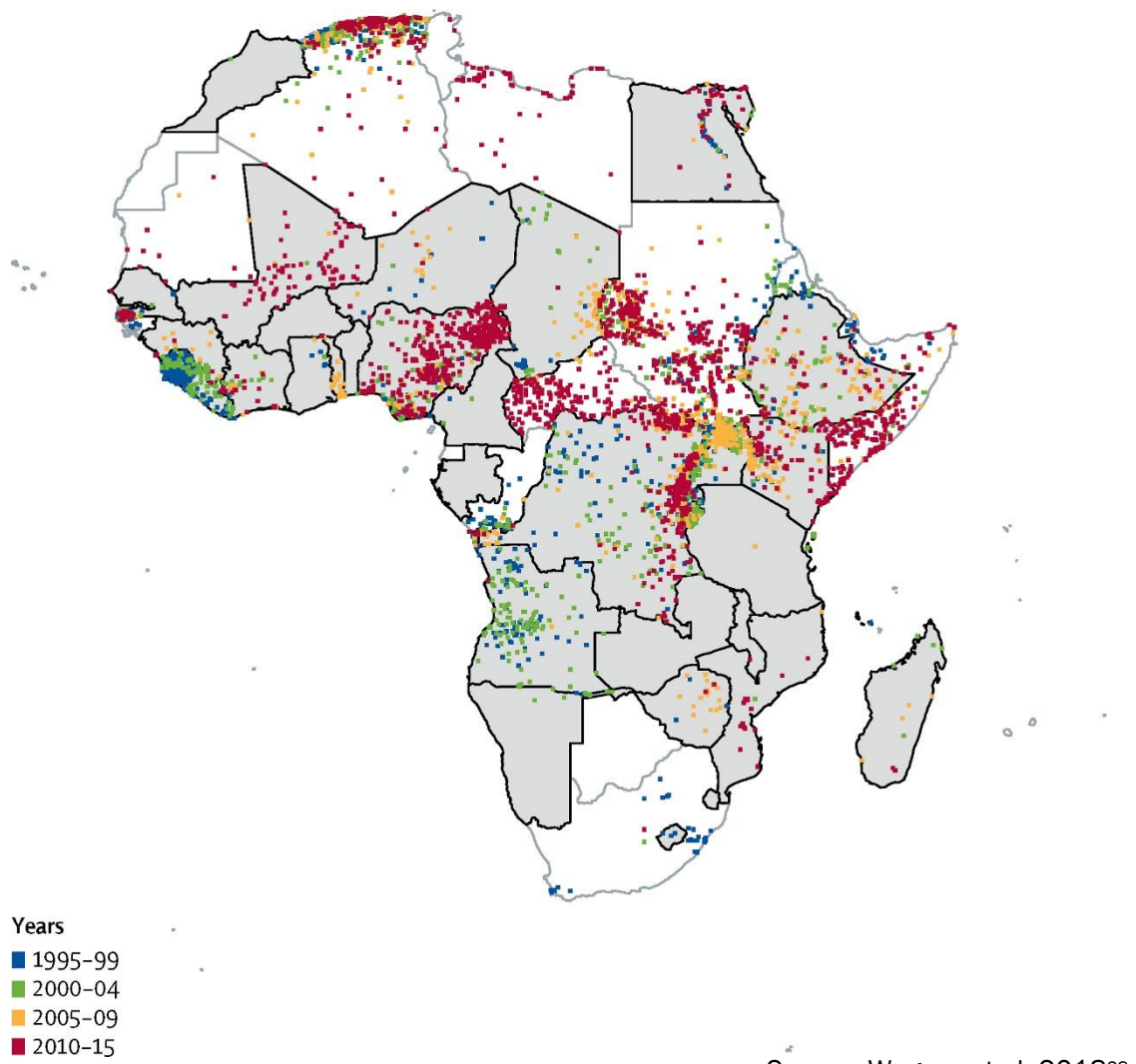
El Niño is linked to the warming of the sea surface temperature in the tropical Pacific. This natural event occurs every two to seven years, lasting 6-24 months, and often leads to reduced rainfall and droughts - although conversely it can also bring heavy rainfall and flooding.

The 2015-16 El Niño was one of the strongest of the past 100 years and resulted in record-breaking conditions in many tropical and subtropical countries. Most affected countries include: Angola, Ethiopia, Lesotho, Madagascar, Malawi, Mozambique, Somalia, South Africa, Eswatini (Swaziland) and Zimbabwe.

The 2015-16 El Niño had devastating impact on crops and livestock. It severely undermined the livelihoods of farmers and their families, and threatened the food security and nutrition of affected communities. In Ethiopia alone more than 10 million people needed help in 2016. The same year, drought hit the Puntland and Somaliland regions of Somaliland leaving nearly 4.7 million people facing food insecurity, while Eswatini, Lesotho, Malawi, and Zimbabwe declared drought emergencies. In the Southern Africa region, about 39.7 million people suffered food insecurity at the peak of the 2016/17 lean season. Although El Niño ended in 2016, it continues to affect weather patterns and the consequences are still being felt.

Hunger can be especially severe during periods of conflict. Communities often find their livelihoods and their ability to feed themselves under additional and special threat. Not surprisingly, therefore, countries most affected by armed conflict and violence are also the ones with the highest rates of child hunger (Figure 16). The proportion of undernourished children is estimated to be two to three times higher in protracted conflict zones than in more peaceful settings.²⁶ About 75% of all stunted children under the age of five live in countries affected by armed conflict. This strong link between child hunger and conflicts was recently acknowledged by the UN Security Council (resolution #2417).²⁷

Figure 16: Geographic distribution of armed-conflict in Africa, 1995-2015



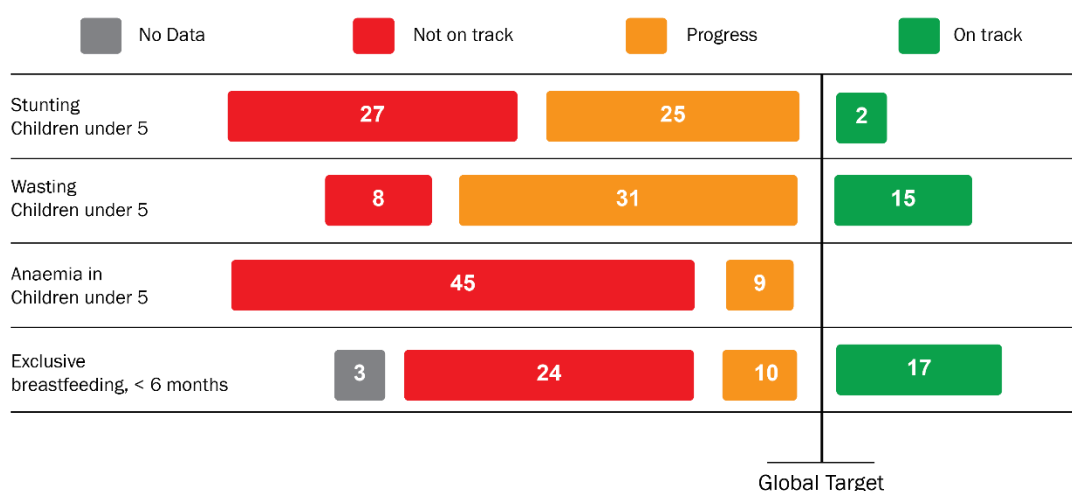
4. Child Hunger: Policy Responses and Lessons

The last few years have witnessed considerable progress in policy-making towards addressing child hunger, especially at the continental level. This has been demonstrated by the adoption of the Comprehensive Africa Agriculture Development Programme (CAADP), the Malabo declaration on Accelerated Agricultural Growth and Transformation for Shared Prosperity and Improved Livelihoods, AU Agenda 2063: The Africa we want, AU Agenda 2040 for Children, the SDGs and the African Regional Nutrition Strategy (ARNS) 2015-2025. These policy documents, with their distinct targets and aspirations, provide an important framework for the AU to support and encourage countries to end child hunger.

The African Regional Nutrition Strategy (ARNS 2015-2025),²⁹ is an important policy instrument that was adopted by the AU Executive Council to identify key strategies and actions for the elimination of hunger in Africa. The Strategy recognises the linkage between a child's wellbeing and the mother's nutritional status during pregnancy. Given that a significant proportion (20-30%) of wasting and stunting can be traced back to conditions during pregnancy, the strategy underlines the importance of maternal nutrition and health to children's nutritional status and health.³⁰ Most importantly, the ARNS sets targets for countries to reduce the number of children who are stunted by 40%, low birthweight by 30%, and childhood wasting to less than 5% by 2025.

Building on these targets, quite recently, the AU and the African Development Bank (ADB) launched the Continental Nutrition Accountability Scorecard³¹ to track countries' progress in achieving nutrition security targets in the ARNS and other frameworks. The initial findings of the Scorecard indicate that only two countries are on track to meet stunting targets; 15 countries to meet wasting targets; and none to meet targets of reducing anaemia among under-5 children. Several African countries will not meet any of the ARNS targets.

Figure 17: Progress in achievement of the child hunger related targets in the African Regional Nutrition Strategy and other frameworks



Source: The Continental Nutrition Accountability Score Card 2019³²

Highlights of good practices in combatting child hunger

The experience of countries which made significant progress in combating child hunger shows that the countries that made visible progress are those that have implemented a mix of effective nutrition-specific (such as promotion of exclusive and continued breastfeeding, improving complementary feeding, etc) and nutrition-sensitive interventions (such as social safety nets, early child development, etc).³³ Many of these countries also share common features which, among other things, include:

- Clear and bold political commitment to ending child hunger
- Improved accountability of governments to child rights and wellbeing
- Pro-child social protection programmes

1. Clear and bold commitments at the highest level to end child hunger

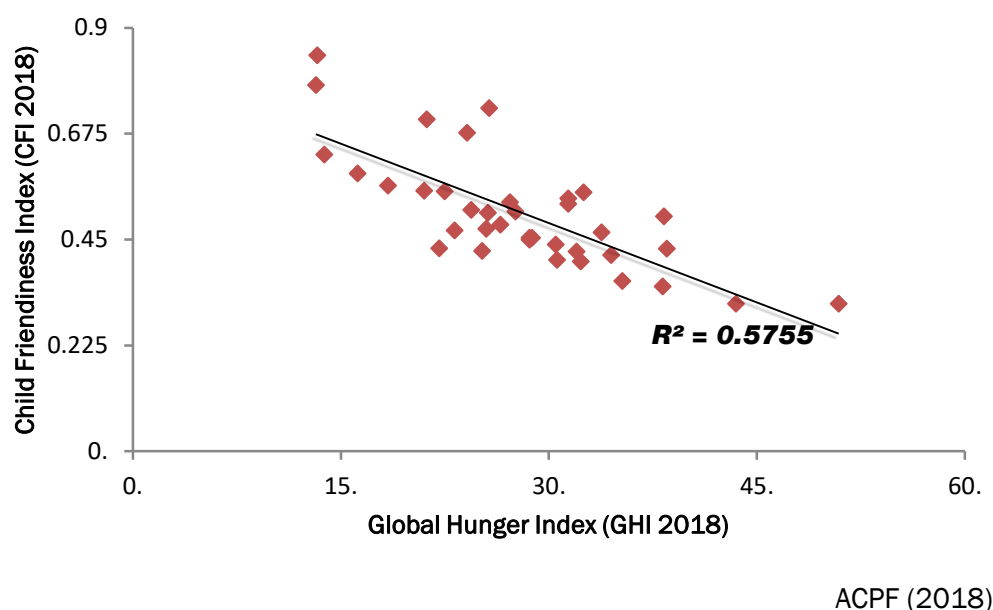
Countries such as Angola and Senegal have demonstrated their commitment to ending hunger by establishing structures and institutions well-positioned within government hierarchy, close to the heart of the highest decision-making entity within government. For example, Angola created a national council on food and nutrition in 2009 that is directly linked to the Office of the President. In Senegal, an Agency in Charge of the Fight against Malnutrition (Cellule de Lutte contre la Malnutrition) which is responsible for policy oversight and evaluation was established attached to the Prime Minister's Office. Other countries such as Ethiopia have demonstrated political commitment by creating a national strategy with clear time-bound targets and a multi-sectoral co-ordination body. Ethiopia created a national nutrition coordination body in 2008, followed by two comprehensive national nutrition programmes in 2013 and 2016 to implement the Seqota Declaration³⁴ – a declaration that aims at ending undernutrition by 2030. Ethiopia and Senegal have also successfully implemented their national nutrition programmes and joined the global scaling-up nutrition (SUN) movement of countries committed to invest and improve nutrition.³⁷

These structures and systems have provided a much-needed political visibility to food and nutrition and helped streamline decision making processes that are necessary to implement national policies and programmes. They also signify these countries' clear and bold commitment and action to ending hunger.

2. Improved accountability of governments to child rights and wellbeing

Performance in combating hunger is very much related to the level of accountability to children's rights and wellbeing. Figure 18 shows the strong correlation of governments' child-friendliness with their performance in reducing hunger. The Child-Friendliness Index is a measure of a government's commitment to children, which is manifest in its efforts to put in place child-focused policies, budgets and structures.

Figure 18: Association between CFI 2018 and GHI 2018 scores



Countries with a high CFI score, for example, also performed relatively better in GHI scores. What emerges from this analysis is that the more friendly a government is to children, the more responsive and accountable it is to address child hunger and other forms of deprivations.

3. Pro-child social protection programmes

Social protection is increasingly gaining recognition among African governments as an effective strategy to combat deprivations, including hunger, particularly among marginalized and vulnerable groups. This has gained momentum with the adoption of the AU's Social Protection Framework in 2009. Currently, many countries in Africa have some kind of social protection scheme although the scope, targets and delivery modalities vary among countries. In general, the scale and adequacy of these programmes is not commensurate with the magnitude and severity of deprivations that most vulnerable groups are experiencing.

There is thus a growing body of evidence demonstrating the effectiveness of social protection programmes in addressing child hunger. Cash transfer schemes have generally proved effective in improving poor families' standard of living and boosting children's nutrient consumption.³⁵

The average safety net programme in Africa increases caloric acquisition by 13%.³⁶ For example, Kenya's cash transfer programme significantly increased the frequency of consumption of nutrient-rich food, and greater energy intake among children.³⁷ Malawi's successful Mchinji cash transfer scheme and South Africa's Child Support Grant have also contributed to a significant improvement in child health and nutrition.³⁸ Ethiopia's Productive Safety Net Programme has also contributed to the reduction of food insecurity within households and helped increase the quantity, quality, and frequency of food consumption among children.³⁹

Social protection programmes are also the most effective means for reaching out to people exposed to natural disasters and other emergencies. The recent El Niño condition in East Africa showed how shock-responsive social protection schemes in the region helped vulnerable communities cope with the impact of climate change and overcome imminent danger of food insecurity and starvation.⁴⁰

Evaluation studies further show that these programmes are generally effective in terms of reducing hunger and overcoming other deprivations through increasing food consumption levels. For example, in countries such as South Africa, Ethiopia, Ghana, Kenya, Senegal and Tanzania which have relatively large social protection programmes, expenditure on food increased by 36 cents on every dollar transferred to the beneficiaries. The most successful programmes are those targeting very poor households and making timely payments at a low transaction cost. In the Zambia Child Grant Programme, for example, 98% of households with short walks to payment sites (low transaction cost) receive payments on time and this has brought improved results in addressing hunger.

There is compelling evidence on the social and economic benefit of investment in social protection. Despite this, most countries have failed to invest in this important area, and existing programmes suffer from huge funding gaps. Average spending on social protection across Africa is around four per cent of national income with significant differences between countries.⁴¹ As illustrated in **The African Report on Child Wellbeing 2018**, effective social protection is strongly related to good governance and political commitment. Countries with poor governance tend to invest less in social protection programmes despite the high levels of deprivation amongst their populations and the lack of access to essential services.

Lessons from Other Regions: School Feeding Programme in Peru

Peru has managed to reduce stunting by more than 50% within a space of ten years between 2005 and 2016. A key ingredient in Peru's success is the focus on cost-effective, pro-poor social services. The strategy prioritised the critical first thousand days from conception through to the first two years of life (after which the damage caused by malnutrition is largely irreversible).

Peru is able to sustain these gains through a national school feeding programme called Qali Warma. The programme is managed by the Ministry of Development and Social Inclusion (MIDIS) and is fully funded through public spending. Qali Warma is near universal and reaches more than three million students across nearly tens of thousands of schools daily, including schools in indigenous communities.⁴²

Well-designed school-feeding programmes using locally grown ingredients can serve multiple purposes as part of a wider social protection system, including in preventing hunger and supporting good nutrition and education outcomes; helping children enrol in school; reducing absenteeism and dropout; reducing poverty by boosting household and community income; and increasing demand for a variety of accessible, affordable, nutritious foods.

5. Concluding Remarks

Hunger is one of the most pressing political, economic, moral and existential conundrums facing Africa today. Child hunger is a persistent, naked, brutal African reality. Millions of children go hungry. A substantial number of them suffer from severe forms of hunger every day, every month and every year.

Hunger has adverse consequences on the physical, cognitive, social and emotional development of children. It is one of the major causes of child mortality. It permanently affects their learning capabilities, health condition, future productivity and earnings. It therefore affects the economic wellbeing and future of countries, not to mention the fact that it aggravates social injustice.

Several factors contribute to child hunger. Poverty is the primary cause and therefore the reason for no or limited food. Then too there is Africa's broken food system which has failed to supply or provide enough, nutritious food for the population at large, including children.

Extreme weather manifested in prolonged drought or flooding and on-going conflicts in several countries have further complicated the supply of and access to food. They have led to food price hikes, migration, civil unrest and further hunger.

The consistent and impressive economic growth that many African countries have enjoyed over the last years has not translated into a visible reduction in child hunger. Economic growth has been uneven and has not been accompanied or preceded by inclusive, pro-child and pro-poor policies.

There can be no excuse for this tragic paradox of children dying of hunger in the midst of a fairly impressive economic performance. Yet it is there though in silence, largely unacknowledged and tolerated, perhaps because it is a problem faced by the voiceless. It is a deplorable indictment of our current socioeconomic and political order.

The severity and scale of the problem is such that it requires nothing short of a radical and transformative political and economic agenda. It means above all: (i) political commitment at the highest political level; (ii) a constitutional or legal commitment to ensure that no child goes hungry and to make it obligatory for governments to provide universal access to a minimum acceptable amount of food for all children; (iii) provision of targeted social

safety nets for the poor, especially child- and female headed households; and (iv) the institution of school-feeding programmes across regions and communities.

Action is urgently needed. The issue is not resource limitation, though undoubtedly the demands on the public purse cannot be denied. The issue is that we have a broken governance system and an unresponsive political leadership across the continent. Child hunger is the offspring of the unholy alliance of political indifference, unaccountable governance and economic mismanagement. The enduring solution therefore lies in the public and political domain. This requires, for a start, public mobilisation and an Africa-wide movement to hold our African governments accountable and end child hunger.

SOME KEY DEFINITIONS

Malnutrition: manifestation of poor nutrition including undernutrition, overweight and obesity.

Undernutrition: refers to any form of nutritional deficiency (including stunting, underweight, wasting and micronutrient deficiencies) with the exception of overweight and obesity.

Child stunting: stunting is a sign of chronic hunger, and is defined as short height for age among children aged 6-59 months. These children can suffer severe irreversible physical and cognitive damage lasting a lifetime, and even affecting the next generation. It is measured in height-for-age Z scores ≤ -2 relative to the World Health Organization (WHO) child growth standards.

Child wasting: wasting is a sign of acute hunger and is defined as low weight for height among children aged 6-59 months. Wasting results from recent rapid weight loss or failure to gain weight. A child who is moderately or severely wasted has an increased risk of death, but treatment is possible. It is measured in weight-for-height Z scores ≤ -2 relative to the WHO child growth standards.

Overweight and obesity: a body mass index (BMI) ≥ 25 (overweight) and ≥ 30 (obese) in non-pregnant adults. This increases the risk of diet-related non-communicable diseases.

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