

An estimated 44.4% of children less than five years of age in Ethiopia are moderately or severely stunted (EDHS 2011) and 28.7% are underweight. The situation is more serious in some regional states. In Tigray, Amhara, and Afar, more than half of children under the age of five are stunted. Inappropriate infant and young child feeding practices play a significant role in chronic child malnutrition. Micronutrient deficiencies are prevalent in children 6-59 months of age and women between 15 – 49 years of age. In pastoralist areas such as Afar and Somali, one in five children suffer from acute malnutrition. The high rate of malnutrition contributes to the country's elevated under-five mortality rate of 88 deaths per 1000 live births, with malnourishment accounting for over half of all under-five deaths.

Nutrition is experiencing a global renaissance. In Ethiopia, Save the Children targets agrarian and pastoralist communities, working in tandem with the Federal Ministry of Health to ensure that children in Ethiopia have adequate access to nutritional resources. We engage policy makers to advocate for various nutrition-related platforms and continue to support and strengthen capacity for management of acute malnutrition. **In 2012, Save the Children provided direct nutrition services to more than 750,000 children in Ethiopia.** Our current nutrition portfolio totals more than USD\$25 million. We strive to support the government in delivering high quality high impact nutrition services throughout the year in a sustainable way to eradicate stunting in children.



Colin Crowley/Save the Children

Tigabu, two, receives his first treatment of high-nutrient peanut paste, a high-energy food for severely malnourished children.

INDICATOR	2005	2011
Children < 5 years underweight	38%	29%
Children < 5 years stunted	52%	44%
Children < 5 years wasted	12%	9%
Maternal malnutrition (BMI <18.5)	27%	27%

## REDUCED PREVALENCE OF STUNTING

### OUR EXPERIENCE

- ❖ In partnership with USAID, our ENGINE programme supports roughly **350,000 children** with direct nutrition services annually.
- ❖ We provided **30,278 acutely malnourished children and pregnant & lactating women** with life-saving nutrition services in Afar.
- ❖ With USAID, we offer **nutrition-sensitive responses for people living with HIV** through our Food by Prescription programme.

**THE PROBLEM** Stunting is most often caused by poor child health and childcare, but can begin in-utero due to poor maternal health and nutrition, which are linked to inadequate growth and low birth weight. Inappropriate infant and young child feeding practices play a significant role in chronic child malnutrition and stunting in Ethiopia. Children who are stunted have lower life expectancy, are more vulnerable to disease, have decreased cognitive development, are less productive, and typically perform poorly in school. The effects of stunting are permanent.

**OUR APPROACH** To reduce childhood stunting, Save the Children targets both maternal and child health and nutrition. The first 24 months after birth are critical in stunting prevention and create a 'window of opportunity' for intervention. By developing programmes to address maternal undernutrition, we can significantly contribute to breaking intergenerational effects and its impact on maternal health and productivity. We work alongside the government to deliver **high quality, high impact, locally sourced, and sustainable nutrition services** to eradicate childhood stunting.

## SCALING UP NUTRITION (SUN)

As chair of the Ethiopian Civil Society Coalition, Save the Children is promoting the Scaling-Up Nutrition (SUN) movement—a partnership of developing countries, civil society, the private sector, research institutions, UN bodies, the World Bank, and other donors to promote rapid country led scale up of cost-effective, direct nutrition services.

- ✓ **We're leading Ethiopia's civil society in advocating for global nutrition sensitive reforms.**
- ✓ **We're partnering to scale up our evidence-based nutrition strategies across the country.**



Karin Beate Nosterud/Save the Children

Samuel, three, awaits treatment at one of Save the Children's therapeutic feeding centres in Oromia.

## STRENGTHENED SYSTEMS AND COORDINATION MECHANISMS

**THE PROBLEM** Pre-lacteal feeding, bottle feeding, discarding of the colostrum, and other cultural taboos play a significant role in poor caring and feeding practices. However, Ethiopia's national health extension package (HEP), which includes nutrition services, is largely under-capacitated to change these cultural taboos. In pastoralist areas, health service coverage is limited while antenatal care in Afar (19.2%) and Somali (6.6%) are well below the national average (52.1%). In light of this fragile health care delivery system, effective nutrition services stand out as a critical challenge.

**OUR APPROACH** Save the Children is building the capacity of local health systems to deliver **effective nutrition sensitive services without external support**. Our vision is a robust mechanism for **effective community management of acute malnutrition** through improved monitoring and response processes. Through trainings to promote understanding of food consumption practices, water, sanitation, and the management of acute malnutrition, we can **empower communities** to better respond to children's nutritional needs. Working in collaboration with the government, we can strengthen local systems by providing logistics, supplies, training, reporting, and coordination.



Karin Beate Nosterud/Save the Children

A child drinks a locally-made low nutritional mixture while waiting to receive treatment at a feeding centre.

### OUR EXPERIENCE

- ❖ In 2012, Save the Children trained **1,019** health extension workers, **1,123** voluntary Community Health Workers, **715** health workers, and **78** food distribution agents.
- ❖ We strengthened **107** Outpatient Therapeutic Programmes (OTP) in pastoral settings with logistical and training support.
- ❖ We provided **40,000 people** with health and nutrition related education through our Outpatient Therapeutic Programme (OTP) and Targeted Supplementary Feeding Programme (TSFP).

DID YOU KNOW  
**756,000**

children received direct nutrition services from Save the Children in 2012.

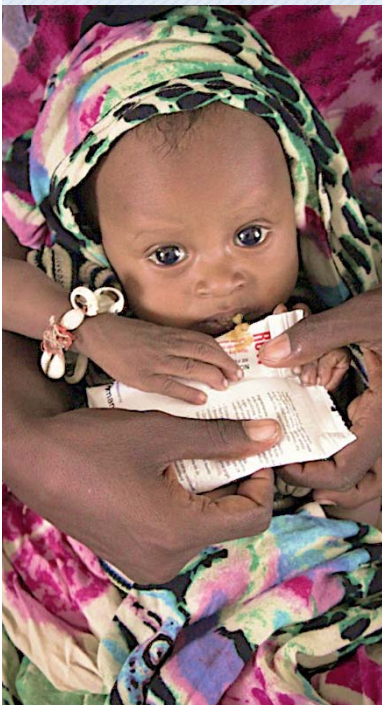
## RESEARCH AND DEVELOPMENT FOR INNOVATION AND ADVOCACY

**THE PROBLEM** Effective long-term responses to childhood undernutrition require sustainable, locally sourced supply chains and reliable nutrition surveillance data. Seasonal variances in food consumption, water availability, and sanitation practices are poorly understood but contribute greatly to the prevalence of stunting and malnutrition in Ethiopia. Without innovative approaches and practices to address the problem, Ethiopia's children will continue to face a nutrition crisis.

**OUR APPROACH** We are partnering with relevant local research and teaching institutions and conducting operational research to **close the knowledge gap** on barriers to effective and sustainable nutrition interventions. We are exploring the impacts of high nutrient milk supplements, integrated sanitation and hygiene services, and national policy reforms to **reduce stunting and undernutrition**. Using these breakthrough strategies, we can achieve greater outcomes for children that emphasise community accountability and enhanced monitoring mechanisms.

### OUR EXPERIENCE

- ❖ Save the Children partnered with the Institute of Development Studies to **conduct operational research and offer capacity development courses** for partner staff on nutrition policy and implementation.
- ❖ Through Save the Children's **Alive and Thrive** initiative, we researched optimal methods of integrating **infant and young child feeding (IYCF) support** into community management of acute malnutrition interventions in SNNPR for children, local leaders, mothers, and other community members.



Amina, 21 holds Habib, 7 months, inside the Elidaar OTP Centre in Afar

Seifu Assegid/Save the Children

**Save the Children is the world's leading independent organisation for children.** Our vision is a world in which every child attains the right to survival, protection, development, and participation. Our mission is to inspire breakthroughs in the way the world treats children to achieve immediate and lasting change in their lives.

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