OBJECTIVES AND RECOMMENDATIONS

The Government of Ethiopia has declared its commitment to end child undernutrition by 2030 through the Seqota Declaration. The National Nutrition Program 2016-2020 (NNP-II) outlines a strategy to improve nutrition that is based on proven nutrition interventions, and is implemented across sectors with coordination among government and development partners. However, there is not yet a routine monitoring system to track funding going towards NNP-II objectives across sectors. Routine, multi-sectoral resource tracking for nutrition is important for joint planning, priority setting, and monitoring NNP-II implementation efforts across stakeholders.

In a step towards routine monitoring, the Federal Ministry of Health of Ethiopia led a nutrition resource tracking exercise to consolidate data on nutrition funding from multiple sectors (e.g. health, agriculture, WASH etc.) and stakeholders (e.g. government and development partners). This brief summarizes the analysis of historic funding for nutrition-specific and -sensitive interventions, NNP-II objectives, and regions (where possible).

Nutrition budget and expenditure data were collected from 55 development partners, and the 13 government ministries and agencies that were signatories to the NNP-II. Funding data for EFY 2006 to 2007 (Gregorian calendar years 2013/14 to 2014/15) represent reported expenditures, and funding data for EFY 2008 (2015/16) represent budget allocations. Please refer to the full technical report for more information on the methods and findings.

POLICY RECOMMENDATIONS

Programmatic:

» **Increase investments in nutrition-specific activities** in line with the NNP-II for greater impact on nutrition outcomes. Compared with costs outlined in the NNP-II, the findings point to a potential $70 million resource gap for nutrition-specific programing in year one of the plan.

» **Enhance the nutrition sensitivity of programs** in agriculture, education, water and sanitation, and social security sectors by leveraging existing resources. For example, adapt program design to include nutrition goals, activities, and indicators.

Resource tracking and systems strengthening:

» **Routinely track resources for nutrition across sectors.** This requires a commitment from all stakeholders to report funding flows on a routine basis for planning purposes.

» Convene nutrition stakeholders, including government and development partners, to **build consensus on ways to identify and track nutrition financing data**; and explore ways to systematically track nutrition investments within their own monitoring systems.

» **Use multi-sectoral nutrition financing data to support allocative decisions** about human resources, capacity building, and programmatic scale-up, and to shape the nutrition governance agenda.

» **Invest in systems strengthening and capacity building** so that routine resource tracking across sectors is conducted sustainably through public systems.

» **Promote sustainable, on-budget financing options for nutrition** with monitoring mechanisms that ensure that funds make it to priority interventions.
REPORT SUMMARY

NUTRITION EXPENDITURES NEARLY DOUBLED BETWEEN EFY 2006 TO 2007...

<table>
<thead>
<tr>
<th>Year</th>
<th>Spent/Budgeted</th>
</tr>
</thead>
<tbody>
<tr>
<td>EFY 2006</td>
<td>$181M spent</td>
</tr>
<tr>
<td>EFY 2007</td>
<td>$330M spent</td>
</tr>
<tr>
<td>EFY 2008</td>
<td>$455M budgeted</td>
</tr>
</tbody>
</table>

largely driven by investments in nutrition-sensitive programs, including the ONE WASH National Program and the Productive Safety Net Program-IV (PSNP-IV)

EFY 2006: $54M spent
EFY 2007: $69M spent
EFY 2008: $54M budgeted

...BUT SIMILAR GROWTH IS NOT SEEN FOR NUTRITION-SPECIFIC PROGRAMS

SEQUOTA DECLARATION

In 2015, the Government of Ethiopia launched the Seqota Declaration as a commitment to end child undernutrition in Ethiopia by 2030.

OBJECTIVES FOR EFY 2008

OBJECTIVE 1 & 2 ($92M):
Promote nutrition for women & adolescent girls; Improve nutrition of children up to 10 years

OBJECTIVE 3 ($37M):
Improve nutrition services for communicable & non-communicable/lifestyle related diseases

OBJECTIVE 4 ($320M):
Strengthen implementation of nutrition-sensitive interventions across sectors

OBJECTIVE 5 ($36M):
Improve multi-sectoral nutrition coordination & capacity to implement NNP

OVERALL NUTRITION BUDGET IN EFY 2008

$31 PER CHILD UNDER 5

INCLUDING (PER CHILD)
$3.7 FOR NUTRITION-Specific
$22.7 FOR NUTRITION-Sensitive
$4.7 FOR EMERGENCY RESPONSE

POLICY RECOMMENDATIONS

FILL THE $70 MILLION RESOURCE GAP FOR NUTRITION-Specific PROGRAMING

ENHANCE THE NUTRITION SENSITIVITY OF PROGRAMS IN OTHER SECTORS

TRACK RESOURCES FOR NUTRITION ACROSS SECTORS ON A ROUTINE BASIS

STUNTING in children under 5
ANEMIA among women

2000 2016

2005 2016

57% 38%
27% 23%

PROGRESS IN IMPROVING NUTRITION
NUTRITION FUNDING OVER TIME

Nutrition expenditures to support NNP-II strategic objectives nearly doubled between EFY 2006 and 2007. By EFY 2008, nutrition budget allocations were even higher.

As shown in the Figure to the right, the increase in nutrition funding over time was largely driven by nutrition-sensitive investments, including the ONE WASH National Program, which began in EFY 2007, and the Productive Safety Net Program-IV (PSNP-IV). In EFY 2008, the PSNP-IV’s nutrition-sensitivity was enhanced by a change in program design that tailored the program more towards nutrition outcomes.

Funding for high-impact nutrition-specific interventions represents a small fraction of total annual investments relative to other investment areas, and growth has been slow over time.

REGIONAL ANALYSIS

Data on regional distributions were collected to inform stakeholder discussions on allocative efficiency of funding, though only 47% of budget allocations in EFY 2008 could be fully disaggregated by region, excluding PSNP and ONE WASH. In EFY 2008, total nominal budget allocations for nutrition were highest in Amhara and Oromia, the two most populous regions. Based on a preliminary assessment, there does not seem to be high level of targeting based on regional nutrition context (i.e., stunting and wasting prevalence). However, data limitations of the current regional analysis exist and point to the need for further research. Regional analysis is particularly important for the regions with high undernutrition burdens that have recently experienced an increase in either stunting or wasting prevalence: Dire Dawa, Harari, Amhara, Benishangul-Gumuz, and Gambella.²
Most funding for nutrition in Ethiopia was contributed by development partners, and the majority was managed by the government—especially for nutrition-sensitive investments.

In EFY 2008, 70 percent of all funding for nutrition was government-managed, but this varies by nutrition program type. Of nutrition-sensitive funding, 83 percent was government-managed, primarily driven by large, multi-donor supported programs managed by the Ministry of Finance and Economic Cooperation such as ONE WASH and PSNP-IV. Of nutrition-specific funding, 45 percent was government-managed, along with 30 percent of emergency response funding. All other funding was off-budget, meaning it was not channeled through public systems. There is not yet a routine mechanism to track and compile off-budget funding for nutrition across sectors to inform planning and priority setting discussions.

By participating in routine, multi-sectoral resource tracking for nutrition, the Government of Ethiopia and development partners can jointly generate the data needed to build the investment case for nutrition and ensure efficient resource allocation for priority NNP-II interventions.

**Sources and Channels of Nutrition Funding**

**Notes**

This resource tracking effort was done in parallel to Ethiopia’s Health Accounts Six (HA VI) exercise by the Federal Ministry of Health for EFY 2006 using the SHA 2011 framework.

Please see the full Technical Report for more details.

Due to rounding, numbers presented within this report may not sum to exact total amounts shown.

INGOs: international non-governmental organizations

**References**
