

# Multi-sectorality comes of age in the Philippines: Rollout at sub-national level



ENN's SUN Knowledge Management team

## Introduction

The Philippines is an archipelago in Southeast Asia with a population of over 105 million. Although a lower middle-income country, the latest Expanded National Nutrition Survey (ENNS) (2018-2020) shows a prevalence of stunting in children under five (CU5) of 30% and a CU5 wasting of 5%, while 4% of CU5 are overweight<sup>1</sup>. Over the past decade, stunting and wasting prevalence rates have remained relatively stagnant<sup>2</sup>.

Between July and September 2019, Emergency Nutrition Network (ENN) conducted a detailed case study under the guidance and facilitation of the Philippines National Nutrition Council (NNC) to explore sub-national nutrition programming, with a specific focus on the implementation of the Philippine Plan of Action for Nutrition in two locations, Gingoog City in Misamis Oriental province and Quirino province<sup>3</sup>. This article summarises the main findings.

## Evolution of a multi-sector approach to nutrition

The Philippines has a long history of nutrition programmes, with a multi-sector approach and, following a presidential decree, the National Nutrition Council (NNC) was formed in the 1970s. From its inception, the NNC worked with an interagency committee drawn from the Departments of Health, Education, Social Welfare and Development, and Science and Technology. Various nutrition interventions were implemented at scale, such as setting up nutrition centres and rural improvement clubs, and recruiting and training agricultural workers on developing kitchen gardens in homes, schools and communities, using biointensive agricultural technologies. Despite these efforts, however, there were limited improvements in the country's nutrition situation.

In 2014, the Philippines joined the SUN (Scaling Up Nutrition) Movement in order to enhance its existing multi-sector nutrition strategy. As expressed by the NNC officials interviewed, by joining a global movement, more clarity was expected on how to make multi-sector approaches work more effectively.

## Philippine Plan of Action for Nutrition (PPAN) (2017–2022)

The current PPAN (there have been six since 1993) advocates a multi-sector approach, with a combination of nutrition-

## Box 1 PPAN (2017–22) outcomes

The final outcomes are:

1. To reduce levels of child stunting (to 21.4%) and wasting (to under 5%)
2. To reduce micronutrient deficiencies to levels below public-health significance (vitamin A deficiency, anaemia and iodine-deficiency disorder)
3. To ensure no increase in prevalence of overweight among children, including limiting prevalence among children under 5 to 3.8%.
4. To reduce overweight prevalence in adolescents (to less than 5%) and adults (to less than 28%)

sensitive and nutrition-specific programmes implemented at scale. However, from its earliest stage of development, the PPAN (2017-2022) was developed differently from preceding plans. It was formulated over a two-year period, with extensive input and consultations across all levels, including sub-national representation (from regions, provinces, cities and municipalities)<sup>4</sup>.

PPAN (2017-2022) places particular emphasis on the first 1,000 days of life (from conception to two years old) and includes a focus on school-aged and adolescent nutrition. The plan is partially costed: the cost of commodities for delivery of nutrition-specific interventions is known, and individual agencies receive budgets for planned sector activities. However, there is no costing of nutrition-sensitive actions.

## Devolved responsibility through Local Governing Units

A key development in the early 1990s was the devolution of national government services, including devolution of health services to locally elected provincial, city and municipal governments referred to as Local Governing Units (LGUs). The case study found a high level of buy-in from the LGUs in both locations. This included: active nutrition committees; dedicated allocations for staffing in critical positions, such as the Municipal/City Nutrition Action Officers (MNAO/CNAO); increased support to

<sup>1</sup> [www.fnri.dost.gov.ph/images//sources/eNNS2018/ENNS\\_Overview.pdf](http://www.fnri.dost.gov.ph/images//sources/eNNS2018/ENNS_Overview.pdf)

<sup>2</sup> <https://globalnutritionreport.org/resources/nutrition-profiles/asia/south-eastern-asia/philippines/#profile>

<sup>3</sup> The Philippines case study is part of an ENN series to understand country experiences in rolling out multi-sector programmes for nutrition, with a focus on the sub-national level. The Philippines is one of two countries studied in 2019 and completes the series of eight case studies planned in the Technical Assistance for Nutrition (TAN) project, providing knowledge management support to the SUN Movement. The other country case studies are: Bangladesh, Ethiopia, Kenya, Nepal, Niger, Senegal and Zimbabwe.

<sup>4</sup> The process was supported by Nutrition International (NI) as a part of the

TAN project to provide technical assistance to SUN countries in developing multi-sector plans and mechanisms for nutrition, under the guidance of the NNC. Support also came from UN agencies, including World Food Programme, the Food and Agriculture Organization of the United Nations, United Nations Children's Fund, and the World Health Organisation. International non-government organisations, civil society organisations and academic institutions were also part of this process.

<sup>5</sup> A barangay is the smallest administrative division in the Philippines and is the Filipino term for a village, district or ward. In metropolitan areas, the term often refers to an inner-city neighbourhood, a suburb or a suburban neighbourhood.



Mothers and children at a health centre in Mindanao, Philippines waiting for health assessments as part of a supplementary feeding programme

WFP/Jacob Maentz

frontline nutrition workers, known as Barangay Nutrition Scholars (BNS)<sup>5</sup>; and numerous other activities funded from the LGU's resources.

However, it was clear that commitment to nutrition was very much dependent on the leadership of the local chief executive, be it the governor or the mayor. Leadership also needs to be stable to be effective, as highlighted in the province of Quirino, where critical posts, including Nutrition Action Officers, who are responsible for the coordination of nutrition committees at the LGU level and for development of the Municipal/City Nutrition Action plans, have been in place for several years.

Furthermore, as seen in Quirino, there has been a continuity of plans and programmes across terms of leaders. Ensuring such continuity, irrespective of change in leadership, and ensuring that the nutrition agenda is firmly entrenched in all local development plans, have clearly been significant steps towards enabling sustainability in the province.

### Sensitising sectors to make small changes for nutrition improvement

The PPAN emphasises that sectors do not need to radically shift programming, but rather to 'tweak' existing approaches to be more nutritionally focused. For example, the Ministry of Agriculture has worked closely with the Ministry of Education to establish gardens in all schools, distributing seeds and

conducting agriculture training. The model of multi-sector collaboration also results in each sector identifying interventions for target households within the first 1,000 days (pregnant and lactating women and children under two) and households with children who are either wasted or stunted or both.

The stakeholders interviewed as part of this case study noted that, while nutrition is the prime responsibility of the health sector, there was widespread recognition of each sector's specific roles in contributing to the improvement of the population's nutrition status.

### Creating a motivating environment

A unique feature of the current PPAN is its incentive and rewards mechanism. An annual awards system, based on performance of the LGUs, uses a specific monitoring tool (the Monitoring of Local Level Plan Implementation (MELLPI Pro)) to assess the performance of barangay health stations and local nutrition workers. LGUs are assessed annually by regional teams and receive cash awards based on their scores. This is viewed as significant motivation, with each LGU placing great emphasis on proper documentation to ensure compliance.

### Need for further collaboration

Owing to geographical challenges, there is a separation between national government agencies and the LGUs in some instances, and slow bureaucratic processes and national procurement procedures impact on the ability of LGUs to effectively source materials to implement programmes.

Monitoring and evaluation mechanisms also need to be strengthened. For example, one piece missing from all sectors at the LGU level is a joint monitoring mechanism that tracks the coverage of multi-sector interventions that converge on the same households.

### Conclusion

The Philippines is faced with a high prevalence of all forms of malnutrition, including rising rates of overweight in all population groups; yet, with a renewed commitment to a multi-sector nutrition approach, ownership at the local government level and adequate resources allocated for the implementation of the PPAN, the country is well placed to accelerate achievement of its nutrition targets.

The full ENN case study is available (<https://www.enonline.net/mspcasestudyphilippines2020>) and a video interview with the NNC Chief of Policy and Planning Division on PPAN (2017-22) <https://www.enonline.net/mediahub/video/implementingppanphilippines>.



ENN's Regional Knowledge Management Specialist, Charulatha Banerjee, interviews some Barangay Nutrition Scholars

Stewart Allen