The role of unconditional cash transfers (CTs) during a nutritional emergency in Maradi region, Niger: a prospective observational study

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Study Objectives

Among non-wasted children in an emergency intervention aimed at the prevention of wasting

1. To determine the association between emergency unconditional CTs and wasting

2. To determine which factors are associated with the incidence of wasting and growth
Justification for the study

- Lack of published evidence
- Less evidence of the impact of seasonal CTs on acute malnutrition in emergency settings
- Even less on how might CTs work
- CTs increasingly used in humanitarian assistance programmes
The programme

- **Setting:** Aguié. GAM > 15% over past 10 years - Nutrition emergency declared in 2011

- **Objectives:** Protect household assets and prevent malnutrition among the most vulnerable households

- **Number of beneficiaries:** 2736 HH in 21 villages

- **Criteria selection of households:** poor and very poor households with children under 5 years (using HEA)

- **The amount of Cash:** 20000Fcfa to 30000Fcfa (to cover 80% of the energy needs of HH) – about $32-$40/month

- **Time:** April-Sept
Study methods

- A six month **prospective observational** study
- The baseline study group were non-acutely malnourished **children 6-36 months** randomly selected from the SC CT programme list
- Follow-up every month and observed to see whether or not they remained non-acutely malnourished
- Quantitative data were collected on contextual indicators at community, household, mother and child levels
- Data were collected to determine perceptions and uptake of the CT programme
Results

- Improvements in -
  - living standards indicators (incomes, expenditures, asset protection, wealth rank, employment) of ‘poor’ and ‘very poor’ HHs
  - HH and child food security indicators; HH hunger and HH and child dietary diversity
  - WHZ for children
  - Mother’s access to social networks and mental health

- Decline in both mother and child physical health
- Decline in mother’s autonomy
- 18% of children experienced acute malnutrition
Results

- Risks of acute malnutrition
  - being from ‘very poor’ HHs
  - with low WHZ at baseline
  - children who experienced one of more illnesses during the study
  - children in HHs further away from health facilities (weak association)

- Food expenditures and other diet and food security indicators (both HH and child) were not associated with the risk of acute malnutrition

- Apart from food security, there are other important mechanisms which are still not fully understood
Questions arising

1. Does giving a CT earlier prevent more children from becoming wasted?

2. Does adding a complementary programme (and what type/package of nutrition-sensitive interventions) improve nutrition outcomes?

3. Do CTs have a longer term impact on HH FSL and nutrition outcomes compared to food-based interventions?
The role of unconditional cash transfers during a nutritional emergency in Maradi region, Niger: A pre-post intervention observational study

Fenn B, Noura G, Sibson V, Dolan C and Shoham J

The risk of acute malnutrition among children aged 6-36 months is not associated with diet related factors in households targeted by an emergency cash transfer program

Bliss JR, Jensen ND, Thiede BC, Sibson V, Shoham J, Dolan C and Fenn B
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