
Liberia: Nutrition Profile

Background

Decades of mismanagement and 14 years of civil war virtually destroyed Liberia's economy, demolished physical infrastructure, and damaged agricultural productivity. A low-income country that heavily relies on foreign assistance revenue, Liberia continues to be one of the world's poorest countries, ranked 175 out of 187 in the United Nations Development Programme 2014 Human Development Index. The economy rebounded strongly after the 2008–9 global financial downturn and grew at 8.1 percent in 2013,¹ thanks to prudent macroeconomic management, inflows of foreign direct investment, increased production in iron ore, and increased activity in the construction and services sectors. Sustained economic growth, combined with low inflation and strategic social interventions, has enabled significant progress in reducing poverty. However, the outbreak of the Ebola Virus Disease (EVD) in 2014 has threatened the peace and stability of the country. The withdrawal of investors has led to the reduction of revenue and gross domestic product (GDP) growth in 2014, which was initially projected at 5.8 percent, and is estimated to decline to 2.5 percent.² Control of EVD and agriculture sector development in the longer term will be critical to lifting more Liberians out of poverty, as the majority of Liberians depend on agriculture for their livelihood and the sector accounts for approximately half of the GDP.³ Liberia is not on track to eradicate extreme poverty or hunger (MDG 1) or improve maternal health (MDG 5), but it is on track to reduce child mortality (MDG 4).⁴ (For more information on the Ebola crisis, see:

<http://www.who.int/csr/disease/ebola/en/>)

Nutrition Situation

Food insecurity is widespread, with every fifth household considered food insecure, mainly affecting poor rural households with informal livelihoods. The highest rates of food insecurity are found in Bomi (55 percent), Grand Kru (46 percent), and River Cess (45 percent) counties.⁵ Rates of chronic and acute undernutrition have decreased in the past six years, but almost one-third of children under five remain stunted and micronutrient deficiencies are highly prevalent.^{6,7} Stunting increases with age, peaking at 42 percent in children 36–47 months in age, and affects males (34 percent) more than females (29 percent). Regional disparities are apparent, with stunting lower in Greater Monrovia (27 percent) than in other urban or rural areas (33 percent). By county, large differences in underweight are observed with only 9 percent of children in Montserrado underweight and 25 percent of children in River Gee underweight.⁶ The rate of exclusive breastfeeding has significantly improved in the last six years, but only slightly more than half of infants are exclusively breastfed. Poor dietary diversity and diarrheal disease caused by improper hygiene and sanitation contribute to suboptimal nutritional outcomes. Malaria is a critical public health issue, with 45 percent of children testing positive, which accounts for a significant proportion of anemia in children under five.⁸

| Liberia Nutrition Data | | |
|---|-----------------------------|-----------------------------|
| Population (2012) | 3.9 million | |
| Population under 5 years of age (0-59 months, 2012) | 634,000 | |
| | DHS 2007⁷ | DHS 2013⁶ |
| Prevalence of stunting among children under 5 (0-59 months) | 39% | 32% |
| Prevalence of underweight among children under 5 (0-59 months) | 19% | 15% |
| Prevalence of wasting among children under 5 (0-59 months) | 8% | 6% |
| Prevalence of anemia among children aged 6-59 months | n/a | 63% ⁸ |
| Prevalence of anemia among women of reproductive age (15-49 years) | n/a | 33% ⁹ |
| Prevalence of thinness among women of reproductive age (15-49 years) | 10% | n/a |
| Prevalence of children aged 0-5 months exclusively breastfed | 29% | 55% |
| Prevalence of breastfed children aged 6-23 months receiving a minimum acceptable diet | 30% | n/a |

National Nutrition Policies

The Government's Poverty Reduction Strategy, launched in 2012, aims to transform Liberia into a middle-income country by 2030, and incorporates a focus on food security and nutrition. The Nutrition Division in the Ministry of Health and Social Welfare is implementing the National Policy on Nutrition (2008). The Policy focuses on increasing use of locally produced food, reducing micronutrient deficiencies through supplementation, and fortifying food to reduce nationwide chronic and acute malnutrition. There is also a national Food Security and Nutrition Strategy (FSNS) and a Food and Agriculture Policy and Strategy (FAPS) in place. Furthermore, Liberia will host the next ECOWAS Nutrition Forum in 2014, on the theme, "Nutrition and MDGs in ECOWAS countries: progress, challenges, and perspectives." Liberia has not yet joined the Scaling Up Nutrition (SUN) Movement, a global movement that unites national leaders, civil society, bilateral and multilateral organizations, donors, businesses, and researchers in a collective effort to improve nutrition.

Liberia signed a Comprehensive African Agriculture Development Programme (CAADP) Compact in 2009. CAADP is an African-led program bringing together governments and diverse stakeholders to reduce hunger and poverty and promote economic growth in African countries through agricultural development. The Liberia Agriculture Sector Investment Program (LASIP), finalized in 2010, identifies priority for investment projects aligning national objectives and the CAADP. The government has committed to increasing its budget share for agriculture from the current level of 3 percent to 10 percent over the next five years. The LASIP/CAADP Agriculture Sector Investment and Development Program has four major sub-programs including land and water development, food and nutrition security, competitive value chains and market linkages, and institutional development.

USAID Programs: Accelerating Progress in Nutrition

USAID/Liberia has designed a comprehensive approach to addressing undernutrition and stunting within its target counties. In 2014, the Mission conducted a nutrition assessment and gap analysis that informed the development of an integrated nutrition strategy. In support of USAID's focus on the Thousand Day Window as the period of opportunity to reduce stunting, USAID/Liberia's nutrition interventions focus on the following: a) Essential Nutrition Actions (ENA) promotion; b) vitamin A supplementation; c) diarrhea reduction through hygiene promotion; and d) anemia reduction. USAID/Liberia supports the MOHSW's Essential Package of Health Services to address child undernutrition, using general community health volunteers (gCHVs) to conduct rapid nutrition assessments of children and refer undernourished children to health facilities for assessment and enrollment into therapeutic or supplementary feeding programs. USAID/Liberia also works to ensure that vulnerable populations are covered with high impact health and nutrition interventions at the household, community, and facility levels, and also to build capacity of health facilities' staff and gCHVs to deliver these interventions.

The Rebuilding Health Services Project (**RBHS**) focuses on providing technical assistance to the Government of Liberia to improve health service delivery and promoting healthy behaviors through behavior change communication, including nutrition education and targeted infant and young child feeding (IYCF) practices. RBHS works closely with the related Food for Peace projects, LAUNCH and HANDS, and targets 990,337 people in 105 health facilities.

Feed the Future Progress

Feed the Future, the U.S. Government’s global hunger and food security initiative, focuses on transforming value chains for staple foods and developing income and diet diversification value chains in order to increase incomes, diversify production, improve productivity and farming practices, improve nutrition and strengthen resilience. The Feed the Future target regions were selected based on high levels of poverty, undernutrition, potential for agriculture development, and government priorities. The Feed the Future flagship project is entitled **Food and Enterprise Development (FED)**. The FED project has three components—agricultural productivity, enterprise development and capacity development—and is strengthening the value chains of four agricultural commodities (rice, cassava, vegetables, and goats) to improve the availability, access, and utilization of nutritious foods in Bong, Lofa, Nimba, Grand Bassa,

USAID/Liberia Feed the Future Goals for 2017

- Reduce the prevalence of poverty in Feed the Future target regions by 20 percent
- Reduce the prevalence of stunting in Feed the Future target regions by 14 percent

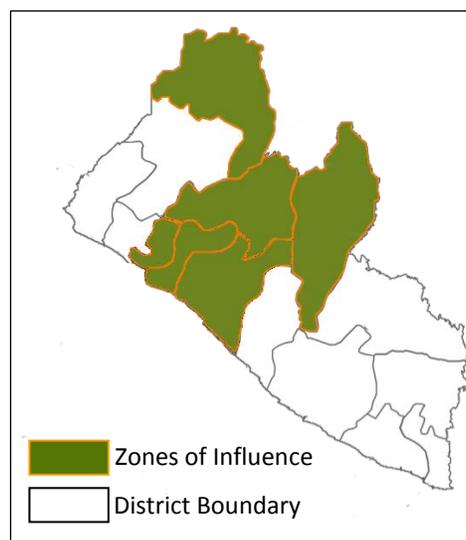
Montserrado, and Margibi counties. The goal is to improve food availability and access and dietary diversity, and in turn, improve human nutrition. The nutrition component of FED began in 2013, integrating nutrition and hygiene messages into agricultural training and a county-specific nutrition campaign targeting undernourished women and children. In FY2012, close to 1,740 farmers and 91 farmer groups were trained in improved rice, cassava, and vegetable production practices. FED is introducing and promoting improved varieties of rice and cassava and working with the Central Agriculture Research Institute to establish demonstration sites.

Food for Peace Programs

The Office of Food for Peace (FFP) now targets approximately 196,000 food-insecure Liberians in Bong, Nimba, Grand Gedeh, Maryland and River Gee counties through two projects: Health Agriculture Nutrition Development for Sustainability (HANDS) and Liberian Agriculture Upgrading, Nutrition, and Child Health (LAUNCH).

Both projects support Feed the Future goals with the aim to improve smallholder production and post-harvest practices, integrate cash crops into markets, and address value chain constraints to accessing inputs and financial services. Both projects also link vulnerable households to community services, increase capacity of health facilities, and provide targeted rations using the PM2A approach. **LAUNCH** targets its efforts in the Bong and Nimba counties with a focus on the rice, cassava, vegetables, and goat value chains. Supplemental food rations are distributed monthly to children under two and pregnant and lactating women. Rations are conditional upon health care seeking, participation in behavior change activities and optimal nutrition practices. Over the life of the program,

Liberia: Feed the Future Zones of Influence



LAUNCH's supplementary food rations will reach 19,294 pregnant or lactating women, 25,161 children under two years of age and 131,675 other family members.¹⁰

HANDS is located in the Grand Geddeh and River Gee counties, focusing on the local production and direct distribution of fortified cereals. It will develop and distribute a fortified cassava product using U.S.-sourced value-added products. There will be a home garden component to improve consumption during lean seasons. The project is also introducing new crops such as legumes and higher-value vegetables and fruits.

Other USAID Nutrition-Related Development Assistance

PEPFAR supports members of the Armed Forces, and other groups, who are living with HIV and AIDS through training and outreach activities aimed at reducing stigma and discrimination, promoting psychosocial support to the infected and affected, and supplying improved "Care Kits" that will include basic nutritional supplements.¹¹

Liberia joined the *Committing to Child Survival: A Promise Renewed* campaign in 2012, and pledged to reduce under-five mortality to 20 or fewer deaths per 1,000 live births by 2035 by reducing the leading preventable causes of child mortality, including undernutrition. In support of Liberia's joining the Scaling Up Nutrition Movement in FY 2014, nutrition interventions and messages were rolled out to over 200 communities through USAID's Child Health programming. To view the country action plan for ending preventable child and maternal deaths in Liberia, please see the Acting on the Call 2014 report at:

http://www.usaid.gov/sites/default/files/documents/1864/USAID_ActingOnTheCall_2014.pdf.

References

1. CIA World Fact Book, Liberia: <https://www.cia.gov/library/publications/the-world-factbook/geos/li.html>
2. World Bank Liberia Overview: <http://www.worldbank.org/en/country/liberia/overview>
3. Feed the Future Liberia: <http://www.feedthefuture.gov/country/liberia>
4. MDG Tracker Liberia: <http://www.mdgtrack.org/index.php?tab=c&c=LBR>
5. World Food Program Liberia Overview: <http://www.wfp.org/countries/liberia/overview>
6. Liberia Demographic and Health Survey 2013.
7. Liberia Demographic and Health Survey 2007.
8. Liberia Malaria Indicator Survey 2011.
9. Liberia Mission Full Performance Plan Report, 2012. USAID.
10. Liberia Landscape Analysis Mission Report, Feed the Future, USAID & SPRING, 2013.
11. PEPFAR Operational Plan 2011.