



**POLICY BRIEF<sup>1</sup>**

# Making Social Protection Work for Nutrition in Asia and the Pacific

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The policy brief highlights key nutrition challenges in Asia and the current state of national social protection programs. It identifies opportunities to improve nutrition through nutrition-specific and nutrition-sensitive interventions, focusing on cash transfers, in-kind assistance and school feeding programs.

Key takeaways:

- **Nutrition-sensitive social protection:** Design cash and in-kind transfers to target nutritionally vulnerable groups, ensuring better access to nutritious diets, health services and culturally tailored nutrition advice through Social and Behavioural Change Communication.
- **Multisector coordination:** Design national social protection frameworks to integrate nutrition-specific and nutrition-sensitive goals, interventions and indicators to foster cross-sectoral collaboration and linkages enhance access to health, WASH and agricultural services.
- **Empowering vulnerable populations:** Promote gender-responsive approaches, strengthen the nutrition content of school feeding programs and implement proactive labour policies to support women, children and adolescents as key agents in improving nutrition and resilience.

## 1. Background

Asia continues to face high rates of malnutrition, particularly among children and women, with South Asia in particular seeing alarming levels of stunting, wasting and anaemia, which are further exacerbated by poverty and gender inequalities. Maternal and adolescent undernutrition – marked by low birthweight and anaemia – remains a major challenge, contributing to cognitive impairments, reduced productivity and higher health risks. Malnutrition also has long-term economic consequences, with stunting, low birthweight, anaemia and poor breastfeeding costing the region an estimated USD377 billion annually or 1% of its Gross National Income as per Nutrition International's Cost of Inaction tool.<sup>2</sup>

To address these issues, sustained investments are needed in both nutrition-specific strategies, that tackle the *immediate* factors of diets and care, and nutrition-sensitive strategies that address the *underlying* factors of food, feeding and healthy environments. In particular, nutrition-sensitive interventions represent comprehensive strategies and multisector approaches that go beyond single-service models to address the underlying determinants of malnutrition. These include factors such as food insecurity, inadequate access to clean water, poor sanitation, limited healthcare services and insufficient education on nutrition.

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<sup>1</sup> This is a summary version of the policy brief - "Morgan, R, Mittal, S, Kumar, M, Babajanian, B, Kumar, A.R. (2025) Making Social Protection Programs Work for Improved Nutrition in Asia. Policy Brief. January 2025." which draws extensively from the Asia landscape review conducted by Nutrition International <https://www.nutritionintl.org/learning-resource/making-social-protection-work-for-improved-nutrition-asia/>.  
<sup>2</sup> <https://www.nutritionintl.org/learning-resource/cost-inaction-tool/>



## 2. Social Protection and Nutrition-Sensitive Approaches: Key Entry Points and Opportunities

While many countries encourage multisector collaboration to combat malnutrition, integrating nutrition into social protection policies and programs remains underutilized, presenting opportunities to align social protection programs (SPPs) more closely with nutrition goals. Asia's social protection responses – shaped by crises like SARS and COVID-19 – have often proven effective in improving or safeguarding nutrition, especially when paired with nutrition-sensitive interventions for highly nutritionally vulnerable groups like young children, adolescents and pregnant women. This experience provides a foundation for more systematic integration that enables national investments in social protection to deliver greater impact for nutritional outcomes in the region.

The three most common types of social protection programs in Asia include: cash transfers, in-kind transfers (food or vouchers for food purchases) and school feeding programs. Each of these can play a key role in multisector strategies and interventions to address poor nutrition, especially among children and women.

- a. **Cash transfer programs:** Cash transfers (CTs) have become a key social assistance tool, including for many countries in Asia, where they are widely implemented but often lack sufficient transfer values or coverage. CTs can improve dietary intake, particularly for women and children in poor families, as well as boosting the use of local health and nutrition services. Their effectiveness in improving dietary quality and diversity, and their contributions to reductions in child stunting and anaemia can increase when paired with complementary interventions. For example, nutrition-focused Social Behavioural Change Communication (SBCC) to promote recommended care, hygiene and feeding practices within families. CT programs with nutrition-focused goals – twinned with nutrition-specific measures such as micronutrient and lipid-based supplements for children – have shown strong potential to address the underlying causes of malnutrition, as demonstrated by successful initiatives in countries such as Bangladesh, Nepal, Mongolia and Pakistan.
- b. **In-kind food transfers:** Food-based transfer programs support vulnerable populations in maintaining adequate food intake and improving nutritional well-being, often through ration cards or vouchers linked to local suppliers. Implemented in countries such as India, Indonesia and Bangladesh, these programs provide “food baskets” with staples, pulses, and fortified items to enhance dietary quality. They can improve outcomes for women by increasing dietary diversity and Body Mass Index and for children by enhancing micronutrient intake, often in tandem with complementary interventions like SBCC and the promotion of maternal and child health services. Despite logistical challenges, in-kind transfers remain crucial in areas with poor markets and limited food access.
- c. **School feeding programs:** School feeding programs are now one of the largest social protection measures worldwide, providing essential nutrients while promoting school enrolment and attendance. Their coverage in Asia ranges from low to nearly universal. School feeding measures can not only enhance dietary intake and learning but also serve as a platform for complementary health and nutrition interventions with students and in local communities, including micronutrient supplementation, deworming, nutrition education and hygiene promotion. In Asia, programs in countries such as Bangladesh and Indonesia aim to integrate school feeding with broader health and nutrition efforts. Community involvement in meal preparation fosters sustainability and raises awareness, while helping to address challenges such as widespread anaemia among adolescent girls.



### 3. Strengthening Program Design and Implementation for Nutrition Sensitivity

#### **Key design features for nutrition-sensitive social protection programs**

The success of nutrition-sensitive SPPs in Asia depends on good quality design, effective targeting and robust monitoring. However, many programs remain inefficient in reaching nutritionally vulnerable families, partly because eligibility is determined by economic indicators that overlook nutritional needs. Incorporating local data, community feedback and context-specific targeting can help address these gaps. For example, safe and accessible feedback mechanisms – especially for marginalized groups – can further ensure that programs effectively address undernutrition as well as poverty and social exclusion. In addition, enhanced eligibility criteria, monitoring systems that use nutrition-related indicators and periodic program evaluations can improve efficiency, inclusion and accountability.

#### **Extending social protection coverage with more joined-up approaches**

Despite progress in social protection, significant gaps remain in policies, coverage and investments across Asia and the Pacific, with only an estimated 44% of people accessing benefits and less than one in five children or households receiving child or family benefits. These gaps stem from a lack of comprehensive life cycle coverage, weaknesses in targeting and insufficient funding. Addressing these issues will be crucial for national SPPs to improve nutritional outcomes and reduce poverty. A well-coordinated approach in both policy and implementation is needed to enhance nutrition integration in SPPs, focusing on the most vulnerable groups and populations at different stages of the life course. By improving coherence in social protection policies and linkages across key systems and sectors, countries could better deliver both nutrition-specific and nutrition-sensitive approaches, leveraging the strong potential of SPPs to achieve nutritional outcomes.

### 4. Seizing Opportunities for Nutrition Progress

Many Asian countries are now enhancing the nutritional focus of their SPPs by integrating strategic goals – including nutrition-sensitive components – and widening SPP monitoring systems to cover nutrition-related indicators. With rising national investments in social protection, the incorporation of nutrition-sensitive approaches is presenting new opportunities to link health, nutrition and economic services, while facilitating the co-delivery of interventions like micronutrient supplements and fortified foods. Evidence and experience from Asia and other regions highlight key opportunities for countries to leverage the synergies between social protection and nutrition. Major opportunities arising from recent evidence reviews, as well as from policy and program experience are:

- a. Cash and in-kind transfers, when intentionally designed to be nutrition-sensitive, can reduce food insecurity and improve nutrition for vulnerable groups including pregnant women, young children and adolescents. Regular substantial transfers that are directly targeted and accessible to nutritionally at-risk populations can help families to improve diets and the use of health and water services – particularly where high quality food products and good quality essential services are available.

- b. Complementing cash or food transfers with sustained, culturally tailored nutrition promotion and information services can improve practices related to diet, childcare, feeding and hygiene among families. Engaging both male and female beneficiaries of social protection interventions in SBCC activities can be particularly effective in strengthening nutrition practices and achieving results.
- c. A coordinated multisector policy approach is vital to tackling malnutrition, integrating both nutrition-specific and nutrition-sensitive interventions that address immediate and underlying causes in each context. Social protection frameworks should aim to align with health, agriculture, WASH and other sector strategies – including shared goals, indicators for impact monitoring and coordinated interventions.
- d. Similarly, SPP action plans should strengthen cross-sectoral links, enabling social protection staff to connect beneficiaries – including families at risk of malnutrition – with nutrition, health and essential services through such means as unified registration systems and cross-referrals. They can also promote greater access to, and use of, local health and nutrition services through mechanisms such as fee waivers and enrolment in social insurance schemes, as well as through cash transfers themselves.
- e. School feeding programs primarily aim to improve education and food security. However, they can also improve nutrition by providing diverse and fortified meals, promoting nutrition awareness, and linking students to health services such as immunization, iron supplementation and deworming. They can also be adapted during crises to offer take-home rations and other forms of community support.
- f. SPPs that respond to gender inequalities can further help address malnutrition by prioritizing women as primary beneficiaries of transfers and empowering them with nutrition information and increased access to livelihood opportunities and economic services. Wider policies such as paid parental leave, childcare assistance and support for breastfeeding in the workplace can further empower women as agents for better nutrition.

While important knowledge gaps remain due to limitations of nutrition data and program evaluations across Asia, the region has a strong foundation for building nutrition-sensitive social protection policies and for designing and implementing SPPs that work for better nutrition. There are clear opportunities for national leaders to enhance outcomes for vulnerable and disadvantaged groups through these programs as a key part of multisector action to address pervasive nutrition challenges and reach national goals.



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