



Knowledge hub - Collection of best practices

Summary of the best practice

1. Title of the best practice (e.g. name of policy, programme, project, etc.) *

School Meals: An investment to support the learner and their learning

2. Country or countries where the practice is implemented *

Global

3. Please select the **most relevant** Action Track(s) the best practice applies to *

- Action Track 1. Inclusive, equitable, safe, and healthy schools
- Action Track 2. Learning and skills for life, work, and sustainable development
- Action Track 3. Teachers, teaching and the teaching profession
- Action Track 4. Digital learning and transformation
- Action Track 5. Financing of education

4. Implementation lead/partner organization(s) *

Country governments largely finance and implement school meal programmes.

5. Key words (5-15 words): Please add key descriptive words around aims, modalities, target groups etc. *

School meals, school feeding, school health and nutrition, school-age children, nutrition, home-grown school feeding, in-kind cash transfers

6. What makes it a best practice? *

(i) Scalability: most common safety net worldwide; (ii) Equity: Greatest returns accrue to the most vulnerable schoolchildren; (iii) Political Commitment: 90% of national programmes are financed through domestic budgets

Description of the best practice

7. Introduction (350-400 words)

This section should ideally provide the context of, and justification for, the practice and address the following issues:

- i) Which population was affected?
- ii) What was the problem that needed to be addressed?
- iii) Which approach was taken and what objectives were achieved? *

Healthy and well-nourished schoolchildren learn better. Investing in the first 1,000 days of life, from conception to age two, is vitally important, and further investment during the next 7,000 days (or up to age 21) sustains and builds upon the gains achieved from earlier intervention and to respond to the developmental changes that occur as children and adolescents mature. It is during these formative years that children and adolescents undergo physical, emotional, and cognitive changes during the same years in which they are in school.

Better child health and child learning means that all schoolchildren receive adequate nourishment, while being protected against diseases. For the poorest students, enrolling in school, attending regularly and learning are often made more difficult by illness, hunger and malnutrition. In low- and lower-middle-income countries, about 300 million schoolchildren have iron-deficiency anaemia, causing them to lose some six IQ points per child; and about 73 million primary schoolchildren in low-income countries go to school hungry.

There is overwhelming evidence that well-designed and effectively delivered school meal programmes, especially when combined with complementary school health programmes, have the potential to raise learning outcomes and strengthen equity. The school system represents an exceptionally cost-effective platform through which to deliver an essential integrated package of health and nutrition services to schoolchildren.

These investments in the human capital development of children and young people are among the most effective and productive that countries can make in their own future. These investments strengthen community cohesion, stability and productivity, and helps make people and societies more resilient in a rapidly changing world. That transformation also carries through to the next generation with the improved nutrition and health of their own children, contributing to break the intergenerational cycle of malnutrition and creating a long-term cycle of economic growth and progress.

School closures in response to the COVID-19 pandemic highlighted the vital role schools play in protecting the health and well-being of learners, and served as a counterfactual for what happens when school-based health service delivery – including school meals – is no longer provided. Whereas 390 million children were being fed daily in January 2020, by April 2020, 370 million of these children were no longer being reached by their national programmes, because the schools had been closed. In September 2021, at the UN Food Systems Summit, member countries (now numbering 66 countries) established a School Meals Coalition, with the specific goals of restoring school meals and complementary school health programmes to pre-pandemic levels by 2023, and to reach another 73 million of the most in-need children who had not previously been reached, by 2030.

8. Implementation (350-450 words)

Please describe the implementation modalities or processes, where possible in relation to:

- i) What are the main activities carried out?
- ii) When and where the activities were carried out (including the start date and whether it is ongoing)?
- iii) Who were the key implementation actors and collaborators? (civil society organizations, private sector, foundations, coalitions, networks etc.)?
- iv) What were the resources needed (budget and sources) for the implementation?

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Developing country governments increasingly recognise the wide-ranging benefits of school meal programmes in education - and this is reflected in their own investment efforts: more than 90% of support comes from domestic funding. As countries transition from lower- to middle-income status, governments take over the management and funding of programmes, suggesting that external support for school feeding is a transitional and timebound requirement in national development.

Annual global investments in school feeding are estimated to be between US\$41 billion and US\$43 billion. Programmes in middle- and high-income countries are almost universally supported through domestic funds. Programmes in low-income countries have become much more self-reliant, with the share of domestic funding increasing from 17% to 38% between 2013 and 2020, which is almost double their level of funding relative to international donors over the same period.

In practice, school feeding has emerged as the main intervention for children in schools around which other elements, such as deworming or micronutrient supplementation, are delivered. This is because it is the most widely implemented element of the integrated package.

Approximately half the world's primary schoolchildren in low- and middle-income countries (305 million) will sit down to eat a meal at school. India now feeds 90 million children; Brazil and China both 40 million, South Africa 9 million and Nigeria 10 million. A recent assessment of school feeding coverage in low- and middle-income countries suggests that 305 million children – 47% of all the children enrolled – are now fed in school daily. Despite this progress, there are an estimated 73 million primary schoolchildren most in need of school feeding programmes. Annual global investments in school feeding are estimated to be between US\$41 billion and US\$43 billion. The cost of supporting these additional 73 million children is estimated at USD 5 billion for school meals, and USD 6 billion if complementary school health services are also delivered. Giving an estimated cost of the integrated package of USD 5.8 billion annually, with around half that amount for low-income countries.

School feeding supports wider policies aimed at enhancing equity to ensure that no child is left behind. Most countries currently limit nationally-financed school feeding programmes to public schools, which dominate education provision for the poorest children. In scaling up these programmes, they have prioritised areas characterised by high levels of malnutrition and poverty, and indicators for educational disadvantage.

9. Results – outputs and outcomes (250-350 words)

To the extent possible, please reply to the questions below:

- i) How was the practice identified as transformative? (e.g., impact on policies, impact on management processes, impact on delivery arrangements or education monitoring, impact on teachers, learners and beneficiary communities etc.);
- ii) What were the concrete results achieved with regard to outputs and outcomes?
- iii) Has an assessment of the practice been carried out? If yes, what were the results? *

School feeding is one of the most common safety nets worldwide, reaching approximately 1-in-2 of the world's primary students each day. School meals, especially when combined with complementary school health interventions such as WASH, vision, deworming and behaviour change, are among the most effective (and potentially cost-effective) interventions available to governments seeking to transform education outcomes.

School feeding significantly increases enrollment, by about 10 percent. School feeding that includes micronutrient-rich foods or supplementation can reduce anemia, a condition that is associated with poor cognition and learning. In times of stability, school feeding contributes to learning through avoiding short-term hunger and enhancing the learner's ability to make the most of their education.

Drivers of inequity, such as poverty and disability are barriers to education in many countries, and can also be ameliorated by school meals and complementary school health interventions. Evidence shows that where families undervalue education for girls, especially adolescents, increasing other values of schooling, such as providing food or health services, has a disproportionately positive impact on their attendance and enrolment.

Nutritionally adequate school meals provide an incentive for families to ensure their children regularly attend school and support children to focus on their studies. The 2016 International Commission on Financing Global Education Opportunity identified school meals as a highly effective non-teaching practice to increase access and learning outcomes, and a recent UN agency report ranked school meals among interventions with the strongest evidence of impact on equity and inclusion in education. The benefits are felt most acutely by vulnerable students and girls.

10. Lessons learnt (300 words)

To the extent possible, please reply to the following questions:

- i) What were the key triggers for transformation?
- ii) What worked really well – what facilitated this?
- iii) What did not work – why did it not work? *

These meals provide daily support and stability to vulnerable families and children, and are among the first social protection solutions that poor countries deploy during periods of social and/or financial shocks.

National ownership is key to effective policy interventions. Programmes in middle- and high-income countries are almost universally supported through domestic budgets, and 38% of programmes in low-income countries are self-reliant. Median spending on school feeding programmes among low-income countries is 0.7 percent of education expenditure, whereas the corresponding figure for high-income countries is 2 percent.

School meals financing targets are eminently affordable. While investments in education may increase, the floor price of food remains relatively consistent across income quintiles, making the annual cost of school feeding per child a smaller proportion of GDP as income rises. This makes external support for school feeding a transitional and timebound requirement in national development. Development partners have an important role to play in supporting countries to maintain an investment in school feeding as they transition from lower- income to middle-income status.

While governments should strive over time to achieve universal school meals coverage, fiscal constraints place a premium on efficient and equitable public spending. Children facing the highest levels of malnutrition, poverty, and educational disadvantage should be first in line as programmes expand. It is therefore important that governments develop robust targeting criteria so that school meals programmes are implemented with a focus on achieving progressive outcomes.

School meals are cost-effective because of the returns from substantial benefits across multiple sectors. The single intervention of school feeding can have effects across at least four different sectors: agriculture, education, health and nutrition, and social protection, with \$9 in returns for every \$1 invested. School feeding programmes that procure food locally can offer additional benefits for smallholder farmers, supporting local food production and economies, and promoting sustainable local markets for diverse, nutritious foods. School meals also serve as an important safety net, supporting families' efforts to counter the current threats to the food system and supply chain.

11. Conclusions (250 words)

Please describe why may this intervention be considered a “best practice”. What recommendations can be made for those intending to adopt the documented “best practice” or how can it help people working on the same issue(s)? *

There is broad political support for school meals to support both learning and the learner. There are clear synergies between education and health and nutrition investments and outcomes. Long-term goals in health and nutrition and food security are unattainable without an educated population, and children cannot learn if they suffer from the effects of poor health and nutrition. When integrated into national social protection systems, school feeding can contribute to prevent and protect people against poverty, vulnerability, and social exclusion throughout their life cycles. Well-designed and nutritious school meals programmes progress education objectives, strengthen social protection systems, and create markets for smallholder producers, supporting the development of more self-reliant food systems.

School meals should be a central pillar in any program for education recovery, and especially in building back from the COVID-19 pandemic. Supporting governments to reach the 73 million most vulnerable primary schoolchildren with nutritious meals and other school health interventions is a priority. Bridging this gap will require supporting governments to expand coverage in countries with existing school meals programmes and initiate new programmes where they are currently absent.

Given the existing gap in coverage in low-income countries, financing may be a key constraint in scaling coverage, particularly in contexts with severe fiscal constraints, reduced growth prospects, and/or food-insecure areas. Innovative financing options, including progressive taxes to finance school meals, as well as modest aid investments backed by the mobilisation of additional funding through the Multilateral Development Banks could increase the fiscal space for school meals.

12. Further reading

Please provide a list and URLs of key reference documents for additional information on the “best practice” for those who may be interested in knowing how the results benefited the beneficiary group/s. *

Bundy, D.A.P., de Silva, N., Horton, S., Jamison, D.T. and Patton, G.C. 2018. Re-Imagining School Feeding: A High-Return Investment in Human Capital and Local Economies. Washington, DC, World Bank.

Center for Global Development. Are School Meals Worth the Cost? April 25 202. Available from: <https://www.cgdev.org/blog/are-school-meals-worth-cost-contributions-biniam-bedasso-farzana-afridi-ugo-gentilini-and>

Drake, L., Fernandes, M., Chu, K., Lazrak, N., Singh, S., Ryckembusch, D., Burbano, C. and Bundy, D.A.P. 2020. How Many Poor Children Globally Could Benefit from New Generation School Feeding Programmes, and What Would be the Cost? *Frontiers in Public Health*, 8(20).

Verguet S, Limasalle P, Chakrabarti A, Husain A, Burbano C, Drake L, Bundy DAP. The Broader Economic Value of School Feeding Programs in Low- and Middle-Income Countries: Estimating the Multi-Sectoral Returns to Public Health, Human Capital, Social Protection, and the Local Economy. *Front Public Health*. 2020; 8:587046.

World Food Programme. State of School Feeding Worldwide 2020. Rome (Italy): World Food Programme (WFP).