MAKING NUTRITION A NATIONAL PRIORITY : REVIEW OF POLICY PROCESSES IN DEVELOPING COUNTRIES AND A CASE-STUDY OF MALAWI

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This paper looks at why nutrition is integral to economic growth. It includes a short discussion of how malnutrition acts as a brake on economic development, and posits that any government pursuing an efficient development strategy should include nutrition policy as an input that - along with sound fiscal, foreign investment, exchange rate, and sector-specific policies - is requisite to sustainable growth and poverty reduction. The first section of the paper discusses specific barriers to raising nutrition’s profile on national policy agendas. In addition to a limited understanding among policy makers of the economic costs of malnutrition, these barriers include conflation of food security with nutrition security. That is, the assumption that once food security is achieved, positive nutrition outcomes will follow automatically. The first section of the paper also examines how countries that do recognize the importance of nutrition policy are hamstrung in terms of implementation. The challenges of cross-sectoral collaboration are discussed in detail. The second section of the paper uses Malawi as a case study to illustrate the theoretical points put forth in the first section. Malawi is one of the poorest counties in the world and has some of the highest rates of undernutrition in sub-Saharan Africa. However, it is also home to an unusually proactive National Nutrition Department. This agency, housed directly under the Office of the President and Cabinet (as opposed to the Ministry of Health, where nutrition departments are typically located) has made incorporating nutrition objectives into Malawi’s mainstream development agenda a central goal. The case study looks at where the Department has succeeded and where challenges remain. The paper concludes with a series of recommendations tailored to the Malawi context, but hopefully instructive for other countries and development partners as well.

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1. BACKGROUND

1.1) Overview of the Current Policy Environment

Although most national development plans have included nutrition considerations for decades, they have traditionally been framed only as outcomes of economic growth. This perception is now being challenged, as a growing body of evidence indicates that, although economic development does improve nutrition outcomes, it often does so at a very slow pace, and that direct reductions in income poverty do not imply proportional reductions in undernutrition. For example, one study found that over a twenty year period (1970-1990), while developing countries’ per capita GNP doubled (in aggregate), the global percentage of underweight children declined much more slowly, from approximately 32% to about 23%.¹

In other words, income security does not guarantee nutrition security. (See Figure 1, which uses per capita dietary energy supply as a proxy for economic development.)

Figure 1: Prevalence of underweight children by per capita dietary energy supply, by region, 1970-96

Not only do reductions in income poverty not necessarily improve nutrition outcomes, but malnutrition can actually act as a brake on economic development. In effect, economic growth is retarded in countries where malnutrition is widespread. It follows that any government pursuing an efficient development strategy should include nutrition policy as an input that, along with sound fiscal, foreign investment, exchange rate, and sector-specific policies, is requisite to sustainable economic growth.

Fortunately, many countries are beginning to recognize the integral role nutrition plays in sustainable development, and the number of national development strategies that include explicit nutrition objectives is growing. But raising nutrition’s profile on national policy agendas does not automatically translate to operationalizing objectives on the ground. Even the most
well-intentioned national nutrition plan faces significant challenges to programmatic implementation. Moreover, there are still many governments that do not recognize the importance of mainstreaming nutrition into broader initiatives for economic growth and poverty alleviation. This background section outlines some of the challenges that (1) nutrition advocates face in attempting to incorporate nutrition initiatives into national development policy, and (2) that governments face in actually operationalizing nutrition objectives, once they have been incorporated, or “mainstreamed” into those national development strategies.

1.2) Barriers to Raising Nutrition’s Profile on National Policy Agendas

Federal-level nutrition policy agendas can be hamstrung by a limited understanding among policy makers and politicians of the significant economic costs of malnutrition. That is, although most high level bureaucrats see malnutrition as a human rights issue, it is less widely recognized as integral to sustained economic growth and national development. This misconception is widespread, despite the fact that a growing body of evidence has identified the direct costs of hunger to include lost productivity, lost earnings and the medical care required to treat those suffering from malnutrition and associated diseases. (Not to mention indirect costs, which include premature death, absenteeism, and compromised cognitive and physical development.)

Economic analyses of the costs of malnutrition have examined specific micronutrient deficiencies as well as chronic undernutrition or stunting. For example, an estimated 3.4% of global GDP is lost to the effects of anaemia on childhood cognitive development and educational attainment. Iron deficiency in adults has been estimated to decrease national labour productivity by 5 to 17%. And up to 10% in lost productivity and earnings has been attributed to stunting. These figures are especially pertinent in terms of future development goals, since nearly one-third of all children in the developing world are currently underweight or stunted. In sum, decelerated economic growth and compromised human capital are negative externalities associated with each cohort of children whose development is stunted or compromised by micronutrient deficiency. Despite these findings, many decision makers continue to perceive nutrition exclusively as an output, rather than also as an input, to growth and development. In countries where this perception is the status quo, nutrition policy agendas will not receive adequate funding.

A second barrier to raising nutrition’s profile on national policy agendas is the fact that, in many countries, the determinants of nutritional status are often poorly understood by policy-makers and politicians. Perhaps the most common misconception about the causes of poor nutrition is its conflation with food security. Food security is necessary to but insufficient for improved nutrition outcomes. There are important, proven links between nutrition and variables that are not directly related to food security. Namely, the surrounding environment (e.g. sanitation and access to health services) and maternal and child care practices (e.g. breastfeeding and complementary foods). Many policy makers, bureaucrats and politicians are unaware of these links, and tend to operate under the assumption that positive nutrition outcomes are exclusively subsequent to food security. The assumption is that once food security is achieved, positive nutrition outcomes will follow automatically. This assumption ignores the fact that the surrounding environment and care practices play an important role in improving nutrition outcomes. For example, even if a bumper harvest results in adequate grain stores and increased income for a household, nutrition outcomes may remain very poor due to lack of adequate

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* Stunting is defined as low height for age, and can be qualified as mild, moderate, or severe. Stunting is used as an indicator of chronic undernutrition. A stunted individual has experienced a long-term deficit in overall caloric intake, sometimes beginning in utero. Stunted individuals also often suffer from specific micro-nutrient deficiencies.
sanitary facilities, lack of potable water, and unhealthy weaning practices. The belief that food security equals nutrition security can weaken the case for interventions focused explicitly on reducing malnutrition. For example, national development frameworks with this perspective often include agricultural development plans focused solely on increasing production. The assumption is that increased production will improve food security and thus automatically improve nutrition outcomes as well. But if the lion’s share of funding is devoted to maximizing yield, minimal or no investment will be made in non-production oriented activities, such as extension-based nutrition education programmes. These local-level initiatives are often a crucial avenue for communicating important messages regarding dietary diversity, cooking methods, effective management of household resources, and hygiene to at-risk populations. From a nutrition perspective, agricultural development plans that do not include funding for these types of activities are incomplete. Increased food security (which is not necessarily a direct result of increased yields) does not guarantee improved nutrition.

The conflation of food security and nutrition is closely related to a second misconception, lack of understanding regarding the causes of micronutrient deficiency. Often, the same policy makers who erroneously assume that increased production will automatically improve nutrition are also unaware of the causes of specific micronutrient deficiencies. Increased production may improve food security and reduce income poverty, but it will not necessarily reduce the vicious synergism that exists between many infectious diseases (e.g. malaria and measles) and micronutrient deficiency (e.g. iron deficiency anemia), nor will it directly improve dietary diversity or increase intake of micronutrient-rich foods. These links between disease, micronutrient deficiencies and dietary diversity are scientifically proven, but are not common knowledge outside of nutrition advocacy circles.

A final misconception concerns the fact that many countries do not associate a high prevalence of undernutrition with governmental inability to fulfil its duties to its citizens. This lack of accountability, coupled with a belief that malnutrition is an endemic condition and not something to take action against, can limit incorporation of explicit nutrition objectives into national policy agendas.

Although there are many countries that have yet to incorporate nutrition into their development strategies, progress is being made. National Plans of Action for Nutrition (NPANs) are one example. A result of the 1992 International Conference on Nutrition, the NPAN concept was intended to, inter alia, mobilize political and funding support for food and nutrition programmes at the country-level. In a number of countries, NPANs have been worked into national development plans. Poverty Reduction Strategies Papers (PRSP) are often cited as another mechanism through which nutrition initiatives are being incorporated into national development agendas. PRSPs that include budget allocations which reflect nutrition’s important role in poverty reduction are important tools for mainstreaming nutrition objectives into broader development plans.

However, a recent review of PRSPs in countries facing serious malnutrition showed that while over 70% identified malnutrition as a development problem, only 35% actually included budget allocations for explicit nutrition activities. This finding corroborates the perception that, while nutrition is beginning to receive attention as requisite to economic growth, few countries choose or are able to follow up with programmatic action on the ground. Some of the reasons for this disconnect are discussed below.
1.3) Mainstreaming Nutrition Objectives: Constraints to Operationalization

As mentioned above, nutrition issues are not neatly circumscribed within a single sector. Determinants of persistent undernutrition are complex and include health, education and agricultural pathways. A comprehensive national nutrition strategy requires cross-sectoral collaboration between these areas. However coordinating action between the Ministries of Health, Agriculture, and Education, and possibly also Planning, Communication and Trade, is difficult for a number of reasons.

First and foremost, resource allocation and planning are issues. Each sector is competing with others for funding to carry out its own mandate. Since monitoring and evaluation (M&E) is based on sector-specific criteria, and improved nutrition outcomes are not typically used as performance indicators for most ministries, it can be difficult to incentivize nutrition-based mandates across a multiplicity of ministries. For example, most political leaders will not judge the effectiveness of a Ministry of Education based on its success in reducing prevalence of iron deficiency anaemia among schoolchildren. Rather, they will look at criteria relevant to the education sector, such as literacy rates and test scores. The challenge is thus how to activate a nutrition mandate within ministries who are evaluated on non-nutrition oriented activities (e.g. improving literacy rates).

Second, plans for cross-sectoral nutrition policies often face constrained capacity for nutritional analysis. Nutritional analysis of a population includes assessment of micronutrient status, collection of anthropometric data, collection of data on household food security and dietary diversity, and context-specific understanding of both the proximal and distal causes of malnutrition. Since staff with these expertise are typically relegated to a small nutrition division within the Ministry of Health, they often have limited or no reach into the Ministry of Agriculture, let alone Trade, Finance or Education. Thus assessing all of the activities implicated in a cross-sectoral national nutrition policy might prove very difficult. In other words, the small team of nutrition specialists would need to analyze the success of nutrition activities in various ministries (e.g. school feeding programs, agricultural extension programs, value chain initiatives, and crop diversity projects) regularly. This would require (1) full cooperation and disclosure on the part of the involved ministries and (2) a considerable amount of time and capacity on the part of the nutrition team. In many countries, neither variable is guaranteed.

A number of countries have attempted to address these difficulties via creation of a national nutrition coordinating body or council. For example, Mozambique, Namibia, Nigeria and Uganda have all created organizations designed to facilitate inter-ministry collaboration on national nutrition policy and programmes. Sometimes these organizations can be multi-tiered. For example, the coordinating body in Namibia consists of a Council, Technical Committee and Secretariat. Regardless of design, these coordinating bodies have been – to date – relatively ineffective in mobilizing resources and collaboration across ministries and sectors. In addition to the challenge of reconciling specific ministries' mandates with nutrition initiatives, these councils are hamstrung fiscally. Costs for nutrition programmes in many Sub-Saharan African (SSA) countries (including the five mentioned above) are borne primarily by external funders, and since much of the counsels’ ability to incentivize specific ministries' actions against malnutrition is predicated on the ability to mobilize and allocate resources, the power of these coordinating bodies is compromised by lack of funding.

Despite the inefficacy of many of these coordinating bodies to date, they hold considerable value from a policy perspective. First, they create an institutional framework or “home” for nutrition at the national level. Although these “homes” might have little power to effect programmatic action, they legitimize nutrition as a national development priority and create a window of
opportunity for nutrition advocates to enter into national level policy debates. Second, coordinating bodies lend permanency to long-term efforts to address malnutrition. When a country’s nutrition advocates are only able to coordinate efforts via a loose knit, unformalized coalition, turnover in personnel and administration threatens the continuity of the progress. Long term, sustained and scaled-up action to reduce malnutrition is more likely to succeed with an institutionalized coordination council in place.

2. MALAWI’S NATIONAL NUTRITION POLICY: CASE STUDY

2.1) Rationale

Malawi was chosen as a promising case-study of the mainstreaming process due to its unusually proactive National Nutrition Policy (NNP) and underlying institutional framework, which include the type of coordinating body discussed above. Since 2006, Malawi’s Department of Nutrition has fallen directly under the aegis of the Office of the President and Cabinet (OPC). Consequently, Malawi’s Nutrition Department – unlike most SSA countries – is not under the purview of the Ministry of Health, but rather is a separate entity empowered to enact nutrition objectives at its own discretion and with its own budget, thus facilitating (1) cross-sectoral collaboration and (2) pursuit of a national nutrition mandate as part of a broader development strategy.

2.2) Country Background

Malawi is a small, land-locked country with one of the highest population densities in SSA. It also is one of the poorest countries in the world. Approximately 52% of the population fell below the poverty line in 2005, and one in five Malawians live in such severe poverty that they cannot afford to meet daily-recommended food requirements. Ninety percent of its population is rural and depends on rain-fed, small-scale agriculture. A majority of these households cultivate very small land-holdings, primarily for consumption, making them especially vulnerable to environmental shocks. These high levels of poverty and dependence on rainfed, subsistence agriculture contribute to chronic food insecurity and high levels of malnutrition. The latter is exacerbated by inadequate and inappropriate nutrition knowledge, gender disparities, environmental degradation, inadequate service delivery infrastructure, and a shortage of nutrition specialists, dieticians, and community nutrition workers. In addition, based on estimates from 2005/2006 surveillance, 14% of Malawians between 15 and 49 years of age are infected with HIV. The increased caloric and nutritional requirements of individuals affected with HIV, and the decreased productivity that occurs in populations with a high prevalence of the disease, further contribute to Malawi’s high rates of malnutrition.

The primary manifestation of the nutrition challenges facing Malawi is chronic stunting (low height for age). At 48%, Malawi has the highest level of stunting in SSA. (Figure 2) Moreover, prevalence is pervasive, having hovered around 50% since 1992. This situation is in contrast to a number of other countries in the region (e.g. Mozambique, Ethiopia, and Tanzania) where stunting rates appear to be declining. In addition to stunting, maternal malnutrition (as measured by short stature <145 cm) is the third highest in SSA. Moreover, approximately 38% of all child deaths beyond early infancy in Malawi are associated with malnutrition.
Although Malawi has been working to address these challenges for decades, stunting remains a tenacious problem throughout the country. There are clearly a number of possible explanations why success has proven elusive. Cataloguing every potential cause is beyond the scope of this paper, but two issues that were repeatedly mentioned to the author are as follows: First, funding for Malawian nutrition initiatives typically comes from many different sources and is used to finance projects in a localised area determined by the funder. Subsequently nutrition projects in Malawi are often difficult to monitor in any sort of comprehensive and comparable way. Historically, a number of these projects may have proven successful within the district or village where they were implemented, but their piecemeal formulation made them difficult to reproduce and scale-up to country level. Second, lack of evidence regarding impact can be a barrier to scaling up projects. That is, if success at the local level is not substantiated, funders have little incentive to expand the intervention to other districts or to national level. To this authors’ knowledge, very few impact evaluations of nutrition interventions have been conducted in Malawi.

2.3) Overview of the Department of Nutrition’s National Nutrition Policy

During the 1970’s and 80’s, the haphazard nature of the interventions described above led to a series of uncoordinated and redundant nutrition projects in Malawi. In an initial attempt to improve efficacy and cohesion, the Government of Malawi (GoM) adopted the first Food and Nutrition Policy in 1990. However, the nutrition component of the policy did not articulate mechanisms for operationalization, did not include budget allocations for explicit nutrition initiatives, and did not provide any capacity for community implementation.

In a more recent effort to address Malawi’s national nutrition challenge, the Department of Nutrition, HIV and AIDS (DNHA) was established in the Office of the President and Cabinet (OPC) in 2004, and a new Food and Nutrition Policy was approved by the Cabinet in 2005. Upon approving the 2005 Policy, the OPC also made the decision to split the document into two parts, (1) a “Food Security Policy”, to be implemented primarily through the Ministry of Agriculture and Food Security, and (2) a “National Nutrition Policy” (NNP), to be implemented primarily...
through the DNHA. From a policy perspective, this split is noteworthy in its recognition that food security and nutrition, while closely related, are not interchangeable and should not be conflated (see Sections 1.2 and 1.3).

The first NNP written under the OPC’s purview was approved in December 2007. A second iteration was drafted in 2008 and is expected to launch in March 2009. This revised version of the NNP is formulated to improve coordination of nutrition service delivery and to create a national standard and strategy for interventions. Ancillary to the NNP are four subsidiary directives designed to facilitate its operationalization. They are as follows:

- National Nutrition Strategic Plan
- National Nutrition Programme
- National Nutrition Business Plan
- National Nutrition Communication Strategy

The primary components of the NNP are these directives. The document describes all four in detail, including a catalogue of objectives, activities and outcomes associated with each one. (Please see Annex 2 for an outline of the NNP.) These action items focus on eleven priority areas, specifically:

- Increased Cross-Sectoral Coordination
- Capacity Building
- Research and Development
- Nutrition Guidelines
- Education
- Prevention and Treatment of Nutrition-Related Disorders
- Dietary Diversification and Food Utilization
- Food Safety and Quality
- Nutrition, HIV and AIDS
- Nutritional Needs of Vulnerable Groups
- Nutrition-Related Advocacy

Thus the NNP addresses – at least on paper – many (but not all*) key determinants of nutritional status. These include prevention (e.g. via nutrition education and advocacy) therapeutic interventions (e.g. via micronutrient supplementation) and food-based approaches (e.g. dietary diversification). Although this author was unable to obtain any information regarding how resources are allocated between these eleven priority areas, it is likely that external funding plays an important role. For example, the European Commission funds a network of therapeutic feeding centers, and NGOs (COOPI, CONCERN Worldwide) have collaborated on implementation of Community Therapeutic Care initiatives in a number of districts. These focus areas also appear to fit with the African Regional Nutrition Strategy (ARNS) goals.** (ARNS is a regional initiative designed to (1) increase awareness of the economic import of nutrition among policy makers and politicians in Sub-Saharan Africa, and (2) improve capacity for implementation of nutrition agendas at the country level.)

* Two key areas that were not addressed are child health (vaccinations and treatment) and sanitation.

** Implementing food and nutrition intervention programmes; integrating nutrition into the development agenda; monitoring nutritional status and evaluating programme effectiveness; advocacy and communication; building institutional capacity; strengthening policy and institutional frameworks; promoting community participation; and mobilizing resources.
The NNP also includes multiple sections listing sector-specific nutrition objectives intended for incorporation into many of the Government of Malawi’s ministries. For example, both the Nutrition and AIDS Business Plan and the Nutrition Strategic Plan include the following directives for the Ministry of Agriculture and Food Security:

- Facilitate food production, storage and marketing;
- Promote fish farming;
- Provide early warning systems.
- Identify, develop and produce technologies for food processing, preservation and storage.
- Promote livestock production to increase access and availability of high nutritive value foods.
- Conduct operational research on technologies use.
- Promote use of appropriate bio-technology in the agriculture sector.
- Promote the production of highly nutritive value foods for a nutritious diet.
- Maintain nutritive value of foods in the production chain.
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS.

Moreover, the NNP includes these types of sector-specific directives for a host of ministries:

- Ministry of Women and Children’s Affairs
- Ministry of Health
- Ministry of Agriculture and Food Security
- Ministry of Foreign Affairs
- Ministry of Transport and Public Works
- Ministry of Education, Science and Technology
- Ministry of Tourism, Wildlife and Culture
- Ministry of Economic Planning and Development
- Ministry of Finance
- Ministry of Energy Mines and Environmental Affairs
- Ministry of Defence
- Ministry of Local Government and Rural Development (District Assemblies)
- Ministry of Lands Housing and Surveys
- Ministry of Justice and Constitutional Affairs
- Ministry of Information and Civic Education
- Ministry of Labour and Social Development
- Ministry of Youth and Sports
- Ministry of Irrigation and Water Development
- Ministry of Persons with Disabilities and the Elderly
- Ministry of Home Affairs and Internal Security

These directives are commendable in terms of their normative emphasis on cross-sectoral collaboration, as well as their inclusion of a wide array of ministries. However, they might also prove challenging because of the demands they make in terms of a nutrition focus. As discussed above, many government actors do not recognize the cross-cutting nature of nutrition, nor is malnutrition always considered a government responsibility. Hence, the opportunity costs of allocating time, money and personnel to nutrition initiatives might be considered prohibitive in many of these ministries.

One of the author’s primary goals in visiting Malawi was to gather information from key stakeholders regarding these perceptions and challenges. Due to time constraints, interviews with all the ministries listed above were not possible. Instead, in addition to the DHNA itself, interviews were conducted with representatives from those ministries that are traditionally considered integral to the promotion of nutrition objectives, namely Agriculture, Health,
Education, and Economic Development. As the draft NNP also cites Development Partners (i.e. multi and bilateral aid agencies) and NGOs as stakeholders, and includes directives for these organizations as well, interviews were conducted with FAO, UNICEF, representatives from COOPI and GTZ, as well as with members of the Food and Nutrition Security Joint Taskforce (FNSJTF) made up of government and development partners and housed within Malawi’s Ministry of Agriculture and Food Security. (Please see Annex 1 for a complete list of interviews.) Although interview questions were tailored towards the specific parties involved, each interview attempted to obtain information on programmatic action in nutrition, both in terms of initiatives and projects, and in terms of barriers to implementation.

3. FINDINGS REGARDING MALAWI’S NATIONAL NUTRITION POLICY

3.1) Lack of Human Capital: Malawi needs more nutrition personnel

There was a general consensus among interviewees that perhaps the biggest challenge to implementation of the NNP is not a lack of commitment among stakeholders, but rather a lack of qualified personnel. One of the main objectives of the NNP is to increase the presence of nutrition workers in all 27 of Malawi’s district areas. The term “workers” includes a host of actors, ranging from volunteers (at the village level), paid nutrition officers at the municipal level, and paid extension workers from the Ministry of Agriculture and Food Security’s Extension Department. Increasing the presence of nutrition workers on the ground poses a serious challenge in terms of financing and in terms of recruitment. For example, the Ministry of Agriculture and Food Security has currently budgeted for a number of nutrition officers at the municipal district level. To date, these posts, which include nutrition education, nutrition surveillance, and food and nutrition programme officers remain vacant, not due to lack of funding, but to lack of qualified personnel. (Please see Annex 4, “Nutrition Post Vacancies”.) This situation underscores the need to support national capacity building. FAO and other international agencies might consider prioritizing assistance in this area for Malawi.

In addition to filling existing vacancies, the NNP also stipulates creation of new, village level nutrition posts. These village-level nutrition workers - officially referred to as “Community Nutrition Workers” (CNWs) - are to liaise with existing Health Surveillance Assistants (from the Ministry of Health) and Food and Nutrition Security Workers (from the Ministry of Agriculture) to improve delivery of nutrition education at the village level. A number of interviewees expressed concern at the prospect of creating new positions when, per one interview, “over 90% of the existing, funded positions at district level are not filled.” That said, interviewees also pointed out that the current pool of community-level operatives - the Health and Food and Nutrition Security Workers mentioned above – were overwhelmed with responsibilities and served too much of a “jack of all trades” function to be counted on as effective deliverers of explicit nutrition information.

In other words, Malawi clearly needs more trained nutrition personnel. On the one hand, they do not have sufficient staff to fill existing posts, let alone new ones. On the other hand, the personnel that do exist are overworked and trying to fulfill too many duties at once, thus compromising quality of service delivery. One interviewee pointed out that the new, village level posts might not be necessary were the existing positions staffed by a sufficient quantity of well-trained personnel who were not overwhelmed by multiple responsibilities.

When appropriate, interviewees were questioned regarding Malawi’s dearth of qualified nutrition personnel. Respondents cited several constraints and potential solutions. Bunda College of Agriculture’s Department of Home Economics and Human Nutrition is currently the
only institution in Malawi to offer advanced degrees in nutrition. Bunda College is not big enough to train the number of nutrition workers called for under the NNP, other training agencies need to be used. One solution could be to offer more nutrition training at Malawi’s College of Natural Resources, where the majority of extension workers are trained and also at the Home Economics Program at the University of Malawi, Chancellor College.

The DHNA’s 2008-2009 Workplan includes the specific objective of reducing the vacancy rate in nutrition posts to 40%. MK 5.5 million (approximately US $38,215) have been earmarked for this action item. (Please see Activity 23, in Malawi’s Annual Work plan.) Clearly, the department recognizes the capacity issue as a major problem and is taking steps to improve the situation.

3.2) Incorporating Nutrition Initiatives into the Department of Agriculture and Food Security’s Agenda: Crop and Dietary Diversity

Pursuant to the directives listed in the draft NNP for the Department of Agriculture, a consultative meeting on the incorporation of food and nutrition security into Malawi’s Agriculture Development Program (ADP) was held in Blantyre from July 15 to July 18, 2008. Subsequent to the meeting, fifteen specific objectives were proposed for integration into the ADP, most of them focused on increasing crop diversification and increasing dietary diversity via nutrition education (see Annex 3). These recommendations were submitted to the Ministry of Agriculture on August 1, 2008. As of February 2009, a revised version of the ADP incorporating many of the Blantyre recommendations had been finalized and was awaiting Parliament approval.

In terms of dietary diversity, the issue is again one of capacity building. Since most agricultural extension workers are currently minimally trained (if at all) in nutrition education, there will be significant fiscal challenges to funding this initiative. Moreover, the former objective, crop diversification, is not the same thing as dietary diversification, and since –from a nutrition perspective– the promotion of crop diversification is considered a means to an end in terms of improving the quality of an individual’s diet, the returns to any crop diversification project are inextricably linked to implementation of projects aimed at increasing nutrition education on the ground. Thus increasing the extent to which agricultural extension workers are trained in nutrition education is imperative to the pursuit of nutrition objectives within Malawi’s agricultural sector.

3.3) Resource Allocation & External Funding

A main function of the DHNA is to find funding for Malawi’s nutrition programmes and projects. Specifically per the NNP, one of the Department’s primary purposes is to “[g]uide and facilitate resource mobilization, project implementation, structural development and capacity building in relevant areas.” (NNP, p.7). The NNP Action Plan for 2008 and 2009 includes explicit objectives for resource mobilization and fundraising. For example, Activity 27 calls for negotiation to increase the Department’s budget allocation. There are also objectives focused on media advocacy and civic education (e.g. Activities 26 and 31, in Malawi’s Annual Workplan).

* Available upon request.

** Crop diversification is also an important income generating activity, but in terms of specific nutrition objectives, the income generating aspect of crop diversification is often considered secondary to improved quality of intake. This is especially true in Malawi, where 70 to 83% of agricultural production is primarily for home consumption. (Statistic courtesy of Stanley Chitekwe, UNICEF.)
In terms of external funding, it is unclear how much progress has been made on realizing these goals. According to Catherine Mkangama, Director for Nutrition and HIV/AIDS within the DHNA, proposals for small projects in 2008 have been submitted to IrishAID, EU, and BankIntesa. In addition, UNICEF has hired a consultancy firm to finalize the national nutrition policy and strategic plan including costing it. Once this is finalised a number of donors have indicated they will use it to guide areas of support for nutrition in Malawi.

The Government of Malawi (GoM) has increased funding for nutrition and HIV programmes since the inception of the DHNA in 2004. Most recently, the budget allocation increased from MK20 million for fiscal year 2007/2008 to MK36 million for fiscal year 2008/2009. Moreover, in 2007 the GoM directed all ministries to use 2% of their other recurrent transactions on HIV and AIDS related activities. Despite these changes, the DNHA is still operating under a severe budget constraint, as the entire projected budget for the department in 2008/2009 is MK387 million. In other words, a scant 9.3% of the DNHA’s total budget requirements are currently covered by government funds.

4. RECOMMENDATIONS: IMPROVE FUTURE MAINSTREAMING EFFORTS IN MALAWI

4.1) Capacity Building: Needs Assessment for Training and Capacity-Building

Capacity building was cited perhaps more often than any other issue during the mission and is also a theme mentioned repeatedly in the literature that provided the base for this paper’s first section. The dearth of qualified personnel at every level - national, district, municipal and local - is possibly the biggest challenge to operationalization of Malawi’s NNP. It follows that one recommended action is a needs assessment of Malawi’s current and projected capacity requirements for promotion of cross-sectoral nutrition initiatives. Ideally, capacity in agriculture, health and education would be evaluated.

Overarching questions would include (1) identifying the level of government where the lack of personnel is greatest, (2) identifying the level of government where the impact of the lack of personnel is greatest, and (3) identifying areas of knowledge that are most needed to carry out effective delivery of services. For example, dietary diversity is a major issue in Malawi, as much of the population’s diet is dominated by cereals, which can comprise over 65% percent of total calories consumed. Moreover, 93% of that cereal consumption is maize-derived. Although efforts to improve dietary diversity at the village level are underway, it has been a difficult campaign for the Agricultural Extension Office to promote, due to lack of trained personnel at the local level. One relevant question to ask during a needs assessment would be whether a village-level intervention would be more effective than a national media campaign or radio spot, and whether micro-nutrient supplementation might also be considered as adjunct to a project promoting food-based dietary diversity.

Subsequent to the actual assessment, a number of potential actions could be taken by the GoM, FAO and/or other actors to improve capacity. Perhaps the most sustainable - while difficult - solution is to attempt to strengthen the nutrition courses that are available in Malawi. As mentioned above, these options are currently limited and expanding them would require substantial investment, funnelled presumably through the Department of Education, or via external funding. Another option would be to send a number of GoM representatives (identified during the needs assessment) for training out-of-country. One option is the University of Kwa Zulu Nataal. The Universities of Benin and the West Cape have also been mentioned as good options for SSA representatives seeking to improve knowledge in the areas of food and nutrition security.
Underscoring the issue of capacity building in Malawi is the fact that there is no clear relationship between malnutrition in Malawi and wealth. (Figure 3) Although stunting occurs less often in children from upper income quintiles, the difference between the richest and poorest households is minimal (5%) and is not monotonic across quintiles. In this context, the need for nutrition officers and workers to disseminate nutrition information is especially pronounced, as the causes of stunting in Malawi appear to be rooted as much or more in information asymmetries than in lack of economic resources.

**Figure 3: Child malnutrition and household wealth**

![Figure 3: Child malnutrition and household wealth](image)


### 4.2) Knowledge Management: Incorporating Nutrition Monitoring Systems into Broader Development Frameworks

As mentioned in Section 1, improved nutrition and food security are key to the success of national development plans proposing to reduce poverty. For example, growth monitoring, dietary diversity, and household level food security are specific indicators that can serve as proxies to evaluate a country’s development progress. Thus there is a strong argument to be made for the incorporation of these types of indicators into national level surveys and M&E systems.

Along these lines, one suggestion for Malawi involves incorporation of their nutrition and food security surveillance data into the Ministry of Planning and Economic Development’s MVAC system. MVAC, which stands for Malawi’s Vulnerability Assessment Committee, is a survey which is conducted multiple times per year and uses the Household Economy Approach (HEA) to identify areas in the country that might be vulnerable to food insecurity. MVAC data provide the primary reference for national-level targeting decisions. MVAC uses nutrition and dietary diversity data collected by UNICEF on a twice-annual basis to corroborate its HEA results. However, the HEA data is collected far more often than bi-annually, as the MVAC assesses these data based on (1) fluctuations in the market price of maize and (2) current production and yield levels within Malawi. The idea is to use Malawi’s Integrated Nutrition and Food Security Sentinel Site Surveillance data to triangulate the HEA data, thus improving identification of vulnerable districts. Moreover, since the surveillance data is collected under the aegis of the Ministries of Health and Agriculture, this process would increase collaboration across sectors.

*Note that, also per Section 1, these indicators should also be considered inputs to economic growth!*
4.3) Implications for FAO/ AGN

The AGN division at FAO is well-positioned to collaborate with the GoM and DHNA on the recommendations cited above. Technical support, advocacy, communication, trend monitoring and assessment are all AGN specialty areas. AGNP has extensive knowledge in the areas of nutrition education, communication and knowledge transfer, and AGNA is expert in fine-tuning and implementing simple tools designed to assess household food security and dietary diversity. Such information is critical for policy advice, targeting at community level, impact assessment and programme design and evaluation. Finally, AGN’s policy group has a strong comparative advantage in providing advice and support for the integration of nutrition initiatives within national development framework. A number of practical reference documents from AGN are currently available on this subject.28 (Available upon request.)

5. CONCLUSION: EXPEDITE EFFORTS IN PRIORITY AREAS

The first sections of this paper defined the concept of mainstreaming nutrition in national development strategies, and described barriers to implementing a “mainstreamed” national nutrition policy. Key mainstreaming issues include the erroneous conflation of food security with nutrition, lack of understanding among policy makers and politicians regarding the causes of micronutrient deficiency, and the belief that nutrition is not a basic need that falls under government purview. However, perhaps the biggest barrier to implementation is the challenge of inter-ministerial resource allocation and planning. The creation of national nutrition coordinating bodies is one way a number of countries have attempted to address this challenge.

To what degree has Malawi’s coordinating agency, the DHNA under the OPC, facilitated nutrition mainstreaming? Progress has clearly been made in certain areas; perhaps most notably in the timely revision of the ADP, and in GoM budget allocations for nutrition objectives. The former is especially noteworthy in its focus on improving the distinction between food security and nutrition within the agricultural sector, the latter in its efforts to institutionalize cross-sectoral collaboration. However, formidable challenges to programmatic action remain, especially in the areas of recruitment of nutrition professionals and funding. Future efforts could focus on (1) capacity building, both in terms of training and recruitment of personnel, and in terms of institutional capacity, and (2) improving the synthesis between nutrition surveillance data, routine monitoring of child growth, and vulnerability assessments. Specific and immediate actions could be taken in the form of a needs assessment of Malawi’s current and projected capacity requirements for promotion of cross-sectoral nutrition initiatives, and in the incorporation of nutrition surveillance data into the MVAC. A needs assessment might be especially useful if conducted in conjunction with the UNICEF consultancies to assess the costs of interventions and to assess barriers to implementation. (See Section 3.3)

The need to expedite efforts becomes especially clear upon consideration of Malawi’s political climate. National elections in Malawi will be held in May 2009, and due to the uncertainties of political change, the OPC may be re-organized, perhaps to the detriment of the DHNA and its agenda. Therefore, it is imperative to act quickly. Malawi’s current commitment to making nutrition a national development priority is impressive. The present administration recognizes that malnutrition is a problem that requires sustained action on the part of government to address. However, as the first part of this paper mentions, most governing bodies do not hold themselves accountable to issues of malnutrition, and there is no evidence to indicate that Malawi’s opposition parties consider nutrition to be a major development priority.

Hence time is of the essence. Taking action in the areas discussed above as soon as possible, while the current policy framework is still in place, will help move Malawi towards achieving its
full potential in terms of national economic growth and in terms of allowing its citizens to live long, healthy and productive lives.
# ANNEX 1: List of Interviewees

<table>
<thead>
<tr>
<th>INTERVIEW</th>
<th>AFFILIATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alick Nkhoma</td>
<td>FAO: Assistant Representative</td>
</tr>
<tr>
<td>Ruth Butao</td>
<td>FAO: Nutrition Policy Advisor</td>
</tr>
<tr>
<td>Humphrey Mdyetseni</td>
<td>Department of Nutrition: Chief Planning, Research &amp; Evaluation Officer</td>
</tr>
<tr>
<td>Eric Chilembwe</td>
<td>Ministry of Agriculture: Consultant</td>
</tr>
<tr>
<td>Tamara Lampe</td>
<td>FAO: Program Officer for Nutrition, FS &amp; Climate</td>
</tr>
<tr>
<td>Alexandre Castellano</td>
<td>Cooperazione Internazionale (COOPI): Director</td>
</tr>
<tr>
<td>Stanley Chitweke</td>
<td>UNICEF: Nutrition Manager</td>
</tr>
<tr>
<td>Neil Orchardson</td>
<td>Ministry of Agriculture: Joint Taskforce for FS&amp;N – Technical Secretariat</td>
</tr>
<tr>
<td>Lynne Kachama</td>
<td>Department of Nutrition/ Joint Taskforce for FS&amp;N: Administrative</td>
</tr>
<tr>
<td>Hannock Kumwenda</td>
<td>Ministry of Economic Planning and Development: Malawi Vulnerability Assessment Committee</td>
</tr>
<tr>
<td>Beatrice Mtimuni</td>
<td>Bunda College, University of Malawi: Head, Department of Home Economics/ Human Nutrition</td>
</tr>
<tr>
<td>Alexander Kalimbira</td>
<td>Bunda College, University of Malawi: Lecturer, Department of Home Economics/ Human Nutrition</td>
</tr>
<tr>
<td>Grace Malindi</td>
<td>Department of Agricultural Extension: General Director</td>
</tr>
<tr>
<td>Margaret Lwanda</td>
<td>Department of Agricultural Extension: Deputy to Director – Nutrition Services</td>
</tr>
<tr>
<td>Catherine Mkangama</td>
<td>Department of Nutrition: Director for Nutrition &amp; HIV/AIDS</td>
</tr>
<tr>
<td>Tapiwa Ngulube</td>
<td>Ministry of Education: Principal Nutritionist</td>
</tr>
<tr>
<td>Stacia Nordin</td>
<td>Ministry of Education: Nutritionist/ GTZ: Nutritionist</td>
</tr>
</tbody>
</table>
ANNEX 2: NNP Outline

SECTION ONE: INTRODUCTION

I. Executive Summary: 4 main sections of the NNP
1. broad policy direction (mission/vision, goals, strategy outline)
2. national framework of operationalization (NNP Programme), defines stakeholders (cross-sectional)
3. business plan (roles and responsibilities based on their mandates, priority areas and comparative advantage)
4. strategies for sectors

II. Basis for having an NNP
1. Legal (MDGs, Constitution of Malawi)
2. Economic (lost GDP productivity, impaired achievement These categories (a) and (b) are confusing)
3. Research Base/Credible Evidence (v. high rates of malnutrition)
   (a) "nutrition and research"
   (b) "social and research"
4. Political (accountability)
5. Institutional (lack of infrastructure)

III. Rationale for NNP
1. Statement of Problem (v. high rates of malnutrition)
2. Purpose of Policy (streamline, coordinate, facilitate)
3. Linkages to broader development framework (sector-specific policies that NNP is relevant to)
4. Challenges to Implementation
   (a) institutional
   (b) financial
   (c) human resource and management
   (d) community level

SECTION TWO: BROAD POLICY DIRECTION

I. Vision
II. Mission
III. Overall Goal

SECTION THREE: POLICY STATEMENTS, OBJECTIVES & STRATEGIES

I. Policy Statement 1: Position Nutrition as Central to Development
1. Objective 1 (multisectoral approach)
2. Key Strategies 1 (ministry and stakeholder mandates)
3. Objective 2 (increase funding for nutrition programmes and projects)
4. Key Strategies 2 (increased collaboration, information dissemination)
5. Objective 3 (improve institutional capacity for service delivery)
6. Key Strategies 3 (increase nutrition posts, increase pool of trained personnel)
7. Objective 4 (coordinate nutrition programmes at all levels)
8. Key Strategies 4 (NNProgramme, Subcommittees, >d M&E)

II. Policy Statement 2: Collaborate with private and public sector on a variety of nutrition initiatives

III. Policy Statement 3: Standardise and improve quality of nutrition services through development, periodic review and dissemination of nutrition guidelines

IV. Policy Statement 4: Sustained adoption of key optimal nutrition practices through nutrition education, counselling and negotiation based on the principles of behaviour change communication

V. Policy Statement 5: NNProgramme will focus on promotion of optimal nutrition practices & healthy food choices

VI. Policy Statement 6: Increase research and information dissemination in Malawi to ensure evidence base for nutrition initiatives

VII. Guiding Principles for Policy Implementation
1. Political will & commitment
2. Good governance
3. The rule of law
4. Economic "governance"
5. Human rights
6. Accountability and transparency
7. Community empowerment
8. Sustainable use of resources
9. (Gender) equity in nutrition
10. Evidence based interventions

VIII. Implementation Arrangements
XI. Monitoring & Evaluation

SECTION FOUR: THE NATIONAL NUTRITION PROGRAMME

I. Programme Priority Areas & Their Components
1. Reposition nutrition as central to development
   (a) strategies
   (b) activities
2. Increase budget allocation to NNP
   (a) strategies
   (b) activities
3. Strengthen institutional capacity
   (a) strategies
   (b) activities
4. Establish coordination mechanism for nutrition services, programmes and projects
   (a) strategies
   (b) activities
5. Strengthen partnerships with stakeholders (dev partners, private sector)
II. Strategies and Activities for Programme Priority Areas
1. Priority Area 1: Prevention, control and treatment of nutrition disorders
   (a) strategies
   (b) activities
2. Priority Area 2: Strengthen capacities for households and communities to attain adequate nutrition for their families with emphasis on socio-economically deprived persons
   (a) capacity building
   (b) research and development
   (c) nutrition guidelines
   (d) education
   (e) prevention, control and treatment of nutrition disorders
   (f) DD and food utilization
   (g) food safety and quality
   (h) nutritional needs of vulnerable groups
   (i) nutrition related advocacy

III. Implementation of the Programme
1. National level implementation
2. District & local level implementation
3. Coordination
4. M&E

SECTION FIVE: NUTRITION STRATEGIC PLAN

I. Introduction and background to strategic plan
1. Nutrition Situation (prevalence of deficiencies)
2. Government Commitment (institutional framework)

II. Situational Analysis (of current Nutrition Delivery Mechanisms)
1. Strengths
2. Weaknesses
3. Opportunities
4. Threats

III. Operating Environment
1. Organizational overview
2. Vision
3. Emerging issues, challenges and their implications

IV. Strategic Direction & Objectives
1. Mission Statement
2. Goal
3. Objectives
4. Outcomes
(a) NNP finalised
   i. outputs/activities
(b) NNP launched, disseminated & circulated
   i. outputs/activities
(c) formulation of National Nutrition Act facilitated
   i. outputs/activities
(d) nutrition guidelines reviewed
   i. outputs/activities
(e) standardized guidelines produced, disseminated
   i. outputs/activities
(f) resource materials reviewed
   i. outputs/activities
(g) revised resource materials produced, disseminated
   i. outputs/activities
(h) nutrition programmes strengthened, coordinated
   i. outputs/activities
(i) roles & responsibilities of coordination structures defined
   i. outputs/activities
(j) coordination structures finalized, adapted
   i. outputs/activities
(k) inventory of stakeholders and their programmes developed
   i. outputs/activities
(l) database and website developed
   i. outputs/activities
(m) Initiate Research, improve Planning, Monitoring and Evaluation of Nutrition Policies and Programmes
   i. outputs/activities
(n) develop sufficient institutional capacity to meet dept’s mandate
   i. outputs/activities
(o) mobilize resources for the implementation of nutrition programmes
   i. outputs/activities

V. Critical Success Factors: Assumptions & Risks
   1. Assumptions
   2. Risks

VI. Strategic Plan Implementation
   1. Action Plan
   2. Role of Stakeholders
   3. Role of M&E

SECTION SIX: NUTRITION HIV AND AIDS BUSINESS PLAN

I. Background
   1. Overview and Background to Planning
   2. General Situation of Nutrition in Malawi
   3. Government Commitment

II. Situational Analysis
1. Strengths
2. Weaknesses
3. Opportunities
4. Threats

III. Operating Environment
1. Organizational overview
   (a) mandate
   (b) vision/mission
   (c) goals/objectives
2. Operating Structures & Stakeholder Functions re. Nutrition Mandate
   (a) Ministry of Women and Children's Affairs
   (b) Ministry of Health
   (d) Ministry of Foreign Affairs
   (e) Ministry of Transport and Public Works
   (f) Ministry of Education, Science and Technology
   (g) Ministry of Tourism, Wildlife and Culture
   (h) Ministry of Economic Planning and Development
   (i) Ministry of Finance
   (j) Ministry of Energy Mines and Environmental Affairs
   (k) Ministry of Defence
   (l) Ministry of Local Government and Rural Development (District Assemblies)
   (m) Ministry of Lands Housing and Surveys
   (n) Ministry of Justice and Constitutional Affairs
   (o) Ministry of Information and Civic Education
   (p) Ministry of Labour and Social Development
   (q) Ministry of Youth and Sports
   (r) Ministry of Irrigation and Water Development
   (s) Ministry of Persons with Disabilities and the Elderly
   (t) Ministry of Home Affairs and Internal Security
   (u) Development Partners
   (v) Private sector
   (w) NGOs, CBOs, faith-based orgs, civil society
3. Operating Structures & Stakeholder Functions re. HIV Mandate
   (a) Ministry of Women and Children's Affairs
   (b) Ministry of Health
   (c) Ministry of Agriculture and Food Security
   (d) Ministry of Foreign Affairs
   (e) Ministry of Transport and Public Works
   (f) Ministry of Education, Science and Technology
   (g) Ministry of Tourism, Wildlife and Culture
   (h) Ministry of Economic Planning and Development
   (i) Ministry of Finance
   (j) Ministry of Energy Mines and Environmental Affairs
   (k) Ministry of Defence
   (l) Ministry of Local Government and Rural Development (District Assemblies)
   (m) Ministry of Lands Housing and Surveys
   (n) Ministry of Justice and Constitutional Affairs
   (o) Ministry of Information and Civic Education
   (p) Ministry of Labour and Social Development
   (q) Ministry of Youth and Sports
   (r) Ministry of Irrigation and Water Development
   (s) Ministry of Persons with Disabilities and the Elderly
   (t) Ministry of Home Affairs and Internal Security
(q) Development Partners
(r) Private sector
(s) NGOs, CBOs, faith-based orgs, civil society

4. Challenges and Implications
5. Human Rights

IV. Business Strategies
1. Outcomes, Outputs & Activities
   (a) NNP, HIV and AIDS Policies finalised
      i. outputs/activities
   (b) NNP, HIV and AIDS Policies launched, disseminated & circulated
      i. outputs/activities
   (c) formulation of National, HIV and AIDS Acts facilitated
      i. outputs/activities
   (d) nutrition, HIV and AIDS guidelines reviewed
      i. outputs/activities
   (e) standardized guidelines produced, disseminated
      i. outputs/activities
   (f) resource materials reviewed
      i. outputs/activities
   (g) revised resource materials produced, disseminated
      i. outputs/activities
   (h) nutrition, HIV and AIDS programmes strengthened, coordinated
      i. outputs/activities
   (i) Initiate Research, improve Planning, Monitoring and Evaluation of Nutrition Policies and Programmes
      i. outputs/activities
   (j) develop sufficient insitutional capacity to meet dept’s mandate
      i. outputs/activities
   (k) mobilize resources for the implementation of nutrition programmes
      i. outputs/activities

V. Critical Success Factors: Assumptions & Risks
1. Assumptions
2. Risks

VI. Implementation of Business Plan
Action Plan
**ANNEX 3: Nutrition Initiatives Recommended for Incorporation into Malawi’s 2008-2012 Agricultural Development Programme (ADP)**

*(SOURCE: THE 2008 CONSULTATIVE MEETING ON THE INCORPORATION OF FOOD AND NUTRITION SECURITY IN MALAWI'S AGRICULTURE DEVELOPMENT PROGRAMME)*

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Sub Program 1.2. Promote production of diversified high nutritive value foods at household level. (Entry points for interventions include clusters, green belts, model villages and commercial estates.)

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Outcome Indicators</th>
<th>Action</th>
</tr>
</thead>
</table>
| Increase pulses productivity (beans, soy beans, pigeon peas, cow peas) and ground nuts | Yield increased from 0.5 to 3 metric tons per hectare (MT/ha) | • Facilitate multiplication (breeders and basic seed) and distribution of improved seeds  
• Promote development of new varietals, conduct seed quality control, promote community seed banks, popularize improved seed technologies and agronomic practices |
| Increase root & tuber crop productivity (Yellow flesh potato, cassava, Irish potato) | Average yield increased for cassava from 20 to 25 MT/ha, sweet potato from 13 to 20 MT/ha  
(Yield estimates from revised ADP) | • Facilitate multiplication and distribution of disease free improved planting material of cassava, sweet potato, and Irish potato  
• Develop mother nurseries for supply of cassava cuttings and sweet potato vines  
(Action items from revised ADP) |
| Increase plantain productivity | Increase MT/h  
(No yield estimates provided.) | • Introduce improved varieties of plantains |
| Increase vegetable productivity (amaranthus, kamganje, okra, carrots, pumpkin, moringa, tomato,) | Increase productivity for horticultural crops.  
(No yield estimates provided.) | • Improve existing systems from distribution of high quality vegetable seeds  
• Promote adoption of integrated production and protection technologies for vegetables  
• Promote establishment of gardens (backyard, communal, school) |
| Increase fruit productivity (pawpaws, avocado pear, mango, citrus, banana, masawu, masuku) | Increase productivity for horticultural crops.  
(No yield estimates provided.) | Improve existing production and distribution systems of high quality fruit tree seedlings  
Promote adoption of integrated production and protection technologies for fruits  
Improve provision of vaccines/vaccination services for poultry diseases |
|---|---|---|
| Increase household poultry population | ▪ Chicken population increased from 13 to 18 million at national level  
▪ Mortality rate reduced from 60% to 20%  
▪ Chickens increased from 7 to 30 per household  
▪ Egg production increased from 2,291 to 4,685 metric tons per year Guinea fowl population increased from 900,000 to 2,000,000 at national level  
(Yield estimates from revised ADP) | Improve provision of vaccines/vaccination services for poultry diseases  
Promote increased production of high quality feed, including development of local feed formulations  
Monitor and certify quality of poultry feeds  
Increase capacity of regional hatcheries and number of mini-hatcheries for rapid multiplication of chickens and guinea fowl. |
| Increase in small stock herd | ▪ Goat herd size increased from 3 to 5.4 million  
▪ Goat milk production increased from 0.5 liters to 1.5 liters per goat  
▪ Rabbit herd size increased from 600,000 to 1.2 million per year.  
▪ Pig herd size increased from 1 to 2 million pigs per year.  
(Yield estimates from revised ADP) | Promote goat re-stocking and farmer-to-farmer transfer (pass on) systems for meat and milk production.  
Introduce improved dairy goat breeds for milk production  
Improve provision of Swine Fever vaccines and vaccination services  
Disseminate information and technologies on rabbit management and meat processing  
(Action items from revised ADP) |
| Increase household aquaculture production | Household pond fish production increased from 700kg to 2,000kg per hectare | (No actions items cited) |
### Sub programme 1.3: Promote consumption & utilization of diversified high nutritive value foods at household level

<table>
<thead>
<tr>
<th>Strategic Objective</th>
<th>Final Outcome Indicator</th>
<th>Action</th>
</tr>
</thead>
</table>
| Increase consumption of diversified high nutritive value foods | Proportion of household consuming diversified diet increased and measured by the household dietary diversity score (HDDS) | - Develop standardized messages covering production to utilization  
- Produce information, education and communication (IEC) materials  
- Train extension staff (via training of trainers) and households in processing, preservation, storage and utilization.  
- Conduct staff and farmer training in food budgeting (e.g. 300kg maize + 50kg groundnuts + 50kgs soyabean + 50kgs beans, per person per year)  
- Conduct demonstrations on processing and utilization of a diversified diet.  
- Conduct multi-media campaigns on dietary diversification  
- Develop local recipes (with emphasis on the multi-mix approach)  
- Conduct regular dietary monitoring and assessments  
- Baseline study on the promotion of the six food groups approach and post-promotion evaluation (in year 3)  
- Conduct joint staff and farmer training with the Ministry of Women and Child Development and Local Government and promote coordinated approaches |
| Increase consumption of micronutrient rich foods | Number of households consuming Vitamin A and iron rich foods increased | - Train extension workers on prevention of micronutrient deficiencies  
- Conduct multi-media campaigns on consumption of Vitamin A and Iron rich foods  
- Conduct consumer education on fortified foods |
| Improve quality of diets for the most vulnerable groups (Intensify nutrition education) | Number of vulnerable people accessing quality diets | - Promote consumption of enriched foods (soya, groundnuts, beans, pigeon peas, cow peas) in complementary feeding, maternal nutrition, and prevention for people living with HIV programmes  
- Develop IEC materials on consumption, processing, preparation and utilization of enriched foods  
- Conduct demonstrations on preparation of enriched phala in communities and at nutrition rehabilitation units and community therapeutic care sites |
Sub programme 1.4: Capacity Building and Institutional Strengthening in the Food and Nutrition Security Programme

<table>
<thead>
<tr>
<th>Strategic Objective</th>
<th>Final Outcome Indicator</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improve the knowledge and skills of existing nutrition staff</td>
<td>Number of staff trained increased</td>
<td>• Conduct short courses on Nutrition</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Train nutrition officers to a higher academic level (Diploma, BSc, Masters and PhD level)</td>
</tr>
<tr>
<td>Increase staffing at all levels</td>
<td>Number of vacancies filled</td>
<td>• Fill vacant positions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Conduct orientation of newly recruited staff in nutrition policies and programmes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Coordinate recruitment with the Dept of Nutrition and HIV and AIDS</td>
</tr>
<tr>
<td>Improve resource allocation for nutrition programmes</td>
<td>Adequate resources provided, e.g. motorbikes, vehicles, bicycles, computers, lab equipment</td>
<td>• Procure equipment, facilities and vehicles for frontline staff</td>
</tr>
<tr>
<td>Strengthen institutional capacity</td>
<td>Number of institutions and systems developed and strengthened for nutrition</td>
<td>• Establish and strengthen Public/Private Partnerships</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Develop effective lobbying and advocacy strategies in nutrition at all levels</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Strengthen nutrition surveillance</td>
</tr>
</tbody>
</table>
ANNEX 4: Nutrition Post Vacancies as of July 2008

HEADQUARTERS

Deputy Director Food and Nutrition Officer

Assistant Chief Food and Nutrition Officer-Nutrition Education (vacant)

Assistant Chief Food and Nutrition Officer-Nutrition Surveillance (vacant)

ADD Level

4 Positions vacant

4 Position filled

1 Position filled

7 positions vacant

1 Position filled

7 positions vacant

DISTRICT

Food and Nutrition Officer

28 positions

9 Dist. Nutr. Off. employed

17 positions vacant

EPA

Section

Farmers
6. REFERENCES


17 Malawi 2004 Demographic and Health Survey. Ministry of Health, Lilongwe.


Interview with Margaret Lwanda, Deputy Director of Nutrition Services, Agricultural Extension Service/GoM, July 25, 2008.

Interview with Mark McGuire, Food Security Officer, FAO/ESAF, June 20, 2008.
