

Nutrition Coordination in Mozambique: lessons learned from REACH

CAADP Nutrition Capacity Development Workshop, Gaborone, September 2013

Country overview - Mozambique

Country situation (DHS 2011)

Stunting: 43%

Wasting: 6%

Underweight: 15%

Iron Deficiency Anemia in children 6-

59 mos: 69%

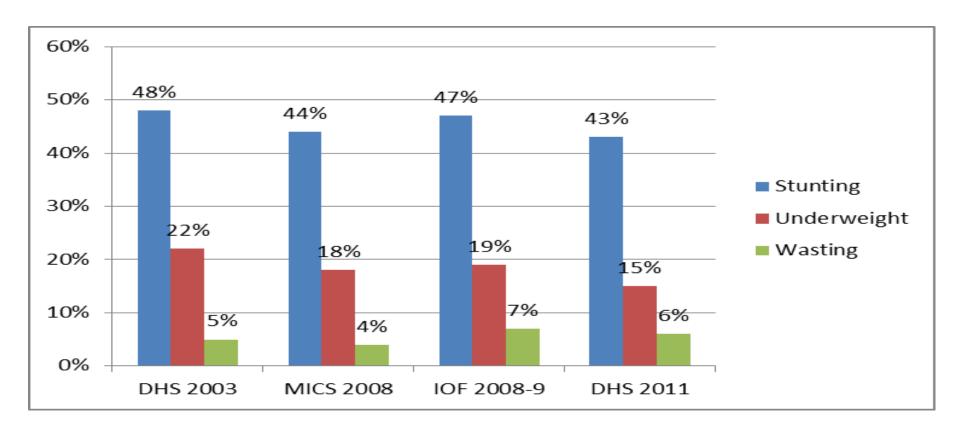
Iron Deficiency Anemia in women of

reproductive age: 54%

Exclusive breastfeeding: 43%

- inadequate micronutrient intake
- limited access/use of nutritious foods
- high rates of infectious diseases
- early pregnancy
- poverty and inadequate practices (care)
- insufficient access to health services, water, sanitation
- low use of agricultural inputs, irrigation systems
- Insufficient land size for cultivation
- low literacy
- gender inequality

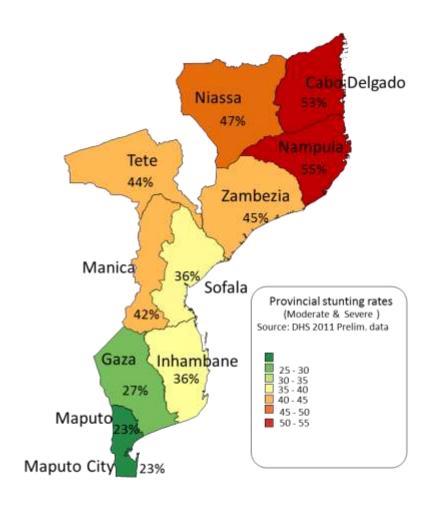
Undernutrition in Mozambique 2003-2011



- ≥35% chronic food insecurity
- ➤43% chronic undernutrition in children under 5 years
- ➤ Overweight/obesity: 7.4% of children under 5 with weight for age +2DP and 16.4% of women 15-49 years with BMI ≥25kg/m³ (DHS 2011)

The largest agricultural production zones have the highest rates of Chronic undernutrition

Chronic Undernutrition



Agricultural Production



The response to Chronic Undernutrition

Multi-sectoral Action Plan to reduce Chronic Undernutrition (PAMRDC) 2011-2015/20

Target to reduce stunting to 30% by 2015 and 20% by 2020

7 strategic objectives focusing on adolescents, WRA, children under 2

Interventions in health, education, social protection, **agriculture**, sanitation, human resources and M&E

Coordinated by **SETSAN** (Technical Secretariat for Food and Nutrition Security) in Ministry of Agriculture

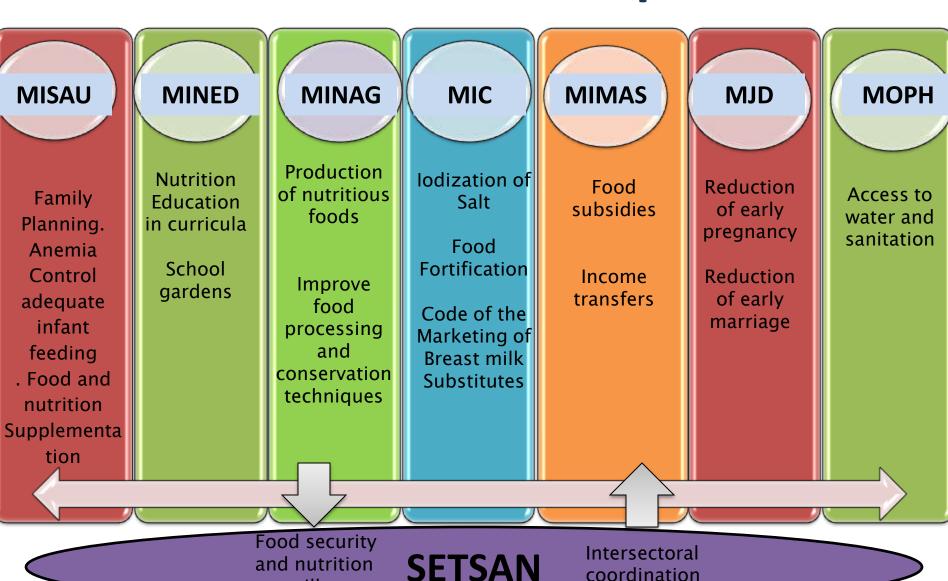


PLANO DE ACÇÃO MULTISSECTORIAL PARA A REDUÇÃO DA DESNUTRIÇÃO CRÓNICA EM MOÇAMBIQUE 2011 - 2015 (2020)



MAPUTO, SETEMBRO DE 2010

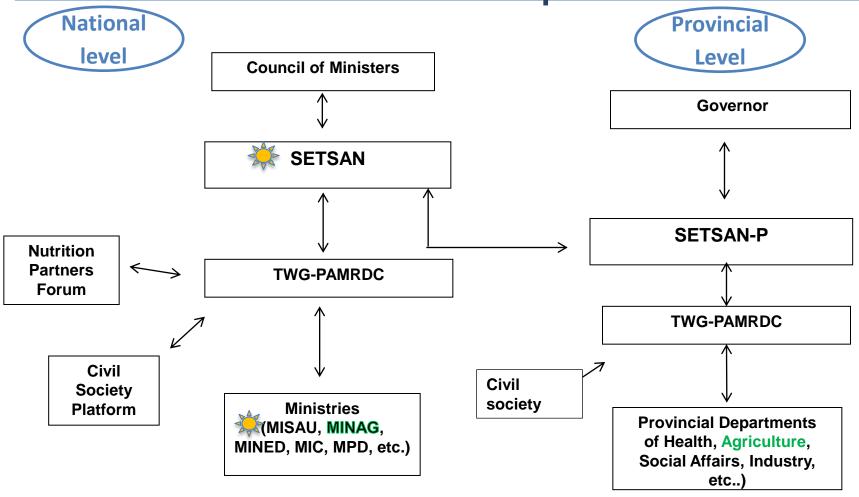
A Multisectoral Response



surveillance

coordination

Nutrition Coordination in Mozambique



Key stakeholders

SETSAN: coordination body for food and nutrition security: ESAN II (national food and nutrition strategy) and PAMRDC (national plan to reduce chronic undernutrition)

TWG - PAMRDC: coordination of nutrition interventions across sectors in line with PAMRDC (technical level)

Nutrition Partners Forum: harmonization of development partners support to nutrition (donors and UN)

AgRED: coordination of development partners in agriculture and rural development (donors and UN)

Civil Society Platform: nutrition specific and nutrition-sensitive interventions; ensuring voice of the communities

The Business Network is currently being established

All play a role in advocacy, ensuring alignment of interventions with PAMRDC, resource mobilization, accountability

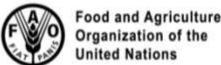
Challenges in Nutrition Coordination (general)

- Limited awareness of nutrition
- Low consensus on problems and what to do
- Lack of clarity on roles, responsibilities, expectations
- Disjointed sectoral policies and programmes/ no joint planning & monitoring
- No sector wants to be coordinated by the others
- Limited resources for coordination per se
- Limited resources for nutrition

What is REACH?

A PARTNERSHIP









REACH encourages UN Agencies to think beyond their mandates and to work together towards common objectives, around a shared vision.

It facilitates a process to help UN Agencies and other partners agree on country priority actions, align targeting strategies and implement actions that complement each other.

REACH is focusing on strengthening government capacity to scale-up nutrition actions and improve nutrition management and governance, and on supporting nutrition sensitive, multi-sectoral approaches.

What is REACH?



19 facilitators in 14 countries

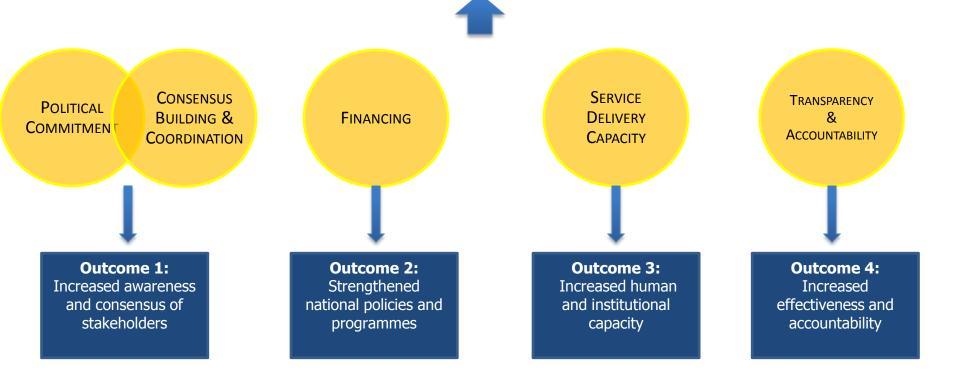
Building blocks of nutrition governance

- Currently there is no generally accepted framework or set of terminology for conceptualizing nutrition governance.
- The existing literature contains references to nebulous terms such as 'meaningful participation' and 'voice' in addition to more concrete notions like 'systematic planning' and financing for nutrition
- Five key building blocks of effective nutrition governance and management are described in the literature. These are: political commitment; consensus building and coordination; financing; service delivery capacity; and transparency and accountability.



REACH Outcomes reflect the building blocks and are all <u>necessary conditions</u> for effective nutrition governance

Strengthen
Governance and
Management



REACH in Mozambique: 2012-2014

Housed in **SETSAN** with the aim to:

- 1. Support SETSAN to effectively assume its role in multi-sector and multi-stakeholder coordination
- 2. Support agriculture, education, social action to develop and operationalize coherent nutrition-sensitive programmatic approaches
- 3. Provide continued support to costing and budgeting and workplanning of identified priority actions and programs, linked to advocacy and communication
- 4. Support to strengthening integrated FSN M&E systems

Successes in Coordination

- TWG-PAMRDC support to development of provincial multisectoral plans on nutrition
- Twice yearly reporting to Council of Ministers
- National Advocacy Strategy on Chronic Undernutrition
- Joint nutrition planning retreat
- Increased and harmonized donor support for institutional and human capacity development and implementation of PAMRDC
- Strengthened coordination between working groups
- Inclusive facilitation of CAADP process
- Efforts to align multisectoral strategies to sectoral strategies
- Increase in joint programming (e.g. agriculture + education in school feeding and school gardens; delivery of extension services; biotechnology etc..).

Key challenges and constraints

Challenge/Constraint	Impact	Mitigation/Opportunities
1. Understanding of nutrition – including at decision-maker level	Non-ownership of nutrition agenda. Non-prioritization of nutrition in work plans and budgets.	Advocacy and communication to increase awareness. Capacity development.
2. Commitment to sustain multisectoral coordination	Non-engagement of sectors in coordination and understanding of their role. Nutrition not reflected in sectoral work plans and budgets.	Advocacy and continued dialogue. Clarification on roles. Strengthening linkages between nutrition and agricultural donor WGs.
3. Balance between sectoral and multisectoral strategies.	Nutrition not mainstreamed in sectoral strategies; challenges in coming together in integrated manner at local level.	Targeted initiatives such as joint planning and monitoring; sharing of best practices. Local development plans.
4. Insufficient understanding on nutritional impact of programs (e.g. agriculture)	Programs not contributing to reducing undernutrition. Insufficient investments.	Development of indicators. Strengthening of FSN info systems and reporting.

Opportunities

- Multisectoral multistakeholder team participating in CAADP Nutrition Capacity Development workshop
- Elaboration of provincial nutrition development plans: opportunity to strengthen agriculture and nutrition linkages
- Implementation of National Advocacy Strategy on Chronic Undernutrition
- Opportunities to further align food and nutrition security:
 - 1. Mid-term review of ESAN II
 - 2. Mid-term review of PAMRDC
 - 3. Drafting of follow-up strategy to ESAN II (2015)
 - 4. Post-2015 agenda

Thank you! Obrigada!