



The Republic of Malawi

**OFFICE OF THE PRESIDENT AND CABINET
(OPC)**

NATIONAL NUTRITION POLICY

**DEPARTMENT OF NUTRITION, HIV AND AIDS
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FOREWORD

Adequate nutrition is a pre-requisite for human capital development. Improving the nutritional status of the people of Malawi is therefore, one of my Government's top priorities. In order to ensure adequate nutrition in Malawi, my Government has developed the National Nutrition Policy (NNP).

The goal of the policy is to facilitate improvement of the nutritional status of all Malawians, with special emphasis on vulnerable groups such as pregnant and lactating mothers, children below the age of 15 years, orphans, the elderly and people living with HIV and AIDS". The purpose of the Policy is to raise national awareness on the magnitude of the nutrition problems in Malawi their impact in the economy with a view to provide guidance and galvanise the nation towards the achievement of acceptable levels of nutrition for purposes of effective contribution to economic growth and development of the country.

My government has developed the National Nutrition Policy having noted that the Food Security and Nutrition Policy of 1990 and other development policies that contain elements of nutrition did not give adequate attention to nutrition. Additionally, there was vertical implementation of nutrition programmes within different sectors and limited resource allocation. This policy will facilitate standardisation, coordination and improvement of the quality of nutrition services delivery within all sectors of the economy.

In 2005, I directed that the Food and Nutrition Security Policy be split into two namely; Food Security Policy and National Nutrition Policy to be championed by Ministry of Agriculture and Food Security; and the Department of Nutrition, HIV and AIDS in my office respectively.

The Department of Nutrition, HIV and AIDS is therefore, mandated to spearhead the implementation of the Nutrition Policy through provision of policy direction and guidance; coordination, capacity building, resources mobilisation and monitoring and evaluation. To realize the policy's goal, there is need for active participation of all stakeholders in the implementation process. I am therefore calling upon all Malawians and partners to support the implementation of this policy.

May God bless Mother Malawi!

Dr. Bingu wa Mutharika
PRESIDENT OF THE REPUBLIC OF MALAWI

PREFACE

Nutrition disorders continue to be a silent crisis in Malawi despite efforts by government and partners to improve the nutritional status of all Malawians. This poses a serious challenge to the attainment of the national growth and development goals as set in the MGDS.

Nutrition studies conducted in the 1980s revealed that stunting among under-five children was at 56% and malnutrition levels are still high. Currently, 48% of under-five children are chronically malnourished (stunted), 5% have acute malnutrition (wasting) and 22% are underweight. Non-communicable nutrition related disorders such as overweight, obesity, hypertension and diabetes are becoming common and silently contributing to the mortality rate in the country. Micronutrient deficiencies of vitamin A, iron and iodine are also high. Such high malnutrition levels have long term adverse effect on the intellectual and physical ability of an individual and undermine the academic and professional achievement. Malnutrition, therefore, contributes significantly to low human capacity development as a result of poor physical and intellectual development.

Malnutrition is a major contributing factor to the high morbidity rates among various population groups in the country. It is a single major cause of high morbidity and mortality among under-five children, pregnant and lactating women and other vulnerable groups. The current nutrition disorders situation means that in every 4 seconds, a Malawian dies of a nutrition related problem (quote source).

The National Nutrition Policy therefore, seeks to enhance Government's response towards the malnutrition crisis. It is intended to facilitate standardisation; coordination and improvement of the quality of nutrition services thereby facilitate reduction in the prevailing nutrition disorders. The policy is expected to lead to attainment of improved nutritional status among various population groups for effective contribution to economic growth and development.

The National Nutrition Policy has been divided into four main chapters to facilitate effective guidance to the stakeholders. The first chapter provides the policy directions and thematic areas with emphasis on defining the vision, mission and goals of the policy, key focus areas and an outline of strategies to facilitate attainment of the policy goals and objectives.

The second chapter describes the national framework within which the policy will be operationalised through a National Nutrition Programme. The National Nutrition Programme outlines the main priority areas and activities that will be undertaken in order to achieve the policy targets. Recognising that nutrition is cross cutting

and diverse, the policy document further, defines the stakeholders that are key to the successful implementation of the policy. The third chapter, therefore is a Nutrition Business Plan that describes the key stakeholders, their role and responsibilities based on their mandates, priority areas and comparative advantage.

The last chapter describes in detail, the strategies that will be used by the various sectors in order to contribute to the attainment of the policy goals and objectives. It is therefore expected that all nutrition stakeholders in the country will use this document for guidance and design and implement services, programmes and projects based on the national policy requirements as stated in this policy document and in close collaboration with the Department of Nutrition, HIV and AIDS.

Dr. Mary Shawa

PRINCIPAL SECRETARY, DEPARTMENT OF NUTRITION, HIV AND AIDS

ABBREVIATIONS

AIDS	Acquired Immune Deficiency Syndrome
ART	Anti-Retroviral Treatment
CAMA	Consumers Association of Malawi
CNHAO	Chief Nutrition, HIV and AIDS Officer
GESS	Genetically Engineered Seeds and Substances
GMO	Genetically Modified Organisms
HIV	Human Immunodeficiency Virus
IEC	Information, Education, Communication
KCN	Kamuzu College of Nursing
MBS	Malawi Bureau of Standards
MDGs	Millennium Development Goals
MDHS	Malawi Demographic and Health Survey
NNP	National Nutrition Policy
NRC	Natural Resources College
PEM	Protein-Energy Malnutrition
PS	Principal Secretary
SPS	Sanitary and Phyto-Sanitary

1.0 INTRODUCTION

Improving the nutritional status of the people of Malawi is one of the government's highest priorities, and a prerequisite for human capital development. A report issued by the World Bank on 2 March, 2006, states: "The unequivocal choice now is between continuing to fail, as the global community did with HIV and AIDS for more than a decade, or to finally put nutrition at the center of development so that a wide range of economic and social improvements that depend on nutrition can be realized." Malawi has failed to achieve any significant improvement in the nutrition status of the various population groups over the years. This policy is intended to guide implementation of nutrition services in the country in order to improve the nutrition status of all Malawians and to contribute to human capital development.

The goal of this policy, therefore, is to significantly improve the nutritional status of all Malawians, with special emphasis on vulnerable groups including, but not limited to, expectant and lactating mothers, children below the age of 15 years, orphans, people with disabilities, the aged and people living with HIV and AIDS (PLWHAs).

1.1 BACKGROUND

The development of the National Nutrition Policy was building on the existing national and international legal frameworks to which Malawi is party, among them are:

1.1.1 Legal Basis:

- Articles 13 and 14 in the Universal Declaration of Human Rights, 1948, state that: *'The freedom of want for food and the right to nutrition is the basic human right.'* Additionally, Article 25 states that: *'All humans have the right to a standard of living adequate for the health and well-being of themselves and their families, including food, clothing, housing and medical care and necessary social services.'*

- The number one Millenium Development Goal (MDG's) deals with the *“eradication of extreme poverty and hunger that manifests itself into malnutrition.”* In addition, because nutrition is intricately related to economic growth, societal health and overall development, improved nutrition will contribute to all of the MDG's.
- The Constitution of Malawi states: *“The state shall adopt and implement policies and legislation aimed at achieving adequate nutrition for all in order to promote good health and self-sufficiency.”* This provision recognizes that access to and utilization of nutritionally adequate and safe food in the right quantities is the fundamental right of each individual.
- Cabinet directed that a comprehensive national nutrition policy be developed to address all nutrition-related problems in Malawi in its paper C/B/34/2005, issued on July 5, 2005.

1.1.2. Economic Basis:

- A recent World Bank study on the economic impacts of malnutrition determined: *“Malnourished children are more likely to drop out of school, are less likely to benefit from schooling and have lower incomes as adults, while improving nutrition can add 2-3% to the GDP in poor countries and drive their economic growth. Put this in the context that the economies of many developing countries are growing at the rate of 2-3% annually, improving nutrition could potentially double these rates.”*
- According to the Malawi Nutrition Profiles (2006), neglecting the nutrition problem between 2006-15, Malawi is likely to loose K65 billion (US\$446 million) in economic contribution¹.

1.1.3. Nutritional and Research Basis:

- In Malawi, 48% of children under the age of five years suffer from chronic malnutrition, according to the Micronutrient Survey of

¹ It should however, be noted that the costs of adult malnutrition currently at 25%, obesity at 25% in urban, 12% in rural and 7% in children nationally and dietary related non-communicable diseases such as hypertension, diabetes, gout and arthritis among others have not been included.

2001. 64% of Malawian households lack the resources to ensure adequate calorie and nutrient intake. These figures represent the current effects of a downward trend in overall nutrition that has spanned the past two decades.

- The Micronutrient Survey 2001 further estimated that 10% of Malawian women were underweight (Body Mass Index less than 18.5) and 25% of adults in Malawi were malnourished.
- Diseases inhibit the utilization of consumed nutritious diets in Malawi, resulting in nutrient mal-absorption, loss of appetite, nausea, and direct loss of nutrients.
- The HIV and AIDS pandemic has compounded the dual burdens of malnutrition and disease. This manifests in a vicious cycle. Malnutrition reduces overall immunity and increases the risk of diseases and related conditions, which expedites the progression of HIV into AIDS. HIV, in turn, destroys the natural immune system and increases the risk of infections and diseases. These diseases prevent adequate intake and uptake of vital nutrients. Additionally, both the disease itself and antiretroviral therapy increase the body's overall nutrient demand. According to the World Health Organisation, as the virus progresses from the asymptomatic to the symptomatic stage, a child's energy and protein needs can increase from 50% to 100%. In adults, caloric need can increase up to 30%-50% above the recommended daily energy requirement depending on the condition.
- Overnutrition is an emerging problem. For instance, MDHS 2000 estimated overweight and obesity in adults at 23.4% in urban areas, 9.5% in rural areas and 7% in children nationally while the MDHS 2004 estimated overweight and obese at 22.8% in urban areas and 12% in rural areas. Average adult overweight and obesity is estimated at 14%. Coupled with this has been the emergence of dietary related non-communicable diseases such as hypertension, diabetes, gout and arthritis among others.

- Micronutrient deficiencies of public health concern in Malawi include lack of vitamin A, Iron and Iodine. The National Micronutrient Survey of 2001 indicated that 60% of preschool children, 38% of school-age children, 57% of women of child-bearing age and 38% of men suffer from vitamin A deficiencies. Further, 80% of pre-school children, 22% school age children, 27% women of child bearing age and 17% men were anaemic while the School Health and Nutrition Survey 2006 estimated anaemia among school age children at 54%. Forty-four percent of women of child-bearing age and 47% of pregnant women also suffer from anaemia.
- Iodine deficiency disorders are also common despite Malawi's adoption of Salt Iodization Act. Based on studies from elsewhere, it is estimated that cretinism is at 3% in endemic iodine deficient areas while nationally it is estimated at 1%, urinary iodine deficiency at 100 microgrammes per litre is 50% in school children and 87% of children have low Intelligence Quotient (IQ) in areas with high iodine disorders and 13.5% nationally (Quote the studies).

1.1.4. Social and Research Basis:

- The Malawi Demographic Health Survey of 2004 also indicates an infant (0-11.9 months) mortality rate of 76 per 1000 live births. The under-five mortality (0-59 months) rate was estimated at 133 per 1000 live births. This means that one in every 10 children born in Malawi dies before reaching their fifth birthday. Malnutrition is one of the major causes of infant and child morbidity and mortality in the country.
- According to MDHS 2004, the maternal mortality rate has increased by a third in the past 13 years, from 620 deaths per 100,000 live births in 1992 to 980 deaths per 100,000 live births in 2004. The Micronutrient Survey Report of 2001 indicated that anaemia is common among pregnant women and is one of the primary causes of maternal mortality. The Malawi profiles, 2005 estimated that 57% of the 980 maternal deaths per 100,000 live

births is associated with anaemia which affects 48% of pregnant women in the country.

- Food utilisation and dietary diversification in Malawi are generally poor. Inadequate knowledge of food choices and combinations from the Malawi Six Food Groups, childcare and optimal feeding practices, prevents households from maximizing the nutritional benefits of available foods. The population also lacks appropriate skills and access to technologies for food preparation, preservation and storage, resulting in decreased quantity and quality of available food. Food taboos emanating from cultural and religious beliefs also limit consumption and use of certain foods, thus reducing nutrient intake at the household level.
- Gender issues exacerbate the malnutrition crisis. Current nutrition education programmes are mostly attended by women and yet household-level decisions are mostly made by men. Gender roles also skew the distribution of nutritious diets within a household. Men are favoured in both food and resource distribution, typically at the expense of women.

1.1.5. Political Basis:

- According to the Malawi Demographic and Health Survey of 2004, current stunting levels are around 48%. The World Health Organisation and the Center for Disease Control state that stunting levels above 40% are “very high.” Stunting in Malawi persists despite the fact that the country has been in a stable political environment and has experienced neither major famine nor war.

1.1.6. Institutional Basis:

- There was inadequate coordination in the collection, analysis and dissemination of nutrition information. This resulted in inappropriate and redundant interventions that were not evidence based in both the public and private sectors. The nutrition interventions have been implemented as vertical programmes with little human capacity in terms of technical competency and numbers in the public sector.

1.2 RATIONALE

Statement of Problem: Malawi's nutrition indicators have not improved over the years. Nutrition-related disorders continue to pose a serious threat to all Malawians. Women, children and people with HIV and AIDS and chronic diseases are particularly vulnerable. Malnutrition and micronutrient deficiencies are a massive impediment to both economic and social development.

Nutrition activities have been undertaken in an uncoordinated manner, without policy guidance and direction; and with a severe resource constraint. Consequently, the nutritional status of many Malawians has been worsening. The situation is exacerbated by widespread and rampant poverty, chronic food insecurity, inadequate and inappropriate nutrition information, HIV and AIDS pandemic, gender disparities, environmental degradation, inadequate implementation structures and a shortage of nutrition specialists, dieticians and community workers to promote adoption of optimal nutrition practices at individual, household and community level.

Malawi adopted the first Food and Nutrition Policy in 1990, but the nutrition component was not given adequate attention, did not have well defined implementation structures in place, budgetary allocation and did not provide any capacity for community implementation. It is against this background that this policy has been developed and His Excellency, the President has established the Department of Nutrition, HIV and AIDS in the Office of the President and Cabinet to provide policy direction, guidance and coordination of implementation of a comprehensive this National Nutrition Policy.

Purpose of the Policy:

The National Nutrition Policy is intended to;

- Standardise, coordinate and improve the quality of nutrition service delivery within all sectors through the development

and dissemination of national guidelines and communication strategies for nutrition service delivery.

- Advocate for and facilitate the provision of adequate and comprehensive nutrition care and support for men, women, boys and girls especially those vulnerable to nutrition disorders.
- Promote the adoption of optimal nutrition practices, healthy lifestyles and appropriate dietary habits among men, women, boys and girls.
- Guide and facilitate resource mobilization, project implementation, structural development and capacity building in relevant areas.
- Advocate and lobby for the mainstreaming of nutrition services into development policies, plans and programmes.
- Facilitate documentation, dissemination and sharing of current research findings, lessons learnt and best practices.
- Facilitate research and development in the area of nutrition for evidence based programming.
- Facilitate the development of partnerships with relevant stakeholders.
- Facilitate the development and implementation of nutrition legislation.

1.3 LINKAGES WITH OTHER RELEVANT POLICIES

Nutrition cuts across all boundaries and affects all areas of governance, growth and development. As such, nutrition strategies must be incorporated into policies, plans and programmes aimed at achieving general human well-being, improving child health and survival rates, promoting public health and including any kind of humanitarian assistance. The following policies contain elements of nutrition issues that must be scaled up and integrated into the national nutrition strategy:

- Vision 2020 (1995)

- Malawi Economic Growth and Development Strategy (MGDS), 2006
- Food Security Policy (2006)
- Poverty Alleviation Policy Framework (1994)
- Gender Policy (2000) and Implementation Plan (2004)
- Integrated Early Childhood Development Policy (2004)
- National Plan of Action for Nutrition (2000)
- Ministry of Health Plan (1999 to 2004) and Programme of Work (2004)
- National HIV and AIDS Framework (2005 to 2009)
- Infant and Young Child Nutrition Policy (2005)
- National Water Policy (2005)
- Essential Health Care Package (2002)
- Reproductive Health Policy (2002)
- Orphans and Other Vulnerable Children Care Plan of Action (2005)
- Strategic Plan to Improve Livestock Production (2003-2008)
- Fisheries and Aquaculture Policy (2001)
- Integrated Management of Childhood Illnesses (Draft, 2005-6)

1.4 KEY CHALLENGES AND BARRIERS

1.4.1. Institutional challenges

- Inadequate structural capacity at all levels to implement effective nutrition interventions
- Inadequate capacity to effectively coordinate and deliver nutrition services
- Diversity of implementers with different mandates and targets
- Lack of government ownership of nutrition services
- Wavering commitment to nutrition services
- Inadequate resources for training in the areas of nutrition and dietetics

- Gender, age and other disparities resulting from discrimination and inequality
- Cultural beliefs and practices which prevent adoption of nutrition strategies

1.4.2. Financing challenges

- Inadequate allocation of financial resources to nutrition services by Government
- High dependency on donor funding
- Lack of coordination of resource utilisation
- Non-prioritisation of nutrition in resource allocation at all levels

1.4.3. Human resource and management challenges

- Poor career structure for nutrition officers
- Inadequate skills and knowledge in nutrition, and interaction of nutrition with diseases
- Inadequate capacity to effectively deliver nutrition services
- Influx of unauthenticated manufactured food supplements and therapies

1.4.4. Community-level challenges

- High level of poverty that present barriers to the adoption of recommended behaviours
- Household food insecurity
- Lack of access to nutritious and entitled diets
- Increased nutritional needs arising from high disease burden
- Inadequate capacity to meet basic dietary needs
- Lack of community nutrition workers
- Inadequate knowledge of optimal nutrient intake and utilisation; and dietary diversification

CHAPTER ONE

2.0 BROAD POLICY DIRECTION

2.1 VISION

Adequate nutrition for all Malawians by 2015².

2.2 MISSION

To contribute to effective human capital development for economic growth and prosperity through improved nutrition status of all Malawians.

2.3 OVERAL POLICY GOAL

To provide policy and technical guidance to policy makers and nutrition stakeholders in designing, development and implementation of nutrition programmes, projects and interventions that will effectively contribute to improved nutrition status of all Malawians and the country's economic prosperity.

2.4 POLICY STATEMENTS, OBJECTIVES AND STRATEGIES

The following policy statements shall guide the implementation and delivery of nutrition services, programmes and projects in the country.

² Ideally, adequate nutrition for all Malawians is required within the next 2-5 year period. In line with the MDGs and Vision 2020, however, the policy's vision has extended the period to 2015.

2.4.1 Policy statement One

Malawi shall firmly position nutrition on her development agenda through inclusion of Nutrition in key development programmes, allocation of adequate resources, strengthening institutional and human capacity and putting in place necessary coordination mechanisms in all sectors for the implementation of the National Nutrition Policy at all levels.

2.4.1.1 Objective

To incorporate nutrition in all sectoral policies and programmes for a multi-sectoral approach

2.4.1.1.1 Key Strategies

Nutrition is crosscutting, as such it requires a multi-sectoral approach in order to comprehensively deal with the multi-factorial causes of nutrition disorders. The following strategies shall therefore be implemented to ensure that nutrition is given a high priority in Government development programmes:

- Government shall ensure that all government development policies adequately take nutrition on board as a priority area for achieving economic growth, stability and prosperity.
- All government sectors and departments shall have a defined role and responsibility in nutrition and will include nutrition in their sectoral development policies and plans.
- Establishment and strengthening of sectoral nutrition programmes, implementation units with well defined terms of reference and means of giving feed back to nutrition stakeholders.
- Nutrition stakeholders in the private sector shall include services, programmes and projects aimed at promoting adequate nutrition for all Malawians in their policies and plans in line with the MGDS.

- The bilateral and multilateral partners will accord nutrition high priority on their support to government and in line with the MGDS in order to contribute to the operationalisation of the government plans in national nutrition plans.
- The Non-government organizations working in nutrition shall be required to initiate nutrition programmes and projects that are in line with the National Nutrition Policy and the MGDS and that bring maximum benefits to Malawians.

This should begin with taking stock of programmes and projects that are already underway by assessing on-going nutrition activities and existing coordination structures at all levels in order to build on them.

2.4.1.2 Objective

To have increased budgetary allocation of resources by government and her bilateral, multilateral and NGO partners as well as the private sector for implementation of the Nutrition services, programmes, projects and interventions at different levels

2.4.1.2.1 Key strategies

The following strategies will facilitate mobilization of financial resources for nutrition services, programmes, projects and interventions at different levels:

- Government sectors and departments shall allocate and mobilise external financial resources to support nutrition services, programmes, projects and interventions in their sectors. Government will put in place resource mobilization mechanisms for nutrition through establishment of a Government-partners committee on nutrition and nutrition SWAps. Government shall further advocate for and solicit financial resources through strengthening partnerships for nutrition and documentation and wide dissemination of nutrition interventions that have shown impact.
- Collaborate continuously with partners through information sharing, networking and feedback.

2.4.1.3 Objective

To build and improve institutional capacity at all levels of society for effective delivery of appropriate nutrition services, programmes and interventions with focus on facility, community level and outreach services and programmes.

2.4.1.3.1. Key strategies

For nutrition services, programmes, projects and interventions to be successful, various institutions must have the capacity to implement based on their roles and responsibilities. This will require the creation or strengthening of appropriate implementation structures, training of personnel for them to acquire the necessary competencies, and provision of adequate resources. Existing resources will be used as a starting point and foundation for interventions. The following strategies will therefore be implemented to facilitate creation or strengthening the capacity of key nutrition implementing institutions and stakeholders in the public sector:

- Facilitate creation and filling of new and existing nutrition posts in all government Ministries and departments
- Increase number of nutrition implementers that have the necessary competencies through in-service training and regular up dates.
- Increase the number of trained extension workers to implement nutrition services, programmes and projects in Malawi, with special focus on Community Nutrition Workers
- Create a pool of technical experts through training of 100 BSc nutritionists, 100 MSc nutritionists, 100 Dieticians, 60 PhDs and 8000 community nutrition, HIV and AIDS workers.
- Orient nutrition implementers to relevant policies and guidelines for prevention, control and treatment of various forms of nutrition disorders through facility and community-based systems.

- Build the capacity of nutrition implementing institutions in monitoring and evaluation of nutrition interventions, services, programmes and projects.
- Increase the institutional capacity to acquire or procure adequate supplies, materials and equipment for implementing nutrition services, programmes, and projects.
- Strengthen the Institutional capacity to collect and manage nutrition information through periodic surveys, nutrition assessment, nutrition surveillance, Nutrition Information and Management Systems and sectoral Information and Management Systems, interpret the nutrition information and respond to identified nutrition problems.
- Strengthen capacity of academic and research institutions in nutrition research and development.

2.4.1.4 Objective

To coordinate nutrition programmes at all levels based on National and sectoral policies and guidelines.

All nutrition services in the country shall be coordinated by the Department of Nutrition, HIV and AIDS. The Department will oversee the implementation of various nutrition services and interventions to ensure that they are guided by the MGDS, the National Nutrition Policy; and other relevant sectoral policies and guidelines. The services, programmes and projects should be evidence based, approved by the Department of Nutrition, HIV and AIDS to ensure that all efforts bring about maximum benefits to all Malawians. This will also facilitate rational use of the scarce resources while maximizing the returns. The following strategies shall, therefore be implemented:

2.4.1.4.1 Key Strategies

The Department of Nutrition, HIV and AIDS will coordinate the Nutrition services, programmes and projects through the existing structures using the following strategies:

- Development and wide dissemination of a well defined National Nutrition Programme with focus on prevention, control and treatment of various forms of nutrition disorders.
- Establishment and strengthening of Nutrition committee and its sub-committees that shall have well defined terms of reference, work plans and means of giving feed back to nutrition stakeholders.
- **Development of a comprehensive Nutrition Business plan that clearly defines the key stakeholders, their key roles and responsibilities based on their mandate, area of focus and comparative advantage both in the public and private sectors.**
- Facilitate institutionalisation of Nutrition in all government Ministries and departments.
- Facilitate rational response to nutrition problems and integration of nutrition and related services by stakeholders through joint review and planning meetings
- Standardise and guide implementation of Nutrition services, programmes and projects through formulation, periodic review and dissemination of Policies, Guidelines and resource materials for the implementation of Nutrition programmes and services.
- Facilitate quality delivery of services through regular joint monitoring and supervisory visits, feedback meetings from monitoring and supervisory visits and updating of stakeholders on emerging issues through various channels

2.4.2. Policy statement Two

Malawi shall strive to create and sustain strong partnerships with public and private sector, civil society and development partners for implementation of nutrition programmes through a number of strategies.

2.4.2.1 Objectives

To create sustainable partnerships with the private sector, development partners and civil societies for nutrition.

2.4.2.2 Key Strategies

Government requires strong and sustainable partnerships with the private sector, multilateral, bilateral and civil society partners in order to make meaningful investment in nutrition. This will be achieved through the following strategies:

- Establishment and strengthening of Government - partner Nutrition main and sub-committees
- Establishment of a business coalition for nutrition that will strengthen collaboration and networking with government, the private sector and civil society.
- Facilitate joint review, planning and monitoring and evaluation of nutrition services, programmes, projects and interventions with partners, the private sector and civil societies.
- Facilitate continuous engagement with multilateral and bilateral partners, the private sector and civil society, sharing of information, networking and feedback through stakeholders coordination meetings

2.4.3 Policy Statement three

Government shall standardise and improve quality of nutrition services through development, periodic review and dissemination of nutrition guidelines

2.4.3.1 Objective

To standardise and improve the quality of nutrition services through development, consolidation and dissemination of a set of national nutrition guidelines for Malawi.

2.4.3.1.1 Key strategies

In order to streamline efforts to combat nutrition disorders, a set of national guidelines and best practices focusing on various areas of nutrition shall be developed or reviewed and disseminated. The

guidelines will focus on prevention, control and treatment of various forms nutrition disorders. The guidelines will therefore focus on promotion of optimal nutrition practices throughout the life cycle with focus on feeding infants and young children 0-2 years (critical period for malnutrition) up to 5 years, school age children, pregnant and lactating women, people living with HIV and AIDS (PLWHA), the elderly, people in emergency and other vulnerable groups as defined from time to time. Dietary diversification with emphasis on use of indigenous and a variety of foods from the six food groups shall be promoted among Malawians. In addition, the guidelines will focus on promotion of nutrition actions that have shown evidence to contribute to reduction in infant and young child mortality. The interventions shall focus on caregivers, households, communities and institutional level. Guidelines shall also be provided to guide treatment of various forms of nutrition disorders in infants, under-five children, adolescents, adults and people living with HIV and AIDS. The following strategies will be implemented to achieve this:

- Development of consolidated National Nutritional Guidelines for prevention, control and treatment of various nutrition disorders among Malawians.
- Wide dissemination of the guidelines through nutrition advocacy, coordination, planning and committee meetings, Nutrition education and counselling through various contact points, in-service training of service providers, community structures and mass media.
- Strengthen the capacity at district and community levels for further dissemination as well as interpretation, implementation and monitoring and evaluation of the use and effectiveness of the guidelines.
- Develop and incorporate general dietary guidelines for Malawi, with a focus on promoting consumption of indigenous foods in the National Nutrition Guidelines.
- Develop dietary recommendations and daily requirements for vulnerable groups.

2.4.4 Policy Statement four

Government shall promote sustained adoption of key optimal nutrition practices through nutrition education, counselling and negotiation based on the principles of behaviour change communication

2.4.4.1 Objective

To provide nutrition education, counselling and support to Malawians across demographics to adopt optimal nutrition practices and healthy life styles through a variety of outreach methods.

2.4.4.2 Key strategies

Nutrition education is critical for providing the caregivers, households, communities, service providers and stakeholders with the necessary knowledge and competences for improving human wellbeing and for reduction of nutrition disorders. Nutrition education will, therefore be incorporated into existing school, pre-service and in-service training, institutional curricula and in nutrition education sessions for the public at facility level, community, household and individual level through various channels.

Extension outreach service delivery programmes will be conducted to facilitate community focus in order to increase public awareness, continuous negotiation and engagement with caregivers, households and communities. Additionally, nutrition education, guidelines and materials will be provided to adults and youths in rural areas and villages. Diverse channels of information dissemination will be pursued in order to have accelerated access to nutrition information and services. The following strategies shall be implemented in collaboration with the Ministry of Information and Civic Education and sectoral Ministries and the media to facilitate wide delivery of basic nutrition information, key nutrition messages and support for adoption of the optimal practices:

- Establish a nutrition sub-committee on Nutrition education and communication with clear terms of reference, work plans and feedback mechanism.

- Facilitate use and dissemination of coordinated, standardised and consistent up-to- date nutrition information and key messages via a variety of outreach strategies and contact points.
- Mainstream nutrition education into existing education curricula of all types.
- Mainstream nutrition education into all public extension service delivery systems.
- Introduce informal nutrition education to youth and adults through existing channels and structures.
- Hold advocacy campaigns on nutrition and dietetics to educate policy-makers and the general population.
- Strengthen capacity of service providers and stakeholders in conducting of nutrition education, counselling and continuous engagement and negotiation with the caregivers, households, communities and clients to improve nutrition.

2.4.5 Policy statement five

Government shall ensure attainment of adequate nutrition among the population through promotion of optimal nutrition practices, appropriate food choices and combinations for diversified diets and healthy lifestyles among all Malawians through a National Nutrition Programme that focuses on prevention, control and treatment of various forms of nutrition disorders

2.4.5.1 Objective

To achieve effective prevention and control of various forms of nutrition disorders among Malawians with emphasis on infants, young children, school age children, women, the elderly and PLWHA

2.4.5.2 Key Strategies:

Adequate nutrition among Malawians in general and vulnerable groups such as infants, young children, school age children, women, the elderly and PLWHA will be facilitated through promotion of optimal practices for infant and young child feeding, feeding of a sick

child during and after illness, women nutrition, control of micronutrient deficiency disorders such as Vitamin A, anaemia and iodine. Furthermore, consumption of a variety of foods from the six food groups every day shall be promoted to facilitate adequate intake of energy and other nutrients for normal functioning of the body and well being. In addition the National Nutrition Programme will promote food safety and quality, prevention and control of nutrition related Non-communicable diseases. The following strategies will therefore be implemented to promote adequate nutrition among various population groups in the country:

- Promotion of implementation and integration of the Essential Nutrition Actions in various programmes, projects and contact points with a mother and child at facility and community level to promote women and child nutrition. The Essential Nutrition Actions focus on optimal breast feeding in the context of HIV and AIDS, optimal complementary feeding, optimal feeding of a sick child during and after illness, promotion of women nutrition with emphasis on adolescents, pregnant and lactating mothers, control of Vitamin A, Iron and Iodine deficiency disorders.
- Increasing knowledge and skills among service providers, caregivers, households and communities in appropriate nutrition practices through a comprehensive communication strategy and civic education.
- Promote availability, accessibility and consumption of a variety of foods from the six food groups everyday
- Promote consumption of micronutrient rich and fortified foods for all Malawians.
- Develop and lobby for enforcement of mandatory guidelines on food fortification.
- Increase coverage of micronutrient supplementation in under-five children, school-aged children, pregnant and lactating mothers.

2.4.5.2 Objective

To promote appropriate food utilization, food choices, combinations and dietary diversification at household, community and national levels to achieve and sustain adequate nutrition.

2.4.5.3 Key Strategies

Frequently, malnutrition persists despite sufficient food availability. This is due to inappropriate food choices, combination and utilization for adequate intake of energy and other nutrients. The National Nutrition Programme shall promote consumption of a variety of foods with emphasis on consumption of common indigenous foods and other foods from the six food groups. The following will be the strategies to be used to achieve this:

- Development and dissemination of recipes and guidelines based on various food combinations using the “Multi-mix principle”. The recipes and guidelines shall be disseminated through nutrition education, civic education, nutrition shows, fairs and information campaign among others
- Development or review and dissemination of food utilisation guidelines, processing, storage and preparation techniques, based on typically available foods and quantities to maximise nutrition benefit of available foods throughout the year.
- Implement programs to encourage diversified food production and collection using sustainable food production practices, with a focus on the production of indigenous foods, livestock, edible insects and others for home consumption. Improve community knowledge to maximize benefits of available dietary resources for better nutrition.
- Promote the consumption of adequate food in both quality and quantity to meet nutrition needs for rural and urban

households with special emphasis on vulnerable groups and low-income households.

- Strengthen the implementation of the School feeding and school Health and Nutrition Programme

2.4.5.3 Objective

Reduce morbidity from nutrition related diseases and disorders

2.4.5.3.1 Key Strategies

Promotion of practices that reduce the risk of diseases among Malawians such as:

- increased household access to safe water and sanitary facilities.
- Good hygiene and sanitary practices among Malawians
- Appropriate disease prevention measures such as sleeping in Insecicide treated bednets, Immunisations
- Encourage early health care-seeking behaviours
- Dissemination of dietary guidelines and recommendations for people suffering from specific nutrition-related diseases, such as, diabetes, hypertension and certain types of cancer among others including communicable tuberculosis, HIV and AIDS to extension workers, clinic workers and social service providers

2.4.5.3 Objective

To promote control, prevention and management of dietary related diseases that impact negatively on nutrition well-being of Malawians.

Many common diseases in Malawi, such as chronic malnutrition, diabetes, hypertension, gout, arthritis, cancer and tuberculosis are closely tied to nutrition well-being. Specific interventions must be taken to provide specialized nutrition assistance to Malawians suffering from these diseases.

2.4.5.3.3 Key Strategies:

- Provision of relevant nutrition information and dietary guidelines for prevention, control and management of common Nutrition related Non-communicable diseases such as chronic malnutrition, diabetes, hypertension, gout, arthritis, cancer and tuberculosis.
- Provision of training and support materials to nutrition service providers in prevention, control and management of Non-communicable diseases to reduce nutrition-related complications arising from Non-communicable diseases (diabetes, hypertension, gout, arthritis, cancer, tuberculosis) and other common diseases.
- Strengthening of counselling services for prevention and management of diabetes, hypertension, gout, arthritis, cancer and tuberculosis among others.
- Promotion and supporting of palliative care and community coping mechanisms for households affected by chronic illnesses.

2.4.5.4 Objective

To protect consumers from health hazards resulting from contamination, poor food handling techniques and quality.

2.4.5.4.2 Key Strategies:

Poor food safety poses a threat to Malawians. National legislation regulating the quality of food will be reviewed, enforced; and systems developed to ensure that foods are processed in accordance with recognized international and national standards of sanitation and are free from toxins, harmful byproducts and unsafe fortifications. Additional research must be conducted to determine foods with potential risk for consumption, and production and consumption of these foods must be regulated accordingly. Finally, the public must be educated on food safety and risks. The strategies below will guide effective food safety and quality control:

- Improve quality and decrease contamination from processed foods through development and enforcement of appropriate standards.
- Increase consumer awareness of potential food hazards and unsubstantiated health claims through intensive consumer education in collaboration with the Ministry of Information and Civic Education and the Consumer Association of Malawi.
- Strengthen the enforcement of existing food safety legislation.
- Strengthen the capacity of relevant food regulatory Institutions such as Malawi Bureau of Standards and City Assemblies to monitor and control food safety and standards
- Develop and enforce new food safety legislation where existing policies are inadequate.
- Promote research and strengthen relevant research capacity to evaluate health claims made on processed foods, the nutrient and chemical content of all relevant nutrition therapies and supplements.

2.4.5.4 Objective

To improve the quality of services for management of acute malnutrition in under-five children, pregnant and lactating mothers, adolescents and adults.

2.4.5.4.1 Key Strategies

Proper management of acute malnutrition is critical to increase the chances of recovery and speeding up the recovery process. This would reduce possible setting in of complications that may likely lead to a vicious cycle of malnutrition and disease and increase the risk of death among those malnourished. The following strategies will facilitate improve the quality of nutrition services for effective treatment of acute malnutrition among various population groups.

- Review and consolidation of guidelines for management of malnutrition in various population groups

- Provide necessary knowledge and skills to service providers in management of acute malnutrition through in-service and on the job training.
- Strengthen community follow-up and participation in treatment of clients with malnutrition
- Monitor case management outcomes for appropriate action

2.4.5.6 Objective

To improve the quality of Nutrition Care, Support and treatment to PLWHA

2.4.5.6.1 Key Strategies

A direct link exists between Nutrition, HIV and AIDS. Nutrition strengthens the body's ability to fight infections and can help rebuild immune systems destroyed by HIV and AIDS. Adequate nutrition would therefore, delay the progression of HIV to AIDS.

On the other hand, inadequate nutrition will weaken the body and further destroy the body's ability to fight infections, making the body more susceptible to other diseases and facilitate fast progression of HIV towards AIDS. HIV and AIDS exacerbate malnutrition due to increased energy and nutrient needs to fight and recover from HIV-related infections.

The increased nutritional requirements are difficult to meet due to low nutrient intake resulting from loss of appetite, poor digestion, malabsorption of food and increased vulnerability to food insecurity. In addition they often lack resources for purchasing a variety of foods for a diversified diet. The combined burden of malnutrition, HIV and AIDS, and the widespread consequences for Malawians, necessitate a unique approach to dealing with the dietary requirements of the PLWHA and nutrition management of common infections, conditions and drug side effects that interfere with nutrition. The following strategies will therefore facilitate improvement of nutrition care, support and treatment for PLWHA:

- Promotion of specialized nutrition care for PLWHAs.

- Development and dissemination of guidelines for provision of Nutrition Care and Support in all government sectors and departments based on the government budgetary allocation
- Improvement of coordination and mainstreaming of HIV and AIDS and nutrition interventions.
- Periodic review and dissemination of guidelines for Nutrition Care, Support and Treatment of PLWHA.
- Provision of the necessary knowledge and skills to service providers, caregivers, households and communities to prevent and control malnutrition in PLWHA through counseling and continued follow-up and support.
- Provision adequate knowledge and skills to service providers to be able to manage malnutrition in PLWHA.
- Development and dissemination of job aids for management of malnutrition
- Provision of regular technical supervision to service providers
- Encouragement of on-spot supervision and clinical care for the malnourished clients by qualified staff.
- Strengthening community follow-up and participation in treatment of PLWHA with malnutrition
- Monitoring case management outcomes for appropriate action
- Conducting needs assessment in all the sectors on nutrition and HIV and AIDS structures
- Recruitment, training and deployment 8,000 Community Nutrition and HIV and AIDS officers
- Establishment of nutrition, HIV and AIDS structures for improved service delivery at all levels.

2.4.5.7 Objective

To increase awareness and resource allocation for addressing nutrition issues.

2.4.5.7.1 Key Strategies:

Nutrition is a cross cutting issue that requires concerted efforts from all stakeholders. In order for every stakeholder to identify their niche, there is need for advocacy. The Department of Nutrition, HIV and AIDS will therefore undertake nutrition advocacy and lobbying campaigns to address nutritional problems through legislation, information campaigns and directives. It will lobby for funding and allocation of adequate resources for effective nutrition service delivery. Finally, it will provide a voice within government for people suffering from nutrition disorders. The following strategies will therefore be implemented to mobilise support and resources for nutrition:

- Development of an advocacy tool for nutrition targeting various categories of people such as policy and decision makers in government and other relevant Institutions and organizations.
- Effective lobbying and advocacy for support and resources for nutrition interventions.
- Development of legislation on nutrition.
- Lobbying for adequate resource allocation for nutrition service delivery within government and among partners.

2.4.6 Policy statement Six

Government shall ensure evidence based programming of nutrition services, programmes, projects and interventions through generation and dissemination of research based nutrition information

2.4.6.1 Objective

To build national coordination framework as well as institutional and technical capacity for conducting and disseminating nutrition research and development in the country.

2.4.6.2 Key Strategies

Research and development will give Malawi the capacity to assess the impact of nutrition on economic development and human well-

being; and the efficacy of foods and therapies with nutrition claims. It will also facilitate evidence based response to nutrition problems. The Department of Nutrition, HIV and AIDS, shall, in collaboration with the Nutrition Committee on Research coordinate all new and on-going research in nutrition through development of clear terms of reference for the Nutrition sub-committee on Research, production and wide dissemination of research guidelines and agenda; building of stake holders and institutions capacity to conduct research in various areas of nutrition to inform policy and facilitate allocation of adequate resources. The following strategies will be crucial in achieving this objective:

- Establishment of a nutrition sub-committee on Nutrition Research and Development with clear terms of reference, work plans and feed back system.
- Development and maintenance of a comprehensive Nutrition Information Management System.
- Documentation of existing nutrition research into a central Nutrition Information System and Resource Center for internal and public use.
- Facilitation of development and implementation of a Research agenda that is in line with government priorities.
- Strengthening the research capacity of academic and other relevant institutions in the area of nutrition.
- Tracking and cataloguing of new nutrition research in progress to maximize the utilization of research and development resources
- Facilitation of collaboration between research and extension departments in the area of nutrition to ensure that the research is demand driven.
- Strengthening of the research capacity of academic institutions in the area of nutrition.
- Promotion of research in various areas such as nutritive value of consumed indigenous foods.

3.0 GUIDING PRINCIPLES

The implementation of this policy will be guided by the following principles:

3.1. Political will and commitment

Successful implementation of this policy requires a level of political will, commitment and leadership that will grant nutrition high priority on the government development agenda.

3.2. Good governance

This is one of the major elements of ensuring that nutrition services are delivered through structures and systems that protect and benefit men, women, boys and girls at all levels. Implementation of this policy will, therefore be guided by:

3.2.1 The rule of law

The policy will be based on the rule of law through an established set of legal principles and norms within which government and society must function. Its implementation will require law enforcement and public observance of such laws. It also entails that' entities of the state respect the verdict of the courts.

3.2.2 Economic governance

Sustained economic growth, shared by all members of society, will contribute to achieving improved nutritional status among men, women, boys and girls.

3.2.3 Human rights

The right for all people to have access to safe and nutritious diets shall be observed in accordance with the fundamental basic rights of citizens to be free from malnutrition and related disorders.

3.2.4 Accountability and transparency

The government will ensure that the mandates contained in this policy are carried out in a responsible, efficient and transparent manner, with zero tolerance on corruption.

3.3. Community empowerment

Empowered communities with adequate nutritional knowledge, skills and resources will be key to the successful implementation of this policy.

3.4. Sustainable Use of Natural Resources

- A protected environment, including proper sanitation, water protection, personal hygiene, availability of food preparation facilities and energy, is a prerequisite for successful implementation of this policy.
- The services described will be provided through structures and systems that promote preservation of the environment and maximize environmental benefits to ensure long-term sustainability.

3.5. Equity in Nutrition:

- Gender equality and equity will be enhanced in all nutrition initiatives to ensure improved nutritional status of women, men, girls and boys. Efforts shall be devoted to improving women's social status relative to that of men in all aspects of nutrition.
- Disability, age, HIV and AIDS, and other vulnerabilities shall not be a hindrance to accessing adequate nutrition.

3.6. Science and evidence based interventions:

All nutrition initiatives will be based on scientifically proven evidence and best practices.

4.0. IMPLEMENTATION ARRANGEMENTS

4.1. Institutional Arrangement

4.1.0. The Head of State is the Minister responsible for Nutrition, HIV and AIDS in Malawi.

4.1.1. The Department of Nutrition, HIV and AIDS is the secretariat for the provision of policy direction, guidance, coordination of implementation, monitoring and evaluation of the nutrition policy. Additionally, it lobbies and advocates for the development of nutrition structures and adequate resource mobilisation and allocation.

4.1.2. The policy is advocating for the establishment of a special cabinet committee on Nutrition, HIV and AIDS to highlight the devastating effects of nutrition disorders, HIV and AIDS. Below the Cabinet Committee is the Principal Secretary's Committee on Nutrition issues. In Parliament, Nutrition, HIV and AIDS issues also need to be handled by a special parliamentary committee on Nutrition, HIV and AIDS. There will also be a Multisectoral Technical Committee on nutrition that will be chaired by the PS responsible for Nutrition, HIV and AIDS. In addition, for the Nutrition Policy to be effectively implemented in all development programmes, there is need to build the capacity of nutritionists and dieticians at all levels.

4.1.3. The District Assembly under the supervision of the Department of Nutrition, HIV and AIDS, will be responsible for the implementation of the Nutrition Policy and Programme as part of the decentralisation process.

4.2. Implementation Plan: Since nutrition is a cross-cutting issue, each stakeholder needs to identify their niche in the implementation of the Nutrition Policy. This therefore calls for the placing of nutrition, HIV and AIDS specialists in each of the sector ministries and departments to coordinate the activities within the sector.

4.2.1 In addition to placing personnel with other national offices, the Department of Nutrition, HIV and AIDS will coordinate joint

planning with other ministries and departments to ensure a comprehensive national approach to the issue of nutrition.

4.2.2 At the district level, the District Commissioner will be the person in charge of nutrition activities and he or she will be supported by the Chief Nutrition, HIV and AIDS Officer (CNHAO). The CNHAO will be supported by the Principle Nutrition Officers belonging to various line ministries and departments and the existing HIV and AIDS coordinators who will have to be upgraded to P7.

4.2.3. Below the district level, there will be Area Nutrition Officers who will provide supervision at the area level. These will come from the already existing extension staff belonging to various line ministries and departments who may require retraining at BSc in nutrition (100) and dietetics (100), MScs in nutrition (100), PhDs in nutrition (60).

4.2.4. Further, at the community level, 8,000 Community Nutrition, HIV and AIDS workers will be trained and employed by the District Assemblies to effectively deliver nutrition, HIV and AIDS services to communities. There will be a technical committee chaired by the District Commissioner comprising all heads of departments, and the CNHAO will be the secretariat. A detailed implementation plan shall be developed explaining the different roles and responsibilities of the various players and stakeholders.

4.3 Coordination: A number of nutrition projects and interventions are already in place in Malawi. The implementation of the National Nutrition Policy will take an inventory of the on-going projects and research work. As part of the implementation of the policy, the Department of Nutrition, HIV and AIDS will analyse and catalogue existing nutrition materials and programmes.

5.0 Monitoring and Evaluation

The following steps will be taken in order to ensure effective operation and implementation of the policy at all levels:

5.1 Means of monitoring:

- Strengthen nutrition surveillance systems at all levels.

- Standardise and improve nutrition data for evidence-based intervention.
- Conduct regular nutrition surveys at all levels.
- Coordinate the documentation and dissemination of the findings of nutrition surveys, surveillance and best practices.
- Develop appropriate nutrition linkages with various actors in public and private sectors for decentralized decision-making.
- Establish a coordinated management information system that links to all stakeholders for efficient policy implementation.
- Coordinate the development, legislation and enforcement of the Nutrition Act as provided for in the constitution.
- Continue to seek community input on progress of policy implementation.
- Establish a nutrition ethical committee to regulate all nutrition research work.
- Review and standardise available IEC materials use at all levels.
- Monitor budgetary allocation and utilisation on nutrition programmes and activities.
- Utilisation of developed monitoring system and tools.

5.2 Review of Policy: There will be an annual formative review of the policy to direct programme implementation. A mid-term review will be conducted after two and a half years, and a summative review and evaluation will be done after five years.

CHAPTER TWO

THE NATIONAL NUTRITION PROGRAMME

The National Nutrition Policy will be operationalised through a comprehensive National Nutrition Programme. The National Nutrition Programme provides a detailed framework for the implementation of the priority areas for nutrition improvement as stated under the various policy statements. It outlines activities for each strategy to facilitate realization of the vision, mission, goals and objectives and

expected outcomes of the policy within the policy's life span. It aims at addressing the nutrition problems in a coordinated and comprehensive manner.

2.0 PROGRAMME PRIORITY AREAS AND THEIR COMPONENTS

The National Nutrition Programme shall focus on key priority areas that will facilitate prevention, control and treatment of various forms of nutrition disorders among various population groups, but with emphasis on infants, young children, school age children, women, the elderly, PLWHA, People in emergency and other vulnerable groups as shall be defined from time to time. The programme is expected to facilitate the improvement of Malawi's nutrition service delivery and human capital development from 2006 to 2011 through creation of a conducive environment for implementation of nutrition services, programmes, projects and interventions. The key priority areas, their components, strategies and activities have been presented in two sections. The first section describes the key priority areas, strategies and activities that will facilitate creation of an environment that will enable stakeholders to effectively implement the various components of the National Nutrition Programme. The second section describe

priority areas, strategies and activities that will facilitate improvement in nutrition indicators through prevention, control and treatment of various nutrition disorders. The key priority areas, their components, strategies and activities are as follows:

SECTION ONE

CREATING AN ENABLING ENVIRONMENT

This section describes key strategic requirements that need to prevail to facilitate effective implementation of the various components of the National Nutrition Programme by the various stakeholders. It indicates how nutrition should be mainstreamed in the National Development agenda by government and partners. It further indicates resource mobilisation, strengthening of Institutional capacity and coordination of various nutrition stakeholders, programmes and projects as key priority areas to realise successful implementation of the National Nutrition Programme. It also covers provision of relevant policy and technical guidance and evidence based programming through research development and advocacy. It further emphasises on the provision for legal and regulatory framework for production, distribution and marketing of nutrition products and therapies and on Monitoring, evaluation and nutrition information management systems.

1. Priority Area One

Reposition Nutrition on the Development agenda

Expected outcome

- Nutrition mainstreamed in sectoral policies and programmes

1.1 Objective

To incorporate nutrition in all sectoral policies and programmes for a multi-sectoral approach

1.1.1 Key Strategies

1.1.1.1 Government shall ensure that all government development policies adequately take nutrition on board as a priority area for achieving economic growth, stability and prosperity.

1.1.1.1.1 Activities

- Conduct advocacy meetings with Heads of government ministries, departments and Institutions, national, district and local leaders on the magnitude, consequences of malnutrition and its impact on individuals, communities and national economic growth and prosperity
- Hold meetings to reach consensus with stakeholders on the importance of incorporating nutrition as a cross-cutting issue in national and sectoral departments
- Conduct working sessions with sectors to review existing policies and guidelines to identify gaps
- Conduct working sessions to incorporate nutrition in existing sectoral policies and guidelines

1.1.1.2 All government sectors and departments shall have a defined role and responsibility in nutrition and will include nutrition in their sectoral development policies and plans.

1.1.1.2.1 Activities

- Conduct stakeholders analysis for nutrition to identify their role and responsibilities based on the sectoral mandates and comparative advantage
- Hold meetings to reach consensus on roles and responsibilities for each government sector

- Lobby for creation of nutrition positions in all the government Ministries and departments to facilitate the mainstreaming of nutrition in the sectoral policies and programmes
- Facilitate the recruitment and deployment of the Nutrition staff for the sectors
- Facilitate inclusion of nutrition in sectoral strategic and work plans through bi-annual joint planning and review meetings

1.1.1.3 Establishment and strengthening of sectoral nutrition programmes and implementation units with well defined terms of reference and means of giving feed back to nutrition stakeholders.

1.1.1.3.1 Activities

- Conduct Stakeholders meetings with government sectors, NGO, Bilateral and Multilateral Partners, the Private sector, Academic Institutions, the media and others to review current sectoral programmes, key achievements, lessons learnt, challenges and opportunities.
- Identify gaps, strengths and priority areas for each sector
- Reach consensus on priority areas and components for the national nutrition programme.
- Conduct joint stakeholders meetings to facilitate development of comprehensive nutrition implementation plans that clearly define objectives, outcome, outputs, key roles and responsibilities of various government and private sectors as well as multilateral, bilateral and NGO partners based on their mandate, focus areas and comparative advantage.
- Facilitate building of the institutional and human capacity of the sectoral Institutions.
- Facilitate quarterly reporting of nutrition services by each sector.
- Conduct biannual Nutrition Implementers feed back meetings.

1.1.1.4 Nutrition stakeholders in the private sector shall include services, programmes and projects aimed at promoting adequate nutrition for all Malawians in their policies and plans in line with the MGDS.

1.1.1.4.1 Activities

- Conduct one to one advocacy and negotiation meetings with the private sectors to mainstream nutrition services in their programmes,
- Facilitate establishment of a Business Coalition for nutrition with clear terms of reference.
- Include the Private sector in planning and review meetings

1.1.1.5 The bilateral and multilateral partners will place nutrition high on their agenda for support to government and in line with the MGDS in order to contribute to the operationalisation of the government nutrition plans.

1.1.5.1 Activities

- Conduct an advocacy meeting with the Bilateral and multilateral partners on the magnitude of nutrition problems, consequences and priority areas for action
- Facilitate establishment of a Government-partners Coordination group to facilitate collaboration and networking
- Conduct Quarterly review and joint planning meeting with the partners
- Participate in joint programme review and planning of activities under development partners' support to government.

1.1.1.6 Facilitate proper alignment of nutrition programmes and projects initiated by the Non-government organizations with the National nutrition policy and the MGDS for maximum benefits to Malawians.

1.1.1.6.1 Activities

- Orient NGOs on the National Nutrition Policy and Government priorities as defined in the MGDS.
- Produce guidelines on project identification, targeting, implementation and monitoring for NGOs
- Conduct meetings to disseminate the guidelines to NGOs

- Take stock of programmes and projects that are already underway by assessing on-going nutrition activities and existing coordination structures at all levels in order to build on them or for possible scale up with partners and NGOs
- Consolidate guidelines for reviewing NGO projects
- Review proposals from NGOs and approve where the criteria is met.
- Conduct quarterly joint supervisory visits to NGO projects and provide feedback to stakeholders

2. Priority Area Two

Increased budgetary allocation of resources by government and her partners for implementation of the National Nutrition Policy

Expected Outcome

Increase real budgetary allocation to nutrition services, programmes and projects by government and partners annually

2.1. Objective

To achieve real increase in budgetary allocation of resources by government and her bilateral, multilateral and NGO partners as well as the private sector for implementation of the Nutrition services, programmes, projects and interventions at different levels annually.

2.1.1 Key strategies

2.1.1.1 Government sectors and departments shall allocate and mobilise external financial resources to support nutrition services, programmes, projects and interventions in their sectors.

2.1.1.1 .1Activities

- Strengthen Government-Donor partners committee on nutrition to spearhead the resource mobilisation campaigns
- Lobby for establishment of a pool fund for nutrition supported by government and partners.

- Develop a comprehensive Nutrition Strategic Plan which is costed and use it to advocate for resources
- Develop an advocacy tool
- Conduct resource mobilisation campaigns among partners within and outside the country .
- Make special individual contacts with the donor partners
- Lobby with the head of finance and other heads of sectors at national and district level to allocate resources for nutrition
- Engage stakeholders in strengthening partnerships for nutrition
- Document and disseminate widely nutrition interventions that have shown impact.
- Collaborate continuously with partners through information sharing, networking and feedback.

2.1.1.2 Development of legislation on nutrition

2.1.1.2.1 Activities

- Identify resources for development of legislation
- Identify special law commissioners to draft the proposed Act
- Request the Law Commission to constitute the special commissions
- Facilitate consultative meetings for the special law commissions
- Facilitate the awareness creation meetings at various levels
- Develop legislation
- Submit draft bills to Cabinet for approval
- Develop implementation mechanisms for the Act

3. Priority Area Three

Strengthen Institutional Capacity at all levels for delivery of Nutrition services, programmes and projects

Expected Outcome

Improve capacity of Nutrition implementing Institutions at national, district and community levels to implement Nutrition services, programmes, projects and interventions in their respective sectors

3.1 Objective

To build and improve institutional capacity at all levels of society for effective delivery of nutrition services, programmes and interventions with focus on facility, community level and outreach services and programmes.

3.1.1 Key strategies

3.1.1.1 Facilitate creation and filling of new and existing nutrition posts in all government Ministries and departments

3.1.1.1.1 Activities

- Lobby for positions for Nutrition, HIV and AIDS Officers in all government Ministries and departments
- Develop a recruitment and deployment plan
- Apply for authority to recruit from relevant Government authorities
- Recruit, train and deploy Nutrition, HIV and AIDS Officers

3.1.1.2 Increase number of nutrition implementers that have the necessary competencies through pre- and in-service training and regular up dates.

3.1.1.2.1 Activities

- Document existing training materials in nutrition used by various stakeholders
- Conduct a stakeholders meeting to review the materials to identify gaps and for possible consolidation
- Conduct a series of working sessions to consolidate the training and accompanying materials
- Pretest the materials in a TOT
- Print and distribute the materials
- Conduct a series of training session for service providers, supervisors and programme Managers in the consolidated materials.
- Provide on going support to the service providers through follow up and periodic technical supervision.

- Conduct annual refresher training sessions on emerging issues.
- Conduct needs assessment for nutrition personnel at various levels
- Lobby for training of a pool of technical experts in nutrition (100 BSc nutritionists, 100 MSc nutritionists, 100 Dieticians, 60 PhDs).
- Develop training curriculum
- Recruit students for training
- Identify Trainers
- Establish nutritional training structures at all levels
- Mobilise resources for the training
- Produce and implement the training plan
- Train students in various specialized areas of nutrition
- Conduct periodic orientation or up-date sessions for nutrition implementers to relevant policies and guidelines in nutrition
- Facilitate participation of Malawian specialists in the international and national nutrition fora and provide for accessible and timely debriefings
- Build the capacity of nutrition implementing institutions in monitoring and evaluation of nutrition interventions, services, programmes and projects.

3.1.1.3 Increase the number of trained extension workers to implement nutrition services, programmes and projects in Malawi, with special focus on Community Nutrition Workers

3.1.1.3.1 Activities

- Lobby with relevant authorities for 8000 positions for Community Workers to work with at least 250 households each
- Apply for authority to recruit
- Conducting a working session to review existing curriculum for community based service providers from various training Institutions to identify gaps
- Conduct a writers working session to develop the curriculum for Community Workers

- Develop training modules and resource materials for the Community Workers
- Mobilise resources and Institutions for training the Community Workers
- Orient Tutors, Supervisors and other relevant staff on Community Workers' training Programme
- Recruit, train and deploy the Community Workers
- Provide follow-up and on-going support to the trained Community Workers

3.1.1.4 Increase the institutional capacity to acquire or procure adequate supplies, materials and equipment for implementing nutrition services, programmes, and projects.

3.1.1.4.1 Activities

- Conduct facility and community level needs assessment for various nutrition supplies, materials, equipment and storage and kitchen facilities.
- Produce a procurement and distribution plan and up date it from time to time as required
- Orient District and community staff on how to estimate requirements for various nutrition programmes, timely requisition, reporting and logistics management
- Facilitate timely procurement and distribution of supplies, materials and equipment for nutrition.
- Mobilise resources to up-grade storage and kitchen facilities where necessary.
- Hire services to renovate the facilities as required.

4. Priority Area Four

Establishment of a well defined coordination mechanism for nutrition services, programmes and projects at central, district and community level.

Expected Outcome

Improve coordination for nutrition services, programmes and projects at all levels

4.1 Objective

To facilitate coordinated implementation of nutrition programmes at all levels based on National and sectoral policies and guidelines.

4.1.1 Key Strategies

4.1.1.1 Development and wide dissemination of a well defined National Nutrition Programme with focus on prevention, control and treatment of various forms of nutrition disorders and with clear definition of roles and responsibilities of stakeholders.

4.1.1.1.1 Activities

- Conduct a stakerholders meeting to review the current National nutrition Programme and identify key focus areas based on lessons learnt, challenges, opportunities, identified best practices and the National Nutrition Policy priority areas.
- Revise the National Nutrition Programme with emphasis on Prevention, control and treatment of various forms of nutrition disorders among various population groups.
- Conduct a series of dissemination and sensitisation meetings for various categories of the population
- **Develop a comprehensive Nutrition Business plan that clearly defines the key stakeholders, their key roles and responsibilities based on their mandate, area of focus and comparative advantage both in the public and private sectors.**
- **Disseminate the Bussiness Plan to all stakeholders**

4.1.1.2 Establishment and strengthening of Nutrition committee and its sub-committees that shall have well defined terms of reference, work plans and means of giving feed back to nutrition stakeholders.

4.1.1.2.1 Activities

- Compile a list of all the existing nutrition committees and their Terms of Reference.
- Identify gaps and solicit consensus from stakeholders on what committees to have
- Develop Terms of Reference for each of the committees
- Develop work plan for each committee
- Mobilise resources to support the functions of the committees
- Facilitate meetings for the committees for review of various nutrition programmes in the country quarterly or more often where necessary
- Facilitate feed back reports from each of the committee circulated and also presented to the main Nutrition Committee
- Consolidate and disseminate the reports quarterly for up date, transparency and accountability
- Produce and disseminate biannual nutrition bulletin for use by stakeholders in nutrition.
- Conduct periodic review of TORs of various committees

4.1.1.3 Facilitate rational response to nutrition problems and integration of nutrition and related services by stakeholders through joint review and planning meetings

4.1.1.3.1 Activities

- Conduct biannual joint review and planning meeting for stakeholders to produce sectoral plans
- Consolidate the sectoral plans into one comprehensive nutrition work plan
- Guide implementation of the work plans based on standardised guidelines, programme messages, tools, resource materials and through formulation, periodic review and dissemination of Policies
- Monitor the quality of delivery of nutrition services through regular joint monitoring and supervisory visits, feedback meetings from monitoring and supervisory visits and updating of stakeholders on emerging issues using various channels
- Consult regularly with donors and other stakeholders to ensure that both sides are meeting relevant standards

5. Priority Area Five

Strengthen partnerships with the private sector, development partners and civil society

Expected Outcome

Existence of strong partnerships with the private sector, development partners and civil society

5.1 Objectives

To create sustainable partnerships with the private sector, development partners and civil societies for nutrition.

5.1.1 Key Strategies

5.1.1.1 Establishment and strengthening of Government - partner Nutrition main and sub-committees

5.1.1.1 Activities

- Advocate for establishment of a government-partner nutrition committee
- Develop Terms of Reference for the Committee
- Produce a workplan for the committee
- Facilitate quarterly meetings for the committee

5.1.1.2 Establishment of a Business Coalition for nutrition that will strengthen collaboration and networking with government, the private sector and civil society.

5.1.1.2.1 Activities

- Lobby for establishment of a Business Coalition for Nutrition with the private sector and civil societies
- Develop Terms of Reference for the Coalition
- Facilitate quarterly meetings

- Facilitate joint review, planning and monitoring and evaluation of nutrition services, programmes, projects and interventions with partners, the private sector and civil societies.
- Facilitate continuous engagement of multilateral and bilateral partners, the private sector and civil society, sharing of information, networking and feedback through stakeholders coordination meetings

Priority Area Six

Development or review and dissemination of nutrition guidelines

6.1 Objective

To improve the quality of nutrition services through development, consolidation and dissemination of a set of national nutrition guidelines for Malawi.

Expected outcome

Improve quality of nutrition services

6.1.1 Key strategies

6.1.1.1 Development and wide dissemination of consolidated National Nutritional Guidelines for prevention, control and treatment of various nutrition disorders among Malawians.

6.1.1.1 .1 Activities

- Disseminate the guidelines through nutrition advocacy, coordination, planning and committee meetings, Nutrition education and counselling through various contact points, in-

service training of service providers, community structures and mass media.

- Build capacity at district and community levels for further dissemination as well as interpretation, implementation and monitoring and evaluation of the use and effectiveness of the guidelines

7. Priority Area Seven

Nutrition education and counselling

Expected Outcome

Improve knowledge and skills among service providers and various population groups

7.1 Objective

To provide nutrition education, counseling and support to Malawians across demographics to adopt optimal nutrition practices and healthy life styles.

7.1.1 Key strategies

7.1.1.1 Establish a nutrition sub-committee on Nutrition education and communication with clear terms of reference, work plans and feedback mechanism.

7.1.1.1.1 Activities

- Facilitate establishment of a committee in Nutrition Education and communication that reports to the main Nutrition Committee
- Develop TORs and workplans for the committee
- Facilitate quarterly meeting for the committee

7.1.1.2 Facilitate use and dissemination of coordinated, standardised, consistent and up-to- date nutrition information and key messages via a variety of outreach strategies and contact points.

7.1.1.2.1 Activities

- Produce an inventory of existing nutrition information and messages given to various population groups
- Produce standardised and easy to use resource materials and messages based on ENA and other information packages
- Disseminate resource materials and messages broadly
- Monitor use of the resource materials and messages from time to time.

7.1.1.3. Mainstream nutrition education into existing education curricula of all types.

7.1.1.3.1 Activities

- Conduct needs assessment and review of existing education and training programmes in Nutrition
- Lobby for revision of curricula at different levels to incorporate or update nutrition components in the curricula.
- Review education and training curricula for primary, secondary, tertiary education and pre-service training institutions providing B.Sc. and M.Sc in Nutrition or other Nutrition related programmes such as Public Health.
- Mainstream nutrition education and training into the various education and training curricula
- Conduct series of orientation sessions for education/ academic and training institutions in the revised curricula
- Develop Ph.D. programme
- Build infrastructure for new faculty where applicable
- Coordinate training of students at Bachelor's, Master's and Doctorate levels in the areas of nutrition
- Offer refresher courses for service providers
- Update messages and resource materials for nutrition education in all public extension service delivery systems.
- Orient public extension service providers in the updated messages and resource materials.
- Introduce informal nutrition education to youth and adults through existing channels and structures.
- Develop and implement a comprehensive communication strategy

- Develop and implement the nutrition communication strategy to promote optimal nutrition practices, health life styles and proper use of nutrition guidelines.
- Provide consistent and coordinated nutrition messages based on guidelines

SECTION TWO

Prevention, control and treatment of nutrition disorders

The National Nutritional programmes shall put a lot of emphasis on prevention of malnutrition among various populations groups throughout the life-cycle. Ephasis shall however, be placed on 0-2 years, which is the critical period for malnutrition among under five children in the country. In addition the damage caused by malnutrition during this period of child growth is usually irreversible leading to longterm adverse consequences on human capital development and contribution to economic growth and prosperity. The programme shall also focus on improving nutrition among children, women and other vulnerable groups through promotion of practices and interventions that have shown evidence for impact such as the Essential Nutrition Actions. The Prevention and control of malnutrition will therefore have the following key components:

- Promotion of optimal infant and young child feeding practices
- Promotion of optimal feeding of a sick child during and after illness
- Promotion of appropriate nutrition practices and health lifestyles in general population
- Control of micronutrient deficiency disorders with emphasis on Vitamin A deficiency disorders, Iodine deficiency disorders and anemia.
- Promotion of maternal nutrition

- Provision of Nutrition Care, support and treatment for PLWHA and other chronically patients Nutrition support to people in emergency
- Growth monitoring and promotion
- Scaling up of the School feeding programme to all public schools in the country
- Scaling up of the School health and nutrition programme
- Promotion of food processing, preservation and storage technologies for effective utilization of food resources for all gender categories and vulnerable groups.
- Promotion and sustaining production of high nutritive value foods for a nutritious diets

Increasing availability and access to a variety of foods from six food groups

- Promotion of appropriate food choice and combinations for diversified diets

The other component will focus on treatment of malnutrition and other nutrition disorders and shall include the following focus areas:

- Treatment moderate and severe acute malnutrition in under five children, adolescents and adults, PLWHAs and other vulnerable groups as shall be defined from time to time

—Treatment of nutrition related non communicable disorders

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~~Strategies and activities for Prevention, Control and Treatment of Nutrition Deficiency Disorders..~~

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8. Priority area eight

Prevention and control of various forms of Nutrition Disorders

Expected outcomes

It is expected that implementation of the strategies and activities below will facilitate adoption of appropriate nutrition practices

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and healthy life styles among caregivers, in households and communities in the country. The Nutrition status of Malawians, is therefore expected to change and cause substantial improvement in Nutrition indicators. The expected outcome is therefore, as follows:

Reduce prevalence of chronic and acute malnutrition in children under five years of age and other nutrition disorders among various population groups

8.1 Objective

To achieve effective prevention and control of various forms of nutrition disorders among Malawians with emphasis on infants, young children, school age children, women, the elderly and PLWHA.

8.1.1 Key Strategies

8.1.1.1 Promotion of implementation and integration of the Essential Nutrition Actions (ENA) in various programmes, projects and contact points with a mother, other care givers, child and others at facility and community level

8.1.1.1.1 Activities

- Conduct stakeholders meeting to orient them to the Essential Nutrition Actions (ENA) approach
- Develop and disseminate guidelines and job Aids for integrating ENA in nutrition programmes, projects, child survival programmes and other development interventions and activities within and outside the health sector.
- Conduct training of trainers in ENA at District level
- Conduct training for service providers from sectoral Ministries and other stakeholders in ENA at district and community level
- Develop and implement a comprehensive Communication

strategy for ENA.

- Mobilise communities through various community based service providers, community workers, community leaders and other community structures to integrate ENA in community activities and programmes.

8.1.1.2 Increase knowledge and skills among service providers, caregivers, households and communities in appropriate nutrition practices through a comprehensive communication strategy and civic education.

8.1.1.2.1 Activities

- Develop a Nutrition education kit for civic education in nutrition
- Orient stakeholders to the kit
- Conduct national wide civic education in nutrition in collaboration with the Ministry of Information and civic education and other government sectors, civil societies, the Local leaders and politicians.
- Conduct community sensitisation meetings on recommended nutrition practices and healthy life styles
- Conduct community dialogue, debates and discussions on key recommended nutrition practices and healthy life styles
- Produce and disseminate standardised messages in Nutrition using various media and other communication channels
- Conduct national and localised campaigns to promote optimal nutrition practices and healthy life styles.
- Orient service providers to the recommended nutrition Practices, healthy life styles and the key messages at all levels.

- Develop and disseminate job Aids for services providers at different levels in conducting nutrition counselling and education
- Put in place a well defined system for providing on-going support and follow-up to caregivers, households and communities to strengthen their skills in implementing the recommended nutrition practices.

8.1.1.3 Promote availability, accessibility and consumption of a variety of indigenous and high nutritive value foods and other foods from the six food groups everyday

8.1.1.3.1 Activities

- Conduct village and area level food fairs and campaigns on production and consumption of indigenous, high nutritive foods and other foods from six food groups in diversified diets.
- Organise communities to collect and multiply seeds for indigenous foods and provide the initial start up seeds as may be required
- Organise communities to establish a revolving seed fund for indigenous vegetables, other fruits and vegetables, high nutritive value foods and small livestock to loan to the community members.
- Support communities to produce indigenous, high nutritive value foods, small livestock and other foods from the six food groups through provision of small loans, promotion of backyard gardens, planting of fruit trees both during wet and dry season
- Promote agricultural practices that encourage diversified crop and other food production practices

- Promote the rearing of small livestock such as chickens, rabbits, guinea pigs and goats and dairy animals for household consumption.
- Provide Support to the communities, households and individuals to have adequate access to a variety of foods at all times through promotion of income generating activities that are linked to nutrition.
- Sensitise communities on proper food management techniques
- Develop and disseminate recipes that use a variety of foods from the six food groups with emphasis on indigenous foods to diversify diets.
- Liaise with the research and extension department to evaluate nutritional value of indigenous foods and develop recipes that promote use of the nutritious indigenous foods
- Conduct regular community level demonstrations in preparation and consumption of locally available nutritious foods such as indigenous fruits, vegetables, legumes, oilseed crops, staples, livestock, fish, *ngumbi*, *bwamnoni*, *mbewa mphalabungu*, *sesenya*, *matondo* and other locally available foods at community level.

8.1.1.4 Promote consumption of micronutrient rich and fortified foods for all Malawians.

8.1.1.4.1 Activities

- Develop and dissemination nutrition information kit on importance of eating micronutrient rich foods
- Promote recipes that encourage use of micronutrient rich foods
- Promote addition of oil rich foods to food rich in Vitamin A to facilitate effective utilisation of Vitamin A in the body

- Promote consumption of fruits rich in Vitamins A and C with a meal to aid in utilisation of the Vitamin A from the fruits and Iron from plant sources in the body
- Conduct national campaigns, civic education, mass media and community activities to promote use of iodised salt in all family foods
- Develop a logo for fortified foods and Conduct national wide social marketing of fortified foods in collaboration with civil Societies, Ministry of information and Civic Education

8.1.1.5 Increase coverage of micronutrient supplementation to under-five children, school-aged children, pregnant and lactating mothers.

8.1.1.5.1 Activities

- Conduct biannual Child Health Days for Vitamin A supplementation, de-worming, nutrition education and other child survival interventions
- Conduct district and community level sensitisation meetings on importance of supplementation among caregivers, communities and service providers
- Put logistics to ensure adequate supplies for supplementation

8.1.1.6 Development and dissemination of recipes and guidelines based on various food combinations using the “Multi-mix principle”.

8.1.1.6.1 Activities

- Develop a set of recipes and simple information kit on guidelines for feeding infants less than 6 months of age, children 6-24 months and beyond, sick children during and after illness, for pregnant and lactating mothers, the elderly and the family using the “Multi-mix Principle”.

- Conduct intensive nutrition education through Community Workers which include Agriculture Extension Workers, Community Development Assistants, Community Nutrition HIV and AIDS Workers and HSAs; and the mass media in appropriate food choices, combinations, food preparation and utilisation
- Conduct national campaigns, civic education, mass media and community activities to promote the recipes and disseminate the guidelines.
- Conduct national and localised Nutrition campaigns through civic education, nutrition shows, fairs and focus group discussion and mass media to disseminate the guidelines and recipes.

8.1.1.7 Improve knowledge and skills in appropriate food utilisation, processing, post harvest management, storage, preparation techniques among households and communities.

8.1.1.7.1 Activities

- Develop food utilization guidelines, including collection, storage, processing and preparation techniques based on locally available foods and quantities to maximize nutritional benefits from available foods throughout the year
- Develop and disseminate IEC materials on food preparation , processing and storage using various media channels and community activities.
- Disseminate the food utilisation, preparation, processing, and storage guidelines through civic education, mass media and village demonstrations

- Conduct trainings for service providers and communities food processing, preparation, storage and participatory recipe development
- Conduct demonstrations on food processing, preparation and storage technics at village and area level
- Conduct meetings with research institutions on food preparation , processing and storage
- Conduct tours to food processing sites
- Orient tutors, supervisors and community nutrition workers on food processing, storage, preparation, utilisation and Community Nutrition Programmes
- Monitor the implementation of the food processing technologies and standards
- Review and document existing post-harvest nutritious food management practices.
- Train Extension workers and other community based service providers in annual food budgeting and post-harvest management of various foods
- Develop and disseminate multi-media messages on annual food budgeting and post-harvest food management
- Facilitate advocacy for the development and adoption of labour saving technologies on post-harvest nutritious foods management

8.1.1.8 Promote the consumption of adequate food in both quality and quantity to meet nutrition needs for rural and urban households

with special emphasis on vulnerable groups and low-income households.

8.1.1.8.1 Activities

- Develop comprehensive food composition tables for Malawi
- Develop minimum dietary standards for Malawi
- Develop recommended minimum nutrition package for Malawian households
- Develop dietary recommendations and daily requirements for various population groups
- Develop guidelines on meal planning using a variety of foods based on principles of dietary diversification
- Develop and disseminate audio-visual documentaries on daily food budgeting and meal planning based on the multi mix principle
- Train extension workers, caregivers and community on daily food budgeting and meal planning based on the muliti mix principle
- Develop IEC material showing different combination of foods from the six food groups
- Develop dietary recommendations and daily requirements for people suffering from nutrition-related disorders
- Produce and disseminate food calendar based on seasonal and geographical food variations
- Conduct civic education on amount of food that families should keep taking into account food seasonal variations

8.1.1.8 Promotion of practices that reduce the risk of diseases among Malawians

Diseases are an immediate cause of malnutrition due to their effect in increasing energy and nutrient requirements in the body, reducing dietary intake of various nutrients caused by loss of appetite and malabsorption of nutrients. It is important, therefore, to promote practices that reduce risk of diseases among Malawians.

8.1.1.8.1 Activities

- Conduct advocacy meetings with key stakeholders for provision of safe water and sanitary facilities to communities both in rural and urban areas.
- Facilitate civic education in importance of using safe water and in correct use of sanitary facilities
- Facilitate civic and health education on key practices to prevent diseases among various population groups at levels and in early health care seeking behaviour
- Develop or review dietary guidelines and recommendations for people suffering from specific nutrition-related diseases, such as, diabetes, hypertension and certain types of cancer among others including communicable tuberculosis, HIV and AIDS to extension workers, Health workers and social service providers
- Conduct a series of training sessions to orient service providers on the guidelines
- Conduct child health campaigns at national, district and community level.

8.2.1 Strengthen the implementation of the School feeding and school Health and Nutrition Programme

8.2.1.1 Activities

To ask from Stacia

8.2. Objective

To improve the quality of services for management of acute malnutrition in under-five children, pregnant and lactating mothers, adolescents and adults.

Expected outcomes

- Increased access to quality services for management of children with moderate and severe malnutrition

- Improved management of children with moderate and severe malnutrition
- Improved case management outcomes

8.2.1 Key strategies

8.2.1.1 Review and consolidation of guidelines for management of malnutrition in various population groups

8.2.1.1.1 Activities

- Compile existing guidelines for management of malnutrition from Government and other stakeholders
- Conduct stakeholders meetings to review the guidelines
- Conduct a series of working sessions to consolidate the guidelines
- Conduct a series of dissemination meetings on the guidelines
- Develop job aids and other accompanying materials on the use of the guidelines
- Orient service providers on the use of the guidelines

8.2.1.2 Provide necessary knowledge and skills to service providers in management of acute malnutrition through in-service and on the job training.

8.2.1.2.1 Activities

- Develop consolidated training materials in management of moderate and severe acute malnutrition
- Conduct training of trainers
- Train service providers
- Conduct on-spot supervision
- Provide clinical care for the malnourished clients
- Provide on going support to the service providers through follow up and technical supervisory visits
- Orientation of tutors from pre-service institutions, DHMT and zone officers

8.2.1.3 Strengthen community follow-up and participation in treatment of clients with malnutrition

8.2.1.3.1 Activities

- Develop information kit and standardised check list for early case detection and follow up of clients
- Conduct training of Community Nutrition Workers, HSAs, CDAs, AEDOs, AEDCs, SWAs, AEHO and others
- Conduct community registration of various population groups
- Conduct weekly door to door visits to households with malnourished individuals
- Conduct community nutrition assessment sessions monthly and more frequently where deemed necessary.
- Conduct community sensitisation meetings on prevention, causes, management and existing programmes for management of malnutrition.

8.2.1.4 Monitor case management outcomes for appropriate action

8.2.1.4.1 Activities

- Produce and disseminate consolidated checklist for monitoring case management outcomes
- Train DHMT, service providers and community workers on the use of the checklist in interpretation, reporting and response
- Compile and produce district monthly reports for action and reporting to central level
- Produce quarterly bulletin on malnutrition case, interventions and case management outcomes.

8.2.1.5 Promotion of specialized nutrition care for PLWHA

8.2.1.5.1 Activities

- Develop guidelines for provision of Nutrition Care and Support in all government sectors and departments based on the government budgetary allocation

- Conduct dissemination meetings with stakeholders
- Communicate with all government sectors through a circular on the guidelines

8.2.1.6 Provision adequate knowledge and skills to service providers to be able to manage and monitor malnutrition in PLWHA.

8.2.1.6.1 Activities

- Review guidelines and accompanying materials for Nutrition Care, Support and Treatment (NCST) of PLWHA.
- Conduct dissemination meeting with stakeholders on the guidelines
- Develop training materials in management of moderate and severe acute malnutrition in Nutrition Care, Support and Treatment (NCST)
- Conduct training of trainers in the guidelines
- Train service providers in the guidelines
- Conduct on-spot supervision
- Provide clinical care for the malnourished clients
- Provide on going support to the service providers through follow up and technical supervisory visits
- Orientation of tutors from pre-service institutions, DHMT and zone officers on the guidelines
- Train DHMT, service providers and community workers on the use of the checklist in interpretation, reporting and response
- Compile and produce district monthly reports for action and reporting to central level
- Produce quarterly bulletin on malnutrition case, interventions and case management outcomes.

8.2.1.7 Strengthening community follow-up and participation in NCST for PLWHA

8.2.1.7.1 Activities

- Develop information kit and standardised check list for follow up of clients
- Conduct training of Community Nutrition Workers, HSAs, CDAs, AEDOs, AEDCs, SWAs, AEHO, home based care providers, CBOs and others
- Linking clients to specific trained community based service providers
- Conduct weekly door to door visits to households with malnourished individuals
- Conduct community nutrition assessment sessions monthly and more frequently where deemed necessary.
- Conduct community sensitisation meetings on prevention, causes, management and existing programmes for management of malnutrition.

8.2.1.7 Provide necessary knowledge and skills to caregivers and clients in nutrition management of HIV related conditions and infections

8.2.1.7.1 Activities

- Conduct periodic review of nutrition education and counselling materials in NCST
- Print and distribute revised materials to all sites
- Orient nutrition counsellors and other services providers at facility and community level
- Conduct nutrition education and counselling sessions for client and their caregivers at facility and community level
- Develop comprehensive nutrition communication strategy
- Implement the strategy using various means of communication
- Develop IEC material for service providers, clients and caregivers based on standardised message
- Disseminate IEC materials at various levels using various channels at both facility and community level

8.2.1.7 Mainstreaming of HIV and AIDS and nutrition interventions.

8.2.1.7.1 Activities

- Document existing programmes for identification of best practices
- Develop guidelines for mainstreaming nutrition HIV and AIDs based on identified best practices
- Orient stakeholders on the guidelines
- Monitor progress in mainstreaming Nutrition, HIV and AIDS

9. Priority Area 9

Strengthen capacities for households and communities to attain adequate nutrition for their families with emphasis on socio-economically deprived persons

Outcome

Improve capacities of the households to attain adequate nutrition for their families and the socio-economically deprived persons

9.1 Objective:

To increase access to economic resources for improving nutrition among family members and the socio-economically deprived persons.

9.1.1 Key Strategies

Facilitate establishment of income generating activities for improving nutrition in households and communities with focus on the socio-economically deprived persons.

9.1.1.1 Activities

- Conduct needs assessment.
- Facilitate formation of IGA groups
- Train groups on IGA management
- Link groups to financial lending institutions
- Provide on going support to the households and communities

- Train communities in financial and home management

10. Priority Area 10

Promotion of Food safety and quality

Poor quality of food poses a threat to Malawians. Consumption of food that is spoiled or contaminated is a public health hazard whose consequences could lead various forms of health disorders and even be fatal. There is, therefore need to ensure that National legislation regulating the quality of food is strengthened and enforced. The National Nutrition Programme will facilitate development of well defined systems that ensure that foods are processed in accordance with high standards in line with global and national standards and tools. Periodic research will be conducted to determine foods that pose the greatest threats to human health. Production and consumption of such foods will be regulated accordingly. The public will be educated on potential health and nutritional hazards from poor quality food.

Expected outcomes

- Improve quality of processed foods.
- Increase consumer awareness of food hazards and erroneous health claims.
- Decrease food-borne illnesses.
- Increase enforcement of food safety and quality legislation.

10.1 Objective

To protect Malawians from health and nutrition hazards that result from consumption of poor quality and contaminated processed foods

10.1.1 Key Strategies

Strengthen enforce of food safety and quality regulations

10.1.1.1 Activities:

- Review existing national legislation and regulations according to the international Sanitary and Phyto-Sanitary (SPS) agreements
- Establish comprehensive processed risk analysis and food-control systems at all levels
- Regulate the development and use of minimum standards for modern biotechnology, Genetically Modified Organisms (GMO's) and Genetically Engineered Seeds and Substances (GESS)
- Facilitate the development and passing of legislation regulating packaging, labeling and advertisement
- Institute and support implementation of comprehensive mandatory standards for all marketed food products, street commercial and imported foods and food aid.
- Strengthen institutional capacity of the Department of Nutrition, HIV and AIDS, Malawi Bureau of Standards (MBS), Consumers Association of Malawi (CAMA) and other public watchdogs on consumer safety to monitor food safety and quality.
- Put in place mechanisms to regulate street food vending and marketing of food supplements
- Conduct periodic monitoring of food industries, food packaging industries and warehouses as well as outlets including those importing or repackaging iodised salt.
- Conduct periodic monitoring of marketing of Infant and young child foods according to the National Code for Marketing of Infant and young child foods.

10.1.2 Increase knowledge among consumers on food safety and quality

10.1.2.1 Activities

- **Develop Education materials on food safety and quality**
- **Orient stakeholders to the materials**

- **Conduct national wide civic education on food safety and quality in collaboration with Ministry of Information and Civic Education, Consumer Association of Malawi and human rights civil societies**

11. Priority Area 11

Research and Development

Research is key to providing input in determining policies and development plans that are based on evidence and relevant to a given situation. Currently, research and development in nutrition is scanty and not properly guided to respond to emerging needs. Consequently, the research agenda might not be in line with the country's needs for adequate response to nutrition problems. The research in nutrition, has therefore, had little influence in directing policy. The little research that has been conducted has mostly been aligned to the health sector, which limits focus to health related aspects of nutrition. The research is also not adequately disseminated and does not, therefore, reach the intended end user of the generated information. There is need to establish a mechanism that will facilitate research in nutrition as a cross cutting issue that is affected by several factors beyond the Health sector. The system should also facilitate wide dissemination of research information for appropriate response to it.

The Department of Nutrition, HIV and AIDS will take the lead in the development of the research agenda in collaboration with the Committee on Nutrition Research. The research agenda will form a basis for all future nutrition studies. The Department will also oversee implementation of subsequent research in collaboration with key research institutions.

Expected Outcomes

- Promote evidence based planning of nutrition programmes, projects and interventions

- Promote research that is responsive to national needs
- Improve collaboration among researches, between researchers and policy makers as well as extension workers for effective utilisation of generated research information.
- Improve documentation and dissemination of research findings and best practices in nutrition.

11.1 Objective

To establish a mechanism for coordinating Nutrition Research

11.1.1 Key Strategies

11.1.1.1 Facilitate coordinated implementation of Nutrition Research that is responsive to national needs

11.1.1.1.1 Activities

- Lobby for establishment of an ethic committee on Nutrition Research as a sub-committee of the National Research Committee to particularly regulate Nutrition Research
- Establish a Committee on research with clear terms of reference and work plan
- Support the Committee's activities
- Document existing research including on-going research by various Institutions and individuals through consultative meetings with experts in nutritional research
- Produce a data for nutrition research and researchers
- Conduct a research needs assessment to identify priority areas in the various sectors
- Conduct a meeting with nutrition stakeholders and key policy makers to build consensus on the identified research priority areas
- Conduct a working session to develop nutrition research agenda and protocols
- Identify potential institutions to conduct research in nutrition

- Disseminate the research agenda and protocols to key researchers
- Mobilise resources to support the research activities

11.1.1.2 Facilitate wide dissemination and utilisation of research information and best practices

11.1.1.2.1 Activities

- Conduct Bi-annual review of on-going research and annual dissemination meeting of completed research
- Continue tracking and catalogueing new research in nutrition
- Produce Bi-annual bulletin on nutrition research
- Encourage publication and dissemination of research findings
- Establish a National Nutrition Information Center in the Department of Nutrition, HIV and AIDS
- Collect and compile copies of research reports, presentations, publications and other information on nutrition for the nutrition resource centre
- Inform the public about the resource centre
- Conduct annual documentation of best practices
- Organise an annual dissemination and feedback meeting with policy makers and key government decision makers for their buy-in.
- Conduct a stakeholders meeting at various levels to operationalise key research findings and identified best practices.
- Facilitate regular feed back from Extension workers and other users of the research information

11.1.1.2 Strengthen collaboration between research and extension service providers in nutrition research.

11.1.1.2.1 Activities:

- Liaise with the Research Institutions on demand driven research based on emerging issues such as bio-fortification

- Build capacity of various research institutions and other researchers in nutrition and food technology research methodologies where necessary
- Facilitate research in the identified areas such as bio-fortification, safety and efficacy of food supplements that carry health and nutrition claims to respond to national demands
- Promote on farm trials on the production and consumption of bio-fortified and other foods and other research linked to improving quality of services.

12. Priority Area 12

Nutrition Management Information Systems

The implementation of the National Nutrition Programme will involve many players, as such adequate information flow and management is important for effective programme response and management. There is therefore, need to establish nutrition management information system that will be linked to all nutrition stakeholders, programmes, projects and interventions. The system will be coordinated by the Department of Nutrition, HIV and AIDS.

Expected Outcome

Improve Nutrition Management Information System (NMIS) at all levels to ensure timely nutrition data flow and reporting for monitoring and planning.

12.1 Objective

To increase availability and access to nutrition information by stakeholders and other users at all levels

12.1.1 Key Strategies

12.1.1.1 Establishment of Nutrition Management Information Systems that is linked to all nutrition programmes, services, projects and interventions

12.1.1.1.1 Activities

- Identify required management information system
- Procure information management system equipment
- Commission a consultant to develop the system
- Train system operators, analysts and managers
- Establish, manage and utilise information system
- Produce and disseminate periodic reports and nutrition bulletin

12.1.1.2 Strengthen nutrition surveillance at facility and community level

12.1.1.2.1 Activities

- Identify key indicators for the National nutrition programmes and services and for localised projects
- Develop a monitoring framework and indicators
- Train stakeholders at national, district and community level in the monitoring framework and indicators, importance of collecting data, data collection methods, management, interpretation and utilisation
- Procure nutrition assessment equipment
- Conduct periodic nutrition assessments among school children in randomly selected schools
- Conduct annual nutrition surveys by constituency every year
- Build capacity on the utilization of the generated data for rational response to nutrition problems at various levels
- Facilitate harmonization of nutrition information and periodic dissemination to service providers, policy makers, decision makers and other relevant users at all levels for evidence-based interventions
- Facilitate feed back meetings and reports at all levels to provide progress and outcome results continuously
- Develop a model for community-based nutrition support and coordination systems based on best practices

- Establish community resource centers
- Disseminate and utilise results for re-planning and re-programming

12.1.1.3 Promotion of growth monitoring of children under five years of age.

12.1.1.3.1 Activities

- Review and produce growth monitoring training materials
- Develop and produce growth monitoring counselling tools and support materials.
- Conduct training for growth monitors
- Procure and distribute growth monitoring equipment and supplies
- Mobilise communities for the implementation of nutrition programmes

- Facilitate monthly growth monitoring sessions that are linked to ENA

- Establish and strengthen community support systems for identification and referral of malnourished children
- Establish and strengthen community support systems for counselling in maternal, infant and young child feeding, feeding of a sick child during and after illness and control and prevention of micronutrients



CHAPTER THREE

THE NATIONAL NUTRITION OPERATING ENVIRONMENT AND STRUCTURE: THE NUTRITION BUSSINESS PLAN

Nutrition is a crosscutting issue in nature that requires a multisectoral approach in programming and implementation. In this respect, Government has created structures and allocated functions to various

stakeholders at different levels from national to the community. Implementation of the National Nutrition Programme will therefore, require participation and involvement of these various structures and institutions in the government sectors, the private sector, the Academic Institutions, bi-lateral and multi-lateral partners, Non-governmental organisations, Civil societies, Local Leaders, Communities and caregivers, each of whom has significant contribution to make to the successful operationalisation of the National Nutrition Policy. Some of the structures are for policy making, direction, guidance and coordination; and the others for implementation. This chapter describes the specific roles and responsibilities for each stakeholder in order to make a meaningful contribution to the national nutrition goals based on their variable mandates, core functions, capacity and comparative advantage. The roles and responsibilities defined in this chapter takes cognisance of the prevailing and potential functions of various nutrition stakeholders.

3.1 The key Stakeholders, their vision, mission, functions, opportunities and possible challenges

3.1.1 The Department of Nutrition, HIV and AIDS

The Department of Nutrition, HIV and AIDS is the rallying point for the greater realisation of the National Nutrition Policy goals and its expected contribution to the Government's human capital development goal, which is a

prerequisite for wealth creation and economic growth, as stipulated in the Malawi Economic Growth and Development Strategy.

3.1.1.1 Organisational Overview for the coordinating unit

The Overall Mandate

The Department of Nutrition, HIV and AIDS is mandated to provide policy direction and guidance in Nutrition. In addition, the Department is responsible for facilitating mainstreaming of nutrition as a cross cutting issue in various government development policies and in the national framework for partners' support to Malawi Government. The Department is further mandated to facilitate Institutional and human capacity development, coordination and creation of operational structures for effective implementation of the National Nutrition Policy and programme. The Department is also responsible for on-going advocacy for nutrition, the production, enactment and enforcement of nutrition legislation, resource mobilisation, consolidation and dissemination of nutrition information and networking on issues of nutrition. Therefore the department has the following vision, mission and functions

3.1.1.3 Vision

Attainment of adequate nutrition for all Malawians by 2015.

3.1.1.4 The Mission Statement

Provide policy direction and guidance on all matters relating to Nutrition in Malawi.

3.1.1.5 Goal

Improved production potential and prolonged productive lives for all Malawians through adequate prevention, control and management of nutrition disorders among various population groups in the country

3.1.1.6 Core Functions

The Vision of the Department spells out the desired future state of Malawi. This will be implemented and realized through the following strategic functions:

- 1) Spearhead and oversee formulation and periodic review of a comprehensive National Nutrition Policy, Programme and implementation strategies
- 2) Provide policy and technical guidance in nutrition
- 3) Advocate and lobby for repositioning of Nutrition in National development agenda
- 4) Advocate and lobby for Business coalition for nutrition
- 5) Mobilise resources for implementation of the National Nutrition Policy and Programme through establishment and implementation of nutrition swaps
- 6) Provide policy and technical guidance in the formulation and periodic review of sectoral policies to facilitate sectoral operationalisation of the National Nutrition Policy and Programme

- 7) Strengthen the institutional and human capacity of the Department of Nutrition, sectors and stakeholders for effective implementation of nutrition policies and programmes through development of infrastructure for training and nutrition operations or services and development of career structures in government sectors
- 8) Coordinate the implementation of the policy and programme by various stakeholders according to government priorities
- 9) Monitor and evaluate the implementation of government policies on nutrition for rational and evidence based response to nutrition
- 10) Facilitate generation, documentation and dissemination of nutrition information through a well defined national research agenda, periodic dissemination meetings, bulletins, resource centre, reports, on-going networking and a national Nutrition Management Information system.

3.1.2 Operating Structures and functions of various stakeholders

KEY GOVERNMENT SECTORS

MINISTRY OF HEALTH

Mission

To prevent, control and treat malnutrition through integration of nutrition interventions in the curative and preventive health care delivery system.

Core functions in Nutrition

The Ministry will be responsible for:

- Identification, control, prevention, diagnosis and treatment of malnutrition and other nutrition related disorders

- Directing and facilitating standardized implementation of nutrition services within the health sector and relevant stakeholders through policy development and monitoring
- Capacity building and development for nutrition in the health sector
- Advocacy
- Resource mobilization
- Promotion and coordination of relevant nutrition interventions and programs within the health sector.
- Coordinate research, documentation and dissemination of nutrition information and best practices within the health sector.
- Facilitation of adoption appropriate nutrition practices through nutrition education and counselling through the health delivery system
- Conduct growth monitoring and nutrition assessment
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

Key priority areas for nutrition in the health sector

The health sector will focus on the following priority areas based on their mission and core functions:

1. **Prevention of malnutrition and other nutrition related disorders through:**
 - Promotion of optimal Infant and young child feeding (
 - Control of micronutrient deficiency disorders
 - Control of dietary related Non-communicable diseases
 - Promotion of adequate maternal nutrition
 - Promotion of adequate nutrition for PLWHA, the chronically ill and those in emergency

- Growth monitoring and promotion
- Prevention and control of diseases

2. Treatment of malnutrition and other nutrition related disorders

- Treatment of moderate and severe malnutrition in under five children, adolescents, adults, PLWHA and other vulnerable groups as determined from time to time
 - Treatment of nutrition related disorders and diseases
 - Treatment of dietary related non-communicable diseases
3. Policy development and dissemination in the health sector
 4. Capacity building and development
 5. Resource mobilization
 6. Advocacy and nutrition communication for behaviour change
 7. Partnership development for nutrition implementation within the Health SWAP framework
 8. Operational Research and development with emphasis on treatment regimes and clinical efficacy of various food supplements that come with health claims
 9. Food safety, quality control and hygiene
 10. Nutrition surveillance within the health system
 11. Monitoring, evaluation and information systems

Existing challenges

- High cost of supplies for prevention and management of nutrition disorders. Most supplies are procured through donor support
- Inadequate Human resource. The Ministry has few technically competent people at all levels. Nutrition services provided through

other cadres who already have their core functions and heavy work load

- Inadequate financial resource as most activities depend on external support
- Inadequate Infrastructure – NRUs and storage facilities.
- Inadequate community based service providers for community based services and follow-up of clients for contued care and support
- Limited understanding of nutrition at all levels. Decision and policy makers, development partners and other stakeholders, caregivers and communities have inadequate understanding and appreciation of the maginitude of the nutrition problem and its long-term adverse effect on human capital development and economic growth in the country.
- Limited collaboration between government and private sector, line ministries, academic institutions

MINISTRY OF AGRICULTURE

The Food and Nutrition Unit in the Ministry of Agriculture is under the Department of Agriculture Extension Services

whose mandate is to provide quality agricultural extension services to enhance adoption of improved technologies for all gender categories and vulnerable groups in order to improve and sustain agricultural productivity for improved food, nutrition, income security that contributes to socio-economic growth.

Mission

The Mission of the DAES is “To provide demand driven agricultural extension services in partnership with CIVIC, NGO, Private and Farmer Organizations and promote equalization and coordination in service provision in order to achieve food, nutrition and income security at household level thereby reducing poverty”

Core functions

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

Key priority areas

The Agriculture sector will therefore focus on the following areas:

Promotion of adequate nutrition among Malawians through:

- Provision of nutrition education for increased adoption of diversified diets for sustainable nutrition security.
- Promotion of appropriate food choices and combinations from the six food groups based on the multi mix principle and appropriate meal planning
- Developing and disseminating recipes of high nutritional value foods e.g. indigenous vegetables, QPM

- Promotion of recommended food processing, storage and preparation technologies for effective utilization of food resources
- Capacity building for extension workers in the prevention and control of nutrition disorders, food utilization, budgeting, storage, processing and preparation
- Coordinate development and dissemination of technologies that will promote improved food utilization, processing, preparation and storage
- Conducting World Food Day commemoration
- Enhancement of knowledge and skills among communities on better food processing, preservation and storage technologies for effective utilization of food resources for all gender categories and vulnerable groups
- Strengthen behaviour change in communication to facilitate appropriate nutrition practices (Dietary diversification, food processing, preservation and storage)
- Conducting national and localized campaigns on prevention of malnutrition of malnutrition
- Coordinating integration of Nutrition and HIV in the Agriculture sector
- Resource mobilization for nutrition in the Agriculture sector through lobbying with government for real increase in budgetary support for nutrition in the Agriculture sector and among donors
- Advocating for repositioning of nutrition in the agriculture sector
- Advocate for increased human capacity and support for nutrition in the Ministry at all levels
- Partnership development for nutrition implementation within the Agriculture sector
- Strengthen operational research in appropriate technologies in nutrition within the agriculture sector

- Linking nutrition research to extension services

Existing challenges

- In adequate funds for carrying out the planned activities
- Shortage of staff as evidenced by the many vacant posts currently, the department has only 9 qualified Food and Nutrition officers in the 28 districts.
- Limited opportunities for further training to Master level.

MINISTRY OF WOMEN AND CHILDREN AFFAIRS

The Nutrition Unit in the Ministry of Women and Child Affairs will have the following Core functions:

Core functions

- Capacity build of community-based service providers in food and home management,
- Build capacity of households to have adequate access to food in terms of quantity, diversity and quality
- Build capacity of households and communities to adequately care for orphans and other vulnerable groups
- Promote dietary diversification and food utilization at community level.
- Community nutrition assessment and operational research for informed nutrition intervention.

Key Priority areas

The core functions will be performed through the following key priority areas

- Advocate for more resource allocation to nutrition programmes and for increased human resources in the Ministry
- Conduct food and home management, child and maternal nutrition care courses for service providers, caregivers and communities .
- Facilitate economic empowerment programmes to increase household and community access to food resources.
- Facilitate community mobilisation for nutrition work.
- Conduct nutrition education and demonstrations at community level.
- Participate in the training of community based nutrition workers
- Enhance caregivers' skills in appropriate care for orphans and other vulnerable groups at community level and in child care centres
- Monitor infant and young child feeding practices in orphan and other child care centres
- Facilitate development and dissemination of food recipes that promote dietary diversification
- Conduct periodic community operational research
- Facilitate community level nutrition assessment and surveillance
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

Existing Challenges

- Inadequate funds
- Inadequate human resources
- Inadequate physical resources e.g vehicles, computers, printers etc
- Limited opportunities for further training i.,e short courses and postgraduate Training
- Lack of knowledge of nutrition issues among some decision makers

MINISTRY OF EDUCATION SCIENCE AND TECHNOLOGY

Mission of the Nutrition Unit

Core functions

Key Priority Areas

- Regular curriculum review to incorporate nutrition at all levels
- Scale up the school feeding programme to all public schools in the country
- Implement school health and nutrition programme
- Nutrition education within the Sector
- Teaching of nutrition at all levels
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

MINISTRY OF INDUSTRY AND TRADE

The Ministry has a mandate to coordinate fortification of centrally processed foods in the country, hence it has the following core functions

- Strengthen collaboration and negotiation with the private sector for fortification of commonly consumed centrally processed food in the country with selected micronutrients
- Ensure industrial compliance to national and international standards in food processing and fortification
- Facilitate effective partnership and participation by the private sector in nutrition promotion
- Regulatory monitoring of imports of fortificants and fortified foods at factory level and entry points

The Ministry will realise these core functions through focusing in the following key areas:

Priority Areas:

- Lobby for mandatory fortification of commonly consumed centrally processed food such as sugar. Edible oil, wheat flour and complementary foods
- Provide food standards
- Certify and control marketed food quality

- Updating and harmonization of standards
- Import licensing for food products such as fortified foods, Infant and young child foods
- Inspection and enforcement of regulations related food manufacturing and trading
- Monitoring of production, importation, packaging and marketing of fortified foods at all levels
- Coordination of food fortification programme
- Facilitate food fortification at industrial level
- Regulate importation, packaging and marketing of iodised salt
- Conduct social marketing of fortified foods
- Production of consolidated reports on fortification and iodized salt monitoring
- Resource mobilizations
- Organizing stakeholder meetings
- Product quality testing
- Monitor and control food weighing equipment
- Regulate food manufacturing organisations
- Strengthen partnerships with the private sector through continued engagement, Information sharing on emerging issues through feedback, joint planning and review meetings
- Facilitate training of technicians and food technologist.
- Facilitate and regulate importation of fortificants
- Formation of a nutrition ethics committee to help regulate processed foods and food supplements
- Research and development of nutrition products and intervention strategies

- Strengthen collaboration with the private sector to fulfil their social responsibility in nutrition
- Capacity building of the MBS and other industrial support institutions i.e. training and procurement of equipment
- Lobbying for the passing of the food law
- Strengthening the food processors groups
- Facilitating the industrial implementation of fortification through the rebate programme
- Design, launch and publicize fortification logo
- Production of IEC materials and use of the fortification logo
- Conducting consumer education Training of quality control personnel
- Regular testing of finished products
- Carrying out a baseline study
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

Existing Challenges

- Weak financial, technical and human resources among stakeholders in implementation, management and monitoring
- High illiteracy among the general population
- Absence of food law makes fortification enforcement difficult
- Few centrally processed foods to be fortified
- Some producers unwilling to fortify their products
- Porous borders which lets in unfortified foods through illegal routes
- Lack of baseline for impact assessment
- Poor coordination of programmes and activities

OTHER GOVERNMENT DEPARTMENTS

MINISTRY OF FOREIGN AFFAIRS

- Promote Malawi's nutrition programme internationally
- Sell nutrition programme to cooperating partners
- Implement nutrition workplace programme
- Advocate for greater realisation of Malawi's nutritional needs to the international community
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

MINISTRY OF TRANSPORT AND PUBLIC WORKS

- Mainstream nutrition in all transport and public works activities
- Conduct nutrition workplace programmes
- Monitor and evaluate transport and public works nutrition programmes
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

MALAWI BUREAU OF STANDARDS

- Provide food standards
- Regulate food manufacturing organisations
- Monitor and maintain food standards
- Certify and control marketed food quality
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

MINISTRY OF TOURISM, WILDLIFE AND CULTURE

- Implement, monitor and evaluate nutrition activities at the work place
- Incorporate nutrition services in the outreach programmes
- Conduct nutrition research on needs of the tourism industry
- Facilitate elimination of harmful food taboos and habits that limit nutritious food consumption
- Adopt and disseminate PLWA friendly technologies
- Encourage small scale wildlife reserves for a nutritious diet
- Submit quarterly reports to the Department of Nutrition, HIV and AIDS

MINISTRY OF ECONOMIC PLANNING AND DEVELOPMENT

- Consolidate nutrition indicators in MGDS at national level
- Incorporate nutrition in PSIP
- Facilitate nutrition vulnerability assessment
- Monitor and evaluate nutrition
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

MINISTRY OF FINANCE

- Adequate budgetary allocation for nutrition work
- Implement work place nutrition programme.
- Create a nutrition fund
- Mobilise and allocate resources for nutrition
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

DEPARTMENT OF HUMAN RESOURCE MANAGEMENT AND DEVELOPMENT

- Facilitate the formulation and implementation of nutrition work place policy and strategy for Government Ministries and Departments
- Provide standards for work place nutrition programme
- Facilitate the monitoring and evaluation of nutrition work place programme
- Approve nutrition implementation structures
- Facilitate nutrition structure filling
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

THE DEPARTMENT OF STATUTORY CORPORATIONS

- Liaise with the Department of Nutrition, HIV and AIDS on nutrition standards relevant to public enterprises involved in food production, processing, marketing and distribution

- Utilise checklists for ensuring the adherence to the standards in public enterprises involved in food production, processing, marketing and distribution
- Implement nutrition at the workplace within the sector
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

MINISTRY OF ENERGY MINES AND ENVIRONMENTAL AFFAIRS

- Facilitate harvesting of foods from the natural resources
- Promote production of indigenous fruits and vegetables
- Promote beekeeping
- Promote new and renewable sources of energy for a diversified and nutritious diet preparation
- Facilitate women's participation in mining for improved access to nutritious diets
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

MINISTRY OF DEFENCE

- Standardise ration provision to officers and soldiers in service
- Provide nutrition therapy to officers and soldiers
- Facilitate provision of nutrition education and demonstration to officers, soldiers and spouses
- Establish nutrition centres within operational areas
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

MINISTRY OF LOCAL GOVERNMENT AND RURAL DEVELOPMENT (DISTRICT ASSEMBLIES)

- Train communities in improved food utilisation and dietary diversification
- Provide nutrition support to orphans and other vulnerable children at community level

- Encourage improved food utilisation and dietary diversification at household level
- Train communities in improved food processing and storage technologies
- Encourage adoption of improved food processing and storage technologies
- Intensify dietary diversification through promotion of the consumption of a variety of foods
- Demonstrate utilisation of food preparation recipes
- Conduct community nutrition assessment for informed nutrition interventions
- Conduct community operational research
- Regulate food and meal vending
- Facilitate acquisition of safe and appropriate food vending equipment especially for mobile vendors
- Conduct community home management, child and maternal nutrition care courses
- Facilitate economic empowerment programmes to increase household and community access to food resources
- Mobilise communities for nutrition work
- Conduct nutrition education and demonstrations
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

MINISTRY OF LANDS HOUSING AND SURVEYS

- Implement nutrition activities at the work place
- Allocate arable land for nutritious food production
- Facilitate monitoring and evaluation of the nutrition programme
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

MINISTRY OF JUSTICE AND CONSTITUTIONAL AFFAIRS

- Draft nutrition Bill
- Present legislation to Parliament

- Implement work place nutrition activities
- Monitor and evaluate the nutrition programme
- Backstop enforcement of nutrition legislation
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

MINISTRY OF INFORMATION AND CIVIC EDUCATION

- Implement and monitor work place nutrition activities
- Produce documentaries and other information delivery materials to disseminate nutrition information, education and techniques using multimedia channels
- Conduct civic education on nutrition throughout the country
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

MINISTRY OF LABOUR AND SOCIAL DEVELOPMENT

- Facilitate workplace nutrition activities
- Provide guidance and direction to unions on workplace nutrition
- Facilitate provision of nutrition services in the estates
- Monitor and evaluate workplace nutrition programmes
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

MINISTRY OF YOUTH AND SPORTS

- Implement, monitor and evaluate work place nutrition activities
- Intensify nutrition activities for the youth
- Provide peer nutrition education and demonstration to the youth
- Promote dietary diversification among the youth
- Promote food habits that strengthen adequate nutrition for the youth
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

MINISTRY OF IRRIGATION AND WATER DEVELOPMENT

- Implement, monitor and evaluate work place nutrition activities
- Provide small scale irrigation services for production of nutritious foods
- Promote water harvesting technologies for safe water availability at the household
- Provide access and promote utilisation of portable water at household level
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

MINISTRY OF PERSONS WITH DISABILITIES AND THE ELDERLY

- Implement, monitor and evaluate work place nutrition activities
- Facilitate implementation of nutrition programmes for persons with disabilities and the elderly
- Provide peer nutrition education and demonstration for persons with disabilities and the elderly
- Promote dietary diversification among persons with disabilities and the elderly
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

MINISTRY OF HOME AFFAIRS AND INTERNAL SECURITY

- Implement, monitor and evaluate work place nutrition activities
- Provide nutrition therapy to officers
- Facilitate provision of nutrition education and demonstration to officers
- Establish nutrition centres within operational area
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

DEVELOPMENT PARTNERS

- Align their programmes to MGDS and national nutrition policy as a prerequisite to the achievement of MDGs

- Provide support for the implementation of National Nutrition Policy and Programme
- Support the development of a nutrition SWAp
- Support capacity building for nutrition, dietetics and research; coordination and service delivery
- Support the development of information management systems
- Subscribe to Government and Development Partners Committee on nutrition
- Support and participate in national nutrition events
- Report back on their nutrition mandate to their head quarters using national data.
- Submit quarterly nutrition reports to the OPC through the Department of Nutrition, HIV and AIDS

TRAINING INSTITUTIONS

BUNDA COLLEGE OF AGRICULTURE

- Training of nutritionists and dieticians at undergraduate and postgraduate levels
- Research in food and nutrition including chemical and nutrient analysis of foods
- Specialised training in nutrition, aquaculture, food processing and livestock production
- Continuous curriculum review to respond to current needs
- Independent nutrition monitoring and evaluation
- In-service training in nutrition for various institutions
- Mainstreaming nutrition in all the courses at the work place
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

KAMUZU COLLEGE OF NURSING

- Conduct clinical trials in Nutrition
- Training in public health with a bias in Nutrition
- Incorporate nutrition in the curriculum
- Conduct nutrition education and demonstrations for students

- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

COLLEGE OF MEDICINE

- Conduct clinical trials in Nutrition
- Training in public health with a bias in Nutrition
- Incorporate nutrition in the curriculum
- Conduct nutrition education and demonstration for students.
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

THE PRIVATE SECTOR

- Adhere to standards produce, process and sale high nutritive value foods
- Maintain standards in the production, processing and marketing of high nutritive value foods
- Establish high value nutritive food chain outlets
- Supply and maintain stocks for high value foods to outlets
- Monitor and evaluate the nutritious food chain lines
- Support other nutrition interventions such as supporting dissemination of key nutrition information through various media channels
- Support and participate in the Bussiness Coalition for Nutrition activities
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS

NGOS, CIVIL SOCIETY, FAITH BASED ORGANISATIONS AND COMMUNITY BASED ORGANISATIONS

- Register their organisations dealing with nutrition to the District Assembly and the Department of Nutrition, HIV and AIDS
- Complement Government efforts in the implementation of the national nutrition policy and programme

- Align their programmes to the national nutrition policy and programme
- Implement nutrition interventions in collaboration with the relevant sectors especially focusing on communities
- Provide technical support where necessary
- Participate in civic education of the public in nutrition
- Lobby for nutrition support among donors and with government
- Mobilise communities for nutrition services and programmes
- Monitor and evaluate their nutrition activities
- Submit quarterly nutrition reports to the Department of Nutrition, HIV and AIDS