THE NUTRITION LANDSCAPE IN MALAWI
Past, Present and Future

Presented by Zione Kalumikiza
Public Discussion on Political Party Manifestos
30th April 2019, Capital Hotel, Lilongwe
We share a **common vision** ....
whose success depends on a well nourished population
Nutrition is at the heart of the SDGs

- **01**: Being poor limits the ability of individuals to access adequate food
- **02**: Agriculture and food security are cornerstones of nutrition
- **03**: Up to 45% of deaths in children under 5 are caused by undernutrition
- **04**: Learning and focusing in school is difficult without a sufficient diet
- **05**: When women control the family income, children’s health and nutrition improve at a greater rate
- **06**: Access to safe water and sanitation is an absolute prerequisite for nutrition
- **07**: High levels of malnutrition in some countries may result in an 11% loss to GDP
- **08**: Tackling resource use and degradation is key for sharing resources and improving access to quality food
- **09**: Climate change may reduce food production and cause water scarcity
- **10**: War and conflict are major underlying factors of nutrition insecurity
- **11**: Aid allocated to nutrition has high returns a $1 investment in nutrition has demonstrated a $16 return in economic growth
- **12**: Soil degradation threaten our ability to grow food

Achieving the SDGs
BASICS & TRENDS
MALNUTRITION
Understanding (mal)nutrition: the past

Diagram:
- Inadequate dietary intake
- Inadequate access to food
- Inadequate care for children and women
- Insufficient health services & unhealthy environment
- Inadequate education

Manifestation:
- Immediate Causes
- Underlying Causes
- Basic Causes

Resources and Control:
- Human, economic and organizational resources
- Political and Ideological Factors
- Economic Structure
- Potential resources
Understanding (mal)nutrition: the past
Malnutrition today

- Undernutrition
- Micronutrient deficiencies (Hidden Hunger)
- Overnutrition and related problems
The state of nutrition in Malawi

Notable progress has been made....
Trends: Under-five nutritional status

Percent of children under 5

- Stunted
- Underweight
- Wasted

<table>
<thead>
<tr>
<th>Year</th>
<th>Stunted</th>
<th>Underweight</th>
<th>Wasted</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000 DHS</td>
<td>55</td>
<td>20</td>
<td>7</td>
</tr>
<tr>
<td>2004 DHS</td>
<td>53</td>
<td>17</td>
<td>6</td>
</tr>
<tr>
<td>2010 DHS</td>
<td>47</td>
<td>13</td>
<td>4</td>
</tr>
<tr>
<td>2015-16 DHS</td>
<td>37</td>
<td>12</td>
<td>3</td>
</tr>
</tbody>
</table>
Trends: Hidden hunger

<table>
<thead>
<tr>
<th>Condition</th>
<th>2001</th>
<th>2009</th>
<th>2015/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anaemia</td>
<td>80</td>
<td>55</td>
<td>28</td>
</tr>
<tr>
<td>Iron deficiency</td>
<td>62</td>
<td>51</td>
<td>22</td>
</tr>
<tr>
<td>Iron deficiency anaemia</td>
<td>59</td>
<td>31</td>
<td>9</td>
</tr>
<tr>
<td>Vitamin A deficiency</td>
<td>59</td>
<td>22</td>
<td>4</td>
</tr>
<tr>
<td>Salt with &gt;15 ppm Cl</td>
<td>47</td>
<td>83</td>
<td></td>
</tr>
</tbody>
</table>

Sources: GoM (2003), NSO (2011, 2017)
Trends in Childhood Mortality

Deaths per 1,000 live births for the five-year period before the survey

Under-5 mortality

Infant mortality

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Infant</td>
<td>135</td>
<td>104</td>
<td>76</td>
<td>66</td>
<td>64</td>
</tr>
<tr>
<td>Under-5</td>
<td>234</td>
<td>189</td>
<td>133</td>
<td>112</td>
<td>64</td>
</tr>
</tbody>
</table>

1992 DHS
2000 DHS
2004 DHS
2010 DHS
2015-16 DHS
Success stories: chronic malnutrition

Burden of stunting in Malawi
Success stories: Vitamin A deficiency

<table>
<thead>
<tr>
<th>Group</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preschoolers (6-59 mo)</td>
<td>22.0%</td>
</tr>
<tr>
<td>School-aged (5-15 y)</td>
<td>8.5%</td>
</tr>
<tr>
<td>Women (15-49 y)</td>
<td>1.6%</td>
</tr>
<tr>
<td>Men (20-55 y)</td>
<td>0.1%</td>
</tr>
</tbody>
</table>

Key data for Malawi

Existing rates of: Wasting: 2.7%  Stunting: 37.1%  Proportion of population underweight: 11.7%

Source: Government of Malawi (DHS, 2015-16)
Some persisting & Emerging Issues
## Feeding Practices

Feeding practices are frequent but poor, with declining EBF rates.

### Minimum Meal Frequency
- Breastfed: 31%
- Non-breastfed: 19%
- All children 6-23 months: 29%

### Minimum Dietary Diversity
- Breastfed: 24%
- Non-breastfed: 30%
- All children 6-23 months: 25%

### Minimum Acceptable Diet
- Breastfed: 9%
- Non-breastfed: 4%
- All children 6-23 months: 8%

*Sources: NSO (2017)*
Over-nutrition on the rise, increasing risk for NCDs

Data sourced from 2000, 2004, 2010 & 2015-16 MDHS reports

<table>
<thead>
<tr>
<th>Year</th>
<th>Overweight</th>
<th>Obesity</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>9.8</td>
<td>2.0</td>
</tr>
<tr>
<td>2004</td>
<td>11.2</td>
<td>2.4</td>
</tr>
<tr>
<td>2010</td>
<td>13.1</td>
<td>4.0</td>
</tr>
<tr>
<td>2015-16</td>
<td>15.1</td>
<td>5.6</td>
</tr>
</tbody>
</table>
NCDs no longer a problem of the affluent

“The notion that NCDs and their risk factors are problems of urban people is a misconception” (Msaymboza et. al, 2011)

“Our findings show that hypertension, diabetes, and overweight and obesity are all highly prevalent in urban and rural Malawian adults from a young age, despite it being a very low-income country affected by under-nutrition and food insecurity” (Price et. al, 2018)
6 in 10 are Zinc Deficient

- Preschoolers (6-59 mo): 60%
- School-aged (5-15 y): 60%
- Women (15-49 y): 63%
- Men (20-55 y): 66%

Source: NSO (2017)
Climate change taking its toll....posing a threat to food security & available investments
THE COST

MALNUTRITION
The cost of malnutrition (1/3)

- Poor **immunity** to infections
- Elevated disease **risk**

**Underweight, overweight & mortality**
The cost of malnutrition (2/3)

*Stagnant national development*

- Poor nutrition in early life results in:
  - Low *cognitive* ability
  - Low *education* attainment
  - Increased health care *costs*
  - Low *productivity*
  - High *dependency* on public resources
The cost of malnutrition (3/3)

• In 2012 alone, USD 597 million was lost due to health, education, productivity losses

• Equivalent to 10.3% of GDP
PAST AND FUTURE ACTIONS
ADVANCING NUTRITION
Best Practices to date……

• Coordination & collaborations
  – DNHA
  – Other support platforms

• Focus on high impact interventions
  – Scaling Up Nutrition

• Policy environment
  – NMSNP, MGDS III, Ag-Nut Strategy

• Investments
Critical issues - coordination
Critical issues - Investment

• Some improvements but still huge financing gaps

• The majority of interventions (over 80%) of those indicated in MGDS III were not been included in the 2018/19 budget
  – For the few interventions included, the resource allocation was insufficient and much lower than the earmarked spending target for the 2018/19 FY as per MGDS III.
COHA study recommendations

- Set **ambitious targets** to reduce under-nutrition
- **Scale up** high impact nutrition **interventions**
- Communication and advocacy
- Monitoring and Evaluation
- Coordination
Other key issues......thinking UNUSUAL

Think beyond:

• Food – rights & accountability
• Plate – farm to plate
• Short term – long term, sustainable, lifecycle
• One sector – leave no one behind
• Communities – systems (education, work places)
• Usual ways – ICT, Indigenous knowledge
Moving beyond willingness

How will you keep nutrition up the agenda?