

COUNTRY PROFILE ON NUTRITION 01/2021

MALAWI



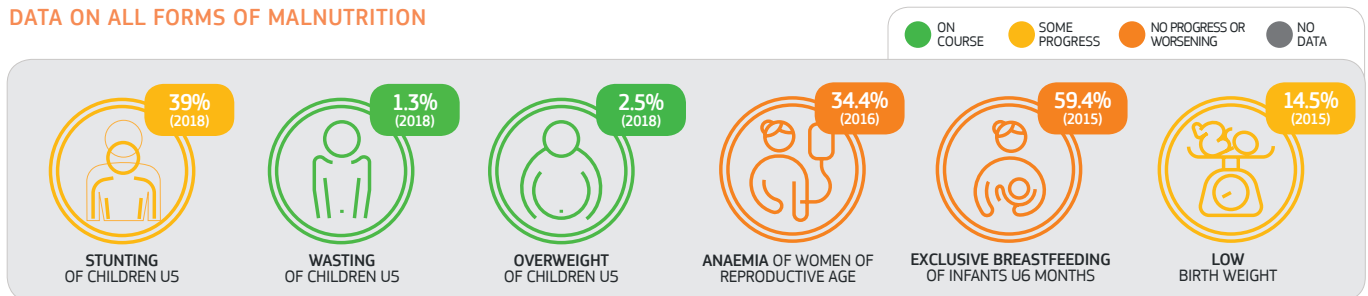
Nutrition situation in Malawi

AT A GLANCE

Malawi has a relatively small but young population of 19 million¹, with over 80% under 35 years old. Despite strong annual economic growth since 2006, Malawi still has a very high – and persistent – prevalence of stunting amongst children under five. Nearly 60% of the working-age population were stunted as children. It is estimated that child undernutrition led to economic losses equivalent to 10.3% of the country's GDP in 2012². Very high rates of rural poverty³, persistent prevalence of HIV/AIDS, the current COVID-19 pandemic, insufficient dietary diversity⁴ and gender inequality are the main challenges.

In Malawi, female farmers produce 80% of food for household consumption, and over 70% of farmers are women, yet their access to land tenure, training and finance remains limited. Malawian diets in rural areas are typically high in grain and sugar. Malawi's dependence on rain-fed agriculture and its policy focus on maize production has made the country very vulnerable to food insecurity and climate change. Malawi has a Gender Inequality Index value of 0.565 and is ranked at 142 of 162 countries in the 2019 index.

DATA ON ALL FORMS OF MALNUTRITION



NUTRITION GOVERNANCE

- Malawi was one of the first countries to commit to the Scaling Up Nutrition (SUN) movement in 2011 and its mechanism of multi-sectoral coordination for nutrition was seen as a model example.
- In 2015-2016, the Ministry of Health (MoH) took nutrition governance back from the Office of the President and Cabinet (OPC) with the transfer of the Department for Nutrition, HIV and AIDS (DNHA) from OPC to MoH.
- A new and comprehensive national multi-sector Nutrition Policy 2018-2022 has been approved by the government and is under implementation.
- A national nutrition committee (NNC) is chaired by the permanent secretary of the Ministry of Health, with the DNHA functioning as secretariat. The nutrition committee includes technical specialists and development partners. It is replicated at district level across the country, and the committees contribute to district development plans.
- A donor group for nutrition security (including European partners), which the EU Delegation to Malawi chairs, and a UN Forum on Nutrition are actively engaged in sharing information on programme research, planning and reviews.
- Mandatory salt iodisation was introduced in 1998 and the fortification of oil and maize and wheat flour were mandated between 2012 and 2015. As of 2018, approximately 50% of these food products were fortified based on the national standards⁵.

Example of EU support

'Afikepo' ('let the children develop to their full potential' in Chichewa language) is a joint effort between the Government of Malawi, the EU and other development partners to address undernutrition through a multi-sectoral, integrated approach. It follows a holistic 'four pillars' approach adopted by the NNC, including:

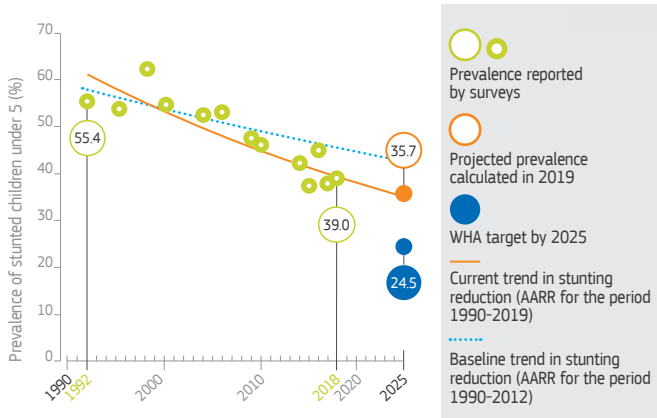
- 1) nutrition-sensitive agriculture and improved maternal, infant and young child feeding and care practices;
- 2) primary health care, therapeutic care, support and treatment;
- 3) Integration of behavioural change and communication among communities, learners, professional and frontline workers through nutrition education;
- 4) governance, capacity-development, research, fortification, monitoring and evaluation.

The EU is contributing EUR 86 million over six years to address pillars 1, 3 and 4 to support interventions in 14 districts. In the spirit of Team Europe, Germany contributes to pillar 3. The programme monitors not only the impact on nutrition outcomes, but also the individual dietary diversity of women, adolescent girls and children. 'Afikepo' has close links to the EU-financed KULIMA programme, which also mainstreams gender and builds the capacity of smallholder farmers; and the SUN initiative to strengthen nutrition governance at district level.

MALAWI

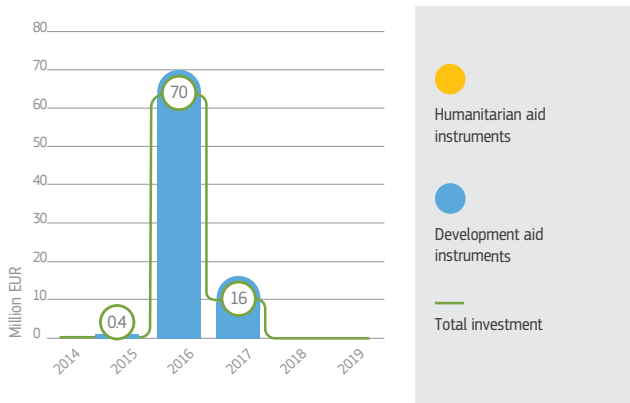
Progress on the two EU pledges for nutrition

TREND, PROJECTION AND TARGETS IN THE PREVALENCE AND NUMBER OF CHILDREN (U5) STUNTED



The national nutrition policy 2018-2022 approved by the government includes the commitment to reduce stunting amongst children under five to 30% by 2022. Malawi has experienced a general decline in the prevalence of stunting since 1990 but, like many countries in the region, the number of children stunted has increased due to population growth. The rate in the decline of the number of children stunted accelerated from 0.91% in 2012 to 1.63% in 2019. If this trend is maintained, some 1.2 million children are expected to be stunted in 2025, marginally more than in 2020. It is also unlikely that the national target will be met in 2022.

EU FINANCIAL COMMITMENTS TO NUTRITION BETWEEN 2014 AND 2019 – A TOTAL OF EUR 86.4 MILLION



The most significant nutrition investment has been through 'Afikepo' (featured in the example above) to which the EU contributed EUR 70 million in 2016 (with additional funding of EUR 16 million made available in 2020).

The EU also addresses malnutrition through its support to a national social support programme, investing EUR 13 million in nutrition from a total of EUR 50 million, and through two regional funding facilities:

- on resilience (PROACT) to address the effects of El Niño-related extreme weather events; and
- on inclusive and sustainable value chains and food fortification.

¹ UNDESA World Population Prospects 2019 population estimate 2020.

² The Cost of Hunger in Malawi: the social and economic impact of child undernutrition in Malawi (May 2013) AU-NEPAD, UNECA, Government of Malawi, WFP.

³ In 2012, 82.3% of the rural population of Malawi lived on less than \$2 per day (World Development Indicators, World Bank).

⁴ Only 8% of Malawian children aged 6-23 months receive a minimum acceptable diet (MAD).

⁵ https://fortificationdata.org/country-fortification-dashboard/?alpha3_code=MW&lang=en