# Working Together for Our Future: What Zambia's Government Sectors Can Do to Improve Nutrition

For more information, contact:

National Food and Nutrition Commission Plot No. 7090, Lumumba Road, Lusaka, Zambia Telephone: +260 211 256788 Fax: +260 211 234456 Email: info@nfnc.org.zm Website: www.nfnc.org.zm

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#### **Investment in Nutrition Is Needed in Zambia**

Today in Zambia, four out of 10 children are malnourished despite continued investment by the government and donors.

## Why does this matter?

- Malnutrition is preventing Zambia from reaching its development goals.¹ Because economic productivity depends on the overall health of a population, a well-nourished and healthy society is a necessity.
- Malnutrition is the underlying cause of up to 45 percent of child deaths in Zambia.<sup>2,3</sup>
- Malnourished children are more likely to have repeated illnesses and infections.<sup>2</sup> By 2O26, if we do not invest in efforts to improve nutrition, more than 156,000 infants and children will die.<sup>3</sup>
- Malnutrition leads to reduced immunity, impairing an individual's ability to fight and recover from illness. This is particularly important in Zambia, where 13 percent of adults (15 percent of women and 11 percent of men) are HIV positive.<sup>1</sup>
- Malnutrition in childhood impairs physical growth and cognitive development, decreasing IQ points and undermining human potential. Because of this, malnourished children become adults who earn less than their well-nourished and bettereducated peers.<sup>2,3,4</sup>
- Malnourished children perform worse in school and are more likely to repeat grades and drop out of school than well-nourished children.<sup>45</sup> By 2O26, if there is no change in stunting, children will lose 4O.5 million equivalent school years of learning from stunting alone.<sup>3</sup>
- Malnutrition is hurting Zambia's economic progress. If there is no improvement in nutrition, the country will lose more than 180.768 billion Zambian kwacha (ZMW) or US\$18.315 billion in economic productivity by 2026.3

But malnutrition is preventable and treatable. The children of Zambia can be free of malnutrition if we act now.

#### What can sectors do?

To improve nutrition, sectors must develop workplans, allocate sufficient budgets, and carefully monitor plans for nutrition-specific services and interventions that address underlying causes of malnutrition, such as food insecurity, poor access to health services, women's disempowerment, poor access to primary and secondary education, and poor water and sanitation services. At the same time, it is crucial to enact and enforce legislation and policies that support nutrition.

#### **Health Sector**

Not only are malnourished children at increased risk of illness and dying, but children born to adolescent or malnourished mothers are also more likely to be malnourished, creating an intergenerational cycle of malnutrition. In Zambia, six out of 10 adolescent girls have started childbearing by age 19. Children who are born less than 2 years after their older siblings are also more likely to be malnourished. To improve nutrition, the health sector can:

- Provide and promote quality services to prevent and treat malnutrition, especially for adolescent girls, women of reproductive age, and children under 5.
- Provide and promote quality family planning services; antenatal, postpartum and newborn care; immunizations; and management of childhood illnesses and infectious diseases, especially for adolescent girls and their children.
- Promote improved family planning and infant and young child feeding behaviours, male involvement in family health services, and dietary diversity.
- Support community-based efforts to delay early marriage and pregnancy.

Sources: ¹ Zambia Demographic and Health Survey 2013–14; ² Lancet Nutrition Series 2013; ³ Reducing Malnutrition in Zambia: Estimates to Support Nutrition Advocacy–Zambia Nutrition PROFILES 2017; ⁴ Grantham-McGregor S et al. 1999 'Effects of Health and Nutrition on Cognitive and Behavioural Development in Children in the First Three Years of Life'. Food and Nutrition Bulletin 20(1): 53–75; Grantham-McGregor S et al. 2007. 'Developmental Potential in the First 5 Years for Children in Developing Countries'. Lancet 369(9555): 60–70; ⁵ Mendez MA and LS Adair. 1999. 'Severity and Timing of Stunting in the First Two Years of Life Affect Performance on Cognitive Tests in Late Childhood'. Journal of Nutrition 8(29): 1555–62; ⁶ Joint United Nations Programme on HIV/AIDS (UNAIDS). 2015. Global AIDS Response Progress Reporting 2015; and ¹ International Food Policy Research Institute (IFPRI). 2015. Global Nutrition Report 2015: Actions and Accountability to Advance Nutrition and Sustainable Development.

Most Zambian women give birth by 24 years of age, when the risks of HIV and transmission from mother to child are high. Without antiretroviral therapy (ART), 50 percent of HIV-positive children die by their second birthday. Nutrition services are a gateway to HIV prevention, care, and treatment because people identified as malnourished can be referred for HIV counselling and testing. Nutrition counselling can promote early ART and encourage treatment adherence and retention.

### **Water and Sanitation Sector**

Improving access to safe water and adequate sanitation facilities and improving hygiene practices can reduce diarrhoeal disease and related causes of malnutrition. To improve nutrition, the water and sanitation sector can:

- Increase access to and use of safe water.
- Improve access to and use of safe sanitation.
- Promote improved handwashing and food hygiene practices.

## **Planning and Finance Sector**

To effectively improve nutrition, interventions across sectors need to be included in annual plans with sufficient financial and human resources. The planning and finance sector can:

- Facilitate information sharing among sectors to support adequate planning and budgeting for nutrition objectives.
- Develop adequate budgets for nutrition.
- Strengthen multisectoral coordination for nutrition in the government.

#### **Education Sector**

Poor nutrition during early childhood leads to poor school performance and a higher likelihood that children will drop out of school. Girls enrolled in school are more likely to delay their first pregnancy, leading to better nutrition outcomes for mothers and babies. To improve nutrition, the education sector can:

- Promote equitable access to primary and secondary school for boys and girls.
- Promote nutrition education in schools.
- Support early childhood development and nutrition programs for cognitive development.
- Promote school feeding initiatives to keep children in school.

For a country like Zambia, nutrition is a smart investment: For every US\$1 spent on nutrition, there is a US\$16 return in health and economic benefits.<sup>7</sup>

## **Social Protection Sector**

Malnutrition can lead to poor health and reduced income over the long term. Addressing social development issues such as poverty and gender inequality can improve nutrition. The social protection sector can:

- Extend safety nets to mothers, children, and adolescents.
- Implement interventions such as conditional cash transfers to women to improve household purchasing of nutritious foods.

# **Agriculture Sector**

Greater production and consumption of nutrientdense crops and livestock can improve overall diet quality, and increased income from agriculture can improve access to more and better quality food, health care, and other essential services. To improve nutrition, the agriculture sector can:

- Strengthen local markets to increase access to protein-rich and nutrient-dense foods and promote diet diversity.
- Strengthen sustainable production and marketing of nutritious foods.
- Improve post-harvest storage and handling to prevent losses and increase access to food across seasons.
- Strengthen the capacity of agriculture extension workers to support improved production and consumption of a diversified diet, including promoting dialogue between men and women in households on maximizing the use of resources for improved nutrition.
- Support off-farm income-generation activities and expand access to credit, especially for women.
- Encourage stricter adherence to food and nutrition standards.









