Goals, objectives or targets related to nutrition:

The **Goal** of the Policy and Strategic Plan is to have a well nourished Malawi nation with sound human resource that effectively contributes to the economic growth and prosperity of the country.

**Objectives:**

**Objective 1:** To prevent and control the most common nutrition disorders among women, men, boys, girls in Malawi by 2011 with emphasis on vulnerable groups.

**Objective 2:** To increase access to timely and effective management of the most common nutrition disorders among women, men, boys, girls in Malawi by 2011 with emphasis on vulnerable groups.

**Objective 3:** To create an enabling environment for the effective implementation of nutrition services and programmes between 2007 and 2011.

Strategies and activities related to nutrition:

**Strategies (P=Prevention, M=Management, E= Enabling Environment):**

P1. Promotion of optimal breastfeeding practices for children 0-6 months in the context of HIV and AIDS at facility, community and household level.

P2. Promotion of optimal feeding practices for children 6-24 months or beyond to sustain breast feeding while giving appropriate complementary feeds with emphasis on feeding frequency, amount, energy and nutrient density and diversity based on the six food groups.

P3. Strengthening of optimal feeding of a sick child during and after illness.

P4. Promotion of women’s nutritional status among the general public.

P5. Prevention and control of micronutrient deficiency disorders with emphasis on Vitamin A deficiency, anaemia and iodine deficiency.
disorders.

P6. Promotion of practices that promote health lifestyles, food availability, diversity, access, proper storage, preparation, utilisation, the consumption of a variety of foods from the six food groups every day, safety and quality in the general population.

P7. Promotion of access to at least one nutritious meal and related health and nutrition services for the school-going children through the school feeding and the school health and nutrition programmes.

P8. Strengthening capacities for households and communities to attain adequate nutrition for their families with emphasis on socio-economically deprived persons.


P10. Controlling of nutrition related non-communicable and other diseases.

M1. Promoting access and quality of nutrition and related services to facilitate effective management of nutrition deficiency disorders in under-five children, adolescents and adults.

E1. Firmly position nutrition on the national development agenda and include Nutrition in the key development programmes, allocate adequate resources, strengthen institutional and human capacities, put in place necessary coordination mechanisms in all sectors for the implementation of the National Nutrition Policy and Strategic Plan at all levels.

E2. Increased budgetary allocation of resources by government and her partners for the implementation of the National Nutrition Policy and Strategic Plan.

E3. Government shall strive to build institutional and human capacity for the effective delivery of nutrition services, including the design, development and implementation of relevant nutrition programmes, projects and interventions in the public sector.

E4. Establishment of a well defined coordination mechanism for nutrition services, programmes and projects at central, district and community level.

E5. Government shall ensure evidence based programming of nutrition programmes, projects, activities, interventions and services through the generation and dissemination of nutrition research information and findings and appropriate documentation and dissemination of best practices.

E6. Results-oriented monitoring and evaluation.

M&E Indicators

M&E Indicators related to nutrition:

Monitoring Activities:

Quarterly Field Monitoring Visits:

Field monitoring visits will be undertaken to selected sites to check the progress on service delivery and the implementation of the activities. The visits will assist in identifying challenges faced and serve as the basis for dialoguing with service providers and implementers in focusing towards the achievement of the results. The quarterly field monitoring visits will also help in checking compliance to the laid down nutrition implementation procedures and guidelines. Quarterly monitoring visits will be led by the OPC, Department of Nutrition and HIV and AIDS, although multisectoral and multi-agency teams will also be encouraged. A quarterly field monitoring report will be produced by the monitoring team and will include (a) key findings of the visit, (b) main challenges observed in the course of implementing the NNPSN activities, and (c) recommendations on resolving bottlenecks.

National Integrated Nutrition Surveillance:

National Integrated Nutrition Surveillance System will be used to track the progress on the output and outcome indicators on a Monthly/quarterly basis. The results would be discussed in the quarterly review meetings. Because these will happen throughout the
implementation period, the results will also be used for the evaluation at the outcome and impact levels.

? Bi-annual Nutrition Review Meetings:
These will be held to review the implementation of the activities of the NNPSP. It will also review quarterly review reports by the Nutrition and Food Security M&E working group that reports on output as well as outcome indicators. While primarily a coordination activity, the quarterly review meeting will provide a useful forum for stakeholders to appreciate the inroads made towards the NNPSP goals and challenges constraining progress. The outcome of the quarterly review meetings will be a concise brief outlining the next steps.

? Nutrition Steering Committee Meetings/Government Development Partner Meetings:
These will focus on policy issues and discuss policy implementation, resource mobilization and progress towards policy outcomes. The meetings will discuss issues that have a bearing on the Nutrition policy such as inadequacies in the policy provisions that constrain the implementation and compliance, emerging issues on the ground that need to be addressed at the policy level as well as funding prospects for nutrition activities. The objective will be to ensure that the whole Nutrition Programme as envisaged in the NNPSP is moving towards the achievement of the planned objectives.

? Develop an operational database and Coordination of Information:
The OPC Department of Nutrition and HIV and AIDS will ensure the establishment of a coordinated management information system to be able to collect data, store them, and make them easily accessible to facilitate analysis and reporting on the NNPSP. In this regard, an inventory of all agencies implementing nutrition activities will be created. The data base would include: names of nutrition projects/service providers, type of activity, budget, output and outcome indicator targets, geographical location of services/project, target group and achievements for a particular period among others.

Evaluation activities:

? Construction of Baselines and Targets:
This will be a key activity as the ability of the nutrition response via the NNPSP to monitor the performance will depend on it, focusing on those targets without the baselines. In particular, baselines on the key outcome indicators in the NNPSP will be useful for determining the impact of the response at the end of the implementation period. Performance targets at annual, mid-term and end of the implementation of the plan will be critical in undertaking performance monitoring.

? Annual Nutrition Sector Reviews:
These will be undertaken to review the implementation progress, challenges and the status of the outcome indicators. While focusing also on coordination and the extent to which nutrition activities are being implemented in accordance with the agreed frameworks, the sector reviews will be fora where knowledge on the implementation experiences, good practice and challenges will be shared. An outcome of the meetings will be the identification of the implementation bottlenecks and recommendations to improve the performance towards the achievement of the results.

? Periodic Nutrition Surveys:
These will be used to track among others (a) the effectiveness of the interventions; and (b) impact on malnutrition levels. They will include the existing sector surveys on nutrition, Malawi Vulnerability Assessment and Mapping (VAM) work, National Statistical Office Surveys such as MICS and MDHS, Micronutrient Surveys, and National Nutrition Surveys. Impact studies focusing on specific interventions will also form part of the tracking studies. These will be population-based surveys and will be used to identify and understand the core factors and patterns fuelling chronic malnutrition, and influencing the demand for and supply of various nutrition services.

? Mid-Term Evaluation:
The Nutrition National Strategic Plan will be evaluated mid-way through the implementation with the aim of gauging implementation progress at midstream, and devise ways of improving the performance at post mid-term of the plan. The mid term evaluation will either
be conducted by an independent assessor or internally by stakeholders but led by the OPC, Department of Nutrition and HIV and AIDS.

? End of NNPSP Evaluation:
The end of NNPSP evaluation will be undertaken at the end of the implementation period of the Plan in 2011 or early 2012. The focus of the end of NNPSP evaluation will be to learn lessons to inform the future national nutrition initiatives and strategies in the country. The evaluation will be undertaken by an independent reviewer. Its main aim will be for reprogramming and replanning.

M & E components for each objective, listed under Annex 3

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File upload:

Reference:

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Policy topics:

- Low birth weight
- Stunting in children 0-5 yrs
- Wasting in children 0-5 years
- Underweight in children 0-5 years
- Underweight in women
- Anaemia in pregnant women
- Iodine deficiency disorders
- Vitamin A deficiency
- Growth monitoring and promotion
- Breastfeeding promotion/counselling
- Baby-friendly Hospital Initiative (BFHI)
- Complementary feeding promotion/counselling
- School-based health and nutrition programmes
- Nutrition in the school curriculum
- Hygienic cooking facilities and clean eating environment
- Provision of school meals / School feeding programme
- Monitoring of children’s growth in school
- Dietary guidelines
- Food-based dietary guidelines (FBDG)
- Media campaigns on healthy diets and nutrition
- Nutrition counselling on healthy diets
- Micronutrient supplementation
- Maize flours
- Refined sugar
- Food distribution/supplementation for prevention of acute malnutrition
- Management of moderate acute malnutrition
- Management of severe acute malnutrition
- HIV/AIDS and nutrition
- Food security and agriculture

Partners in policy implementation
- Government
  - Cabinet/Presidency
  - Health
  - Food and agriculture
  - Education and research
  - Women, children, families
  - Finance, budget and planning
  - Trade
  - Information
  - Sub-national
  - Other
  - Details: more
    Department of Nutrition, HIV and AIDS
- UN agencies
  - United Nations Children’s Fund (UNICEF)
- Intergovernmental bodies
  - European Union

Links