Goals, objectives or targets related to nutrition:

Strategic Directions:

**SD 1:** Prevention of Stunting in Children Under-Two Years of Age: First 1000 Most Critical Days

**SD 2:** Increasing Micronutrient and Macronutrient Availability, Accessibility and Utilization through Improving Food and Nutrition Security.

**SD 3:** Early Identification, Treatment, and Follow-up of Severe Acute Malnutrition

**SD 4:** Improving Nutrition Education and Nutritious Feeding through School

**SD 5:** Increase Linkages among Hygiene, Sanitation, Infection Control, and Nutrition

**SD 6:** Food and Nutrition to Mitigate HIV and AIDS

**SD 7:** Nutrition Related Control and Prevention Measures of Diet Related Non Communicable Diseases

**SD 8:** Food and Nutrition Preparedness and Response to Emergencies

**SD 9:** Strengthening Governance, Capacity Building and Partnerships in Support of Food and Nutrition Interventions at All Levels

**SD 10:** Monitoring and Evaluating Food and Nutrition Situation, Interventions and Research to Support their Improvement and Expansion
**SD 11: Expanding and Developing Communication and Advocacy Support for Food and Nutrition Interventions at Various Levels.**

**Strategies**

**Strategies and activities related to nutrition:**

**Strategies:**

**SD 1 Strategies**

a) **Expansion and enhancing integration of high impact maternal and child nutrition interventions focusing on the First 1000 Most Critical Days.** This will involve development of a nation-wide programme to be designed with broad cross sector and civil society participation and rapid but phased implementation supported by well-designed monitoring and communication support elements.

b) **Develop a costed funding strategy seeking resources from multiple sectors, and substantial funds from international sources committed to Scale up Nutrition (SUN).**

c) **Plan, generate necessary buy-in from leadership, sector ministries and other stakeholders at national and sub national levels and begin implementation of a national ?First 1000 Most Critical Days Programme (MCDP)? to Prevent Stunting in Children Less than two Years of Age.**

**SD 2 Strategies**

a) **Promote sustainable production, processing, preservation, storage, consumption and marketing of variety of food crops (especially legumes, vegetables, and fruits), fish, and livestock.**

b) **Increase production and use of fortified and bio-fortified foods including home fortification to improve micronutrient nutrition.**

c) **Strengthen Public ?Private Partnerships and support for food fortification.**

d) **Promote and expand micronutrient supplementation innovations to complement food-based approaches for increasing micronutrients availability, accessibility, and utilization.**

**SD 3 Strategies**

a) **Finalization and implementation of new national protocols for the management of severe acute malnutrition at hospital, clinic and community levels.**

b) **Strengthen Community Groups (e.g. Community health workers, Nutrition groups etc.) roles regarding acute malnutrition in children.**

c) **Increase resources to support community level resources for management of moderate and severe acute malnutrition.**

**SD 4 Strategies**

a) **Review, expand , and strengthen school health nutrition programme interventions countrywide.**

b) **Institutionalize home-grown school feeding program.**

c) **Strengthen nutrition education in schools.**

d) **Advocate for the improvement of appropriate water and sanitation facilities in all schools to carter for all learners including those with special needs and girls.**

e) **Strengthen school feeding and nutrition education.**

**SD 5 Strategies**

a) **Develop and provide sustainable water supply and sanitation services in rural, urban and periurban areas.**

b) **Enhance capacity in effective planning, implementation and monitoring of programmes for water supply and sanitation service delivery.**
c) Strengthen human, technical and financial capacity of institutions for improved water supply and sanitation service delivery in the rural, urban and peri-urban areas.

d) Enhance communication and advocacy for improved sanitation and hygiene practices.

**SD 6 Strategies**

a) Advocacy for mainstreaming of food and nutrition as an integral part of comprehensive HIV management and support for those infected and affected by HIV and AIDS.

b) Strengthen community-clinic linkage on nutrition support for PLHIV and affected families.

c) Strengthening the community HIV programmes nutrition support capacity.

**SD 7 Strategies**

a) Strengthening nutrition related aspects of non-communicable diseases? national control programme.

**SD 8 Strategies**

a) Develop and implement training in key areas of food and nutrition in the context of emergency preparedness and disaster risk reduction and response.

**SD 9 Strategies**

a) Position food and nutrition on the national development agenda.

b) 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.

c) Establish strategic and operational partnerships and alliances with private, public and civil society organizations in food and nutrition.

**SD 10 Strategies**

a) Use of evidence based information for nutrition programme design.

b) Strengthen food and nutrition results-oriented monitoring and evaluation system.

**SD 11 Strategies**

a) Create platforms for information sharing and networking for decision and policy formulation aimed at promoting availability, accessibility and utilization of micronutrient and macronutrient among the public.

b) Increase knowledge and awareness among mothers and other stakeholders in Zambia on the prevention of stunting in children less than two years of age.

c) Advocate for effective implementation of policies that promote food and nutrition component in care, treatment and support services for PLHIV.

d) Advocate for the strengthening of existing policies and their implementation aimed at promoting early identification, treatment and follow-up of acute malnutrition.

e) Advocate for effective implementation of policy that support food and nutrition emergency preparedness and response.

f) Advocate for the development of policies and programmes that promote prevention and control of dietary related NCDs.

g) Promote practices that enhance sustainable availability, accessibility and consumption of a variety of foods at household level.

h) Advocate for improved investment in food and nutrition interventions.

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M&E Indicators
M&E Indicators related to nutrition:

M & E Indicators included in the Implementation Matrix

Reference:


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
- Anaemia in adolescent girls
- Anaemia in pregnant women
- Anaemia in women 15-49 yrs
- Iodine deficiency disorders
- Vitamin A deficiency
- Dietary practice
- Minimum dietary diversity of women
- Maternal, infant and young child nutrition
- Growth monitoring and promotion
- Breastfeeding promotion/counselling
- Baby-friendly Hospital Initiative (BFHI)
- Breastfeeding in difficult circumstances
- Complementary feeding promotion/counselling
- Nutrition in schools
- 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
- School gardens
• Promotion of healthy diet and prevention of obesity and diet-related NCDs
• Dietary guidelines
• Media campaigns on healthy diets and nutrition
• Nutrition counselling on healthy diets
• Vitamin and mineral nutrition
• Vitamin A
• Micronutrient supplementation
• Micronutrient powder for home fortification
• Nutrition education
• Food vehicles (i.e. types of fortified foods)
• Wheat flours
• Maize flours
• Refined sugar
• Complementary foods
• Biofortification
• Acute malnutrition
• Management of severe acute malnutrition
• Nutrition and infectious disease
• HIV/AIDS and nutrition
• Nutrition sensitive actions
• Food security and agriculture
• Social protection related

**Partners in policy implementation**

• Government
  - Education and research
  - Food and agriculture
  - Health
  - Sub-national
  - Women, children, families
  - Details:
    - more
      National Food and Nutrition Commission of Zambia
      Education and Research, Food and agriculture, Health, Sub-national, Women, children, families:
      Ministry of Education, Science Vocational Training, and Early Education, Ministry of Agriculture and Livestock,

• Bilateral and donor agencies and lenders
  - Department of International Development (DFID)
  - Other
    - The World Bank
  - US Agency for International Development (USAID)
  - Details:
    - more
      Bilateral and donor agencies and lenders: Department of International Development (DFID), The World Bank, US Agency for International Development (USAID),

• UN agencies
  - United Nations Children's Fund (UNICEF)
  - World Food Programme (WFP)
  - Details:
    - more
      WHO, UNICEF, WFP, FAO, IFAD

• International NGOs
  - Details:
    - more
      Concern International, CARE International, World Vision

**Links**