UNITED NATIONS AGENDA FOR THE REDUCTION OF CHRONIC UNDERNUTRITION IN MOZAMBIQUE

2015-2019



NUTRITION SITUATION

UN AGENCY PROGRAMMING IN GOVERNANCE AND IMPLEMENTATION THE VISION OF THE UN AGENDA FOR THE REDUCTION OF CHRONIC UNDERNUTRITION

MEASURING SUCCESS

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PREFACE

The development of the UN Nutrition agenda was made possible by the contribution and support of all team members from FAO, IFAD, UNICEF, UNFPA, WFP, WHO and REACH. This document is the product of an extensive six months consultation, which got its initial impulsion through the REACH-UN meeting in June 2015 and was successfully completed with the official presentation to UN representatives in early December 2015.

The UN Nutrition Agenda was purposively conceived to speak (i) internally, to the UN agencies involved in its development and (ii) externally, to the multi-stakeholder platforms active in nutrition (government, donor, civil society and business sectors).

Among the UN Agencies, the process of developing this document was as fruitful as the product itself. It allowed open and frank discussions about where the UN's did well at working together, and where they felt short at achieving their mutual and complementary objectives. This created the necessary transparency and trust amongst the team as we move forward towards addressing the very critical level of chronic undernutrition in Mozambique over the next five years.

Outside the UN Agencies, this document represents a UN Nutrition manifesto, which is grounded into the Government Five-year plan, is carved within the UN Development Action Framework (UNDAF) for Mozambique, and speaks to stakeholders interested in leveraging the UN strengths, within a high-level accountable framework.

The Nutrition agenda also set ambitious goal in working together as UN's and accounting for it. Five priority actions were identified: (i) nutrition governance; (ii) social behaviour change and communication programming; (iii) nutrition sensitive food systems programming; (iv) nutrition promotion through health systems programming; (v) food fortification.

Last we would like to acknowledge the contribution of Kerry Selvester in facilitating the entire process leading to the development of this nutrition agenda.













ABBREVIATIONS

DHS Demographic and Health Survey

ESAN Food Security and Nutrition

Strategy

FAO Food and Agriculture

Organization

GoM Government of Mozambique

GNP Gross National Product

GT-PAMRDC PAMRDC Working Group

IFAD International Fund for

Agricultural Development

PAMRDC Plan of Action for the Reduction

of Chronic Malnutrition

PQG Government of Mozambique

Five Year Plan

MDG Millennium Development Goals

NFP Nutrition Partners Forum

REACH Renewed Efforts to Reduce

Child Malnutrition and Hunger

SETSAN National Food Security and

Nutrition Secretariat

SDG Sustainable Development Goals

SUN Scaling Up Nutrition Movement

UN United Nations

UNFPA United Nations Population Fund

UNICEF United Nations Children's Fund

WFP World Food Programme

WHO World Health Organization



1.1 INTRODUCTION

"The UN Agenda is then set in the form of a statement of intent to improve policy and programming around chronic undernutrition, expressed through a common vision, agreed operational approaches to policy and programming and a commitment to dedicate resources to priority area of action."

THE UNITED NATIONS AGENDA FOR THE REDUCTION OF CHRONIC UNDERNUTRITION (HEREWITH TO BE REFERRED TO AS THE UN AGENDA) AIMS TO PROVIDE A CLEAR AND CONCISE SUMMARY OF THE APPROACH THAT THE UN AGENCIES ARE TAKING IN MOZAMBIQUE TO SUPPORT POLICIES AND PROGRAMMES TO REDUCE UNDERNUTRITION, AND TO ENSURE A SUSTAINABLE COMMITMENT OF RESOURCES TO THE NUTRITION CRISIS IN THE COUNTRY. THE UN AGENDA HIGHLIGHTS THE PRIORITY AREAS FOR ACTION FOR THE AGENCIES FROM 2015 TO 2019, AND THE WAY IN WHICH THE UN AGENCIES WILL WORK TOGETHER TO ACHIEVE A COMMON GOAL.

The first section of the UN agenda provides a brief overview of the nutrition situation in the country, including the level of undernutrition and the causes, and the governance structures managing these multi-sectoral issues, indicating main programming gaps.

This is followed by an outline of the UN response, indicating where and in which thematic areas the UN agencies are dedicating resources. This section highlights the challenges the UN faces to provide effective programming support.

The UN Agenda is then set in the form of a statement of intent to improve policy and programming around chronic undernutrition, expressed through a common vision, agreed operational approaches to policy and programming, and a commitment to dedicate resources to priority areas of action.

The document concludes with a commitment to measure the success of the UN Agenda, including monitoring initiatives by and between the agencies, and the eventual impact on the rates of chronic undernutrition.

1.2 CONTEXT

"Addressing undernutrition requires multi-sectoral, multi-year commitment of resources to seemingly intractable problems."

IN MOZAMBIQUE, COMBINED CHILDHOOD UNDERNUTRITION IS THE UNDERLYING CAUSE OF DEATH IN AN ESTIMATED 35% OF CHILDREN UNDER THE AGE OF FIVE YEARS (PAMRDC 2010). THE EXTREMELY HIGH LEVEL OF CHRONIC UNDERNUTRITION (43%) WHICH AFFECTS ALMOST ONE IN EVERY TWO CHILDREN UNDER THE AGE OF FIVE YEARS IN MOZAMBIQUE (DHS 2011) IS ONE OF THE MAJOR DEVELOPMENTAL CONCERNS OF THE GOVERNMENT.

International evidence indicates that chronic malnutrition is most pronounced from the time of conception up to the first two years of life, the period referred as the '1000 days' (Lancet Series 2008), and that the growth retardation occurring during this critical period cannot be reversed. Intervening during pregnancy and the first two year of the life of a child represents a crucial window of opportunity for improving maternal nutrition, child growth and development.

The immediate causes of chronic undernutrition in Mozambique are inadequate quantity and quality of the diet and high rates of infectious diseases. The major underlying causes of chronic undernutrition are income poverty and food insecurity as evidenced by the over representation of households with malnourished children (stunting, wasting and anemia) in the lowest income quintiles and in households suffering from chronic food insecurity. (Detailed analysis available in United Nations issues paper on nutrition 2015)

The consequences of chronic undernutrition are not only limited to increased mortality, poor health outcomes and cognitive impairment, but also impact on productivity, thereby directly affecting economic development.

The National Multi-sectoral Plan of Action for the Reduction of Chronic Malnutrition (PAMRDC 2010-2020) estimates that a reduction in productivity of 2% to 3% of GNP in Mozambique is attributable to chronic undernutrition (PAMRDC 2010). This estimate is supported by the 2006 World Bank document "Repositioning Nutrition as Central to Development" that also estimated a risk of losing 2-3% of GDP by not addressing undernutrition.

The Five-Year Plan of the Government of Mozambique (PQG 2015-2019) released in July 2015, includes the reduction of stunting as an indicator in the human and social development pillar; a clear sign of the Government commitment to tackling the food security and nutrition problem in the country. This commitment is supported

by two key policy frameworks, namely, The National Strategy for Food Security and Nutrition (ESAN - 2008) and the National Multi-sectoral Plan of Action for the Reduction of Chronic Malnutrition (PAMRDC 2010).

There are also governance structures in place thatlead on nutrition questions, with the Technical Secretariat for Food Security and Nutrition playing a pivotal role at central and provincial level (see Box 1 for overview of the Nutrition Governance Structures).

The Government became a signatory to the Scaling Up Nutrition Movement (SUN) in 2010, and all of the SUN platforms have representation in the current set-up. SETSAN is the Government Focal Point, the UN network, the Civil Society Platform and the Business network are all working together under the common SUN agenda. The Nutrition Partners Forum (NPF) was established in 2011 as a coordination platform for development partners under the umbrella of the PAMRDC.

The governance structures are largely complementary, reducing duplication and providing a wide platform for participation for a range of stakeholders. However, despite the existence of Provincial PAMRDC in all provinces, and the presence of Civil Society Platforms in three provinces, there are still considerable weaknesses in the governance structures at this level, and no multi-sectoral structures specifically addressing nutrition exist in the district governments.

In order to increase the efficiency and visibility of the multi-sectoral coordination structures, the GoM is in the process of reforming the Technical Secretariat for Food Security and Nutrition (SETSAN) by transforming the existing structure into a high level inter-Ministerial Committee for Food Security and Nutrition (CI-SAN) and a new Institute for the Promotion of Food Security and Nutrition (IPSAN). This institute is expected to have a coordination role but also take the lead in key operational areas (education promotion, and training). The Government believes that this will add visibility to the multi-sectoral issue of undernutrition. Although the discussions about the new institutional set-up are well advanced, they have yet to be gazetted by the government.

Addressing undernutrition requires multi-sectoral, multi-year commitment of resources to seemingly intractable problems. Currently, enabling factors include the strong institutional and policy frameworks (PQG, PAMRDC, ESAN II) that place nutrition firmly in a multi-sectoral policy space conducive to effective programming. Coordination between different SUN platforms is key to scale-up interventions, and to ensure that nutrition governance extends to provincial and district level planning and implementation. There is a need to capitalize on these gains by strengthening mechanisms and decentralizing in order to take multi-sectoral planning to district level.

BOX 1. NUTRITION GOVERNANCE STRUCTURES -

NUTRITION SPECIFICS INTERVENTION AND PROGRAMMES

- National Strategy for Food Security and Nutrition (ESAN II 2008 -2015)
- National Multi-sectoral Plan of Action for the Reduction of Chronic Malnutrition (PAMRDC 2011-2015 20)

TECHNICAL SECRETARIAT FOR FOOD SECURITY AND NUTRITION (SETSAN) 1998

- Multi-sectoral secretariat convening all the key sectoral Ministries, and chaired by the Min. of Agriculture and Food Security
- SUN Movement Focal Point (2010)
- Manages and coordinates the PAMRDC through the working group (GT-PAMRDC) created in 2012
- Coordinates the provincial PAMRDC through working groups at provincial level

NUTRITION DEPARTMENT OF THE MINISTRY OF HEALTH

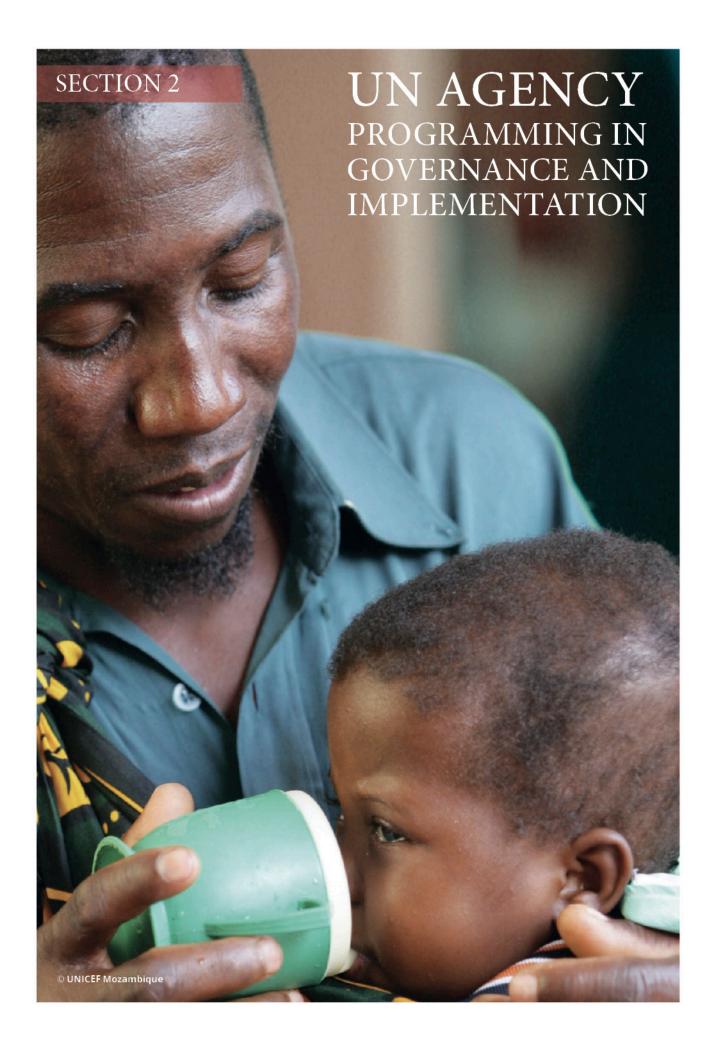
 Managing a broad based national nutrition programme through the National Health System

SUN MOVEMENT (2010)

- SETSAN is the SUN focal point and the Nutrition Department in the Ministry of Health is the technical focal point.
- UN Network for SUN
- Civil Society SUN Platform (2013)
- SUN Business Network (2015)
- SUN Donor Network (sub set of Nutrition Partner Forum
- Coordination is supported by REACH (UN facilitating body for nutrition)

COOPERATION PARTNERS COORDINATION

- Nutrition Partners Forum (NPF composed by 2011
- Donors
- NGO
- UN Network for SUN
- Civil Society Platform for SUN
- SUN Business Network



2.1 U.N PROGRAMMING IN NUTRITION

"All of the UN agencies subscribing to the UN Agenda in Mozambique have Agency level commitment to the reduction of undernutrition and are signatories to the United Nations Global Nutrition Agenda."

THE UN IS UNIQUELY POSITIONED TO SUPPORT THE GOVERNMENT OF MOZAMBIQUE, THE PRIVATE SECTOR AND CIVIL SOCIETY TO REDUCE THE UNACCEPTABLY HIGH LEVELS OF UNDERNUTRITION. ALL OF THE UN AGENCIES SUBSCRIBING TO THE UN AGENDA IN MOZAMBIQUE HAVE AGENCY LEVEL COMMITMENT TO THE REDUCTION OF UNDERNUTRITION AND ARE SIGNATORIES TO THE UNITED NATIONS GLOBAL NUTRITION AGENDA (UN V 1.0).

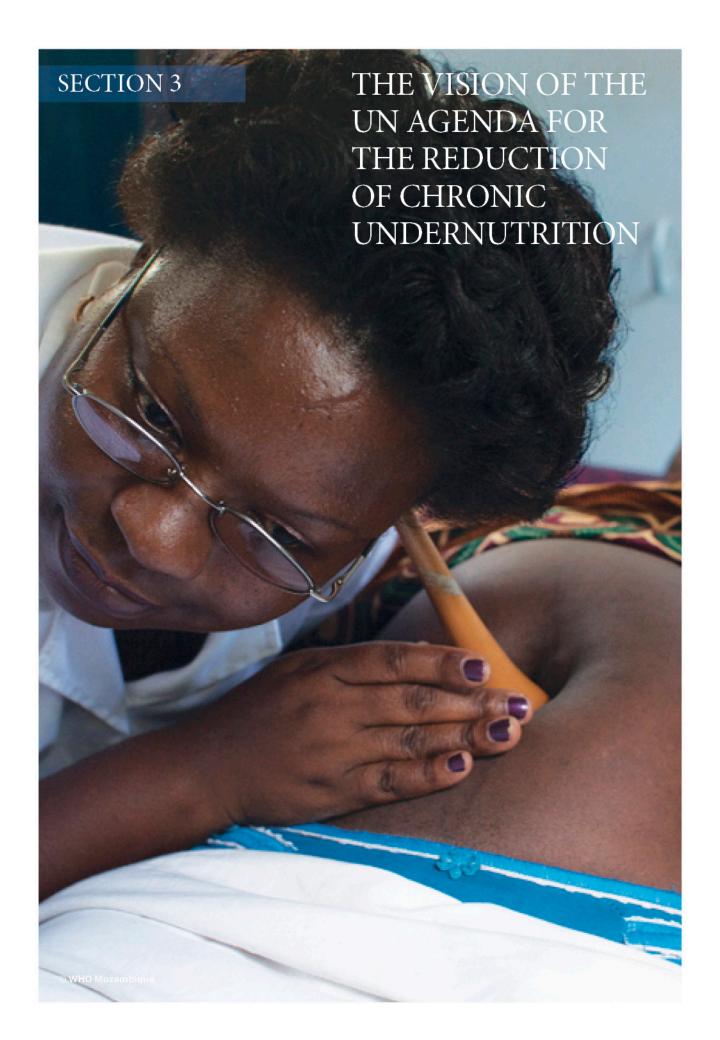
A UN led Agenda for the Reduction of Chronic Undernutrition in Mozambique, aimed at addressing the complex issue of nutrition programming, will contribute to the government intent to prioritize programming for the reduction of undernutrition across all sectors.

The UN network aims to: strengthen the harmonization, coordination and effectiveness of UN agencies activities in support of country nutrition efforts; align with and articulate UN nutrition efforts to those of national governments, other SUN Networks and nutrition stakeholders at global and country levels; advance the aims of the SUN Movement; and support donor coordination and response. REACH1 has been working in country since mid-2012, supporting SETSAN with nutrition coordination and the UN Joint Group on Nutrition as part of the UN engagement with nutrition governance in Mozambique.

In terms of programming around nutrition, the UN agencies work closely with a wide range of central level governmental partners to support nutrition governance, policy development and national programme implementation, namely: the Ministry of Health, the Ministry of Education and Human Development, the Ministry of Agriculture and Food Security, the Ministry of Sea, Inland Waters and Fisheries, the Ministry of Gender, Children and Social Action, the Ministry of Public Works, the Ministry of Trade and Commerce, and the Ministry of Land, Environment and Rural Development.

The geographic focus of specific programme implementation is concentrated in the areas with high prevalence and high numbers of under-nourished children, namely the central provinces of Manica, Tete, Zambezia and Nampula (see Fig. 1 Representation of geographic programming by agency).

The UN agencies work on both nutrition specific and nutrition sensitive programmes (see Lancet framework in annex 1), grouped under



3.1 VISION

"The UN agencies will contribute to achieving the national target of an eight percentage point decrease in chronic undernutrition over the next five years, as a significant step towards a healthy and productive population."

THE UN AGENDA FOR THE REDUCTION OF CHRONIC UNDERNUTRITION (2015-2019) IN MOZAMBIQUE, DEVELOPED BY THE FOLLOWING AGENCIES: FAO, IFAD, UNFPA, UNICEF, WFP AND WHO, AIMS TO CLEARLY AND CONCISELY SET OUT THE PURPOSE OF UN NUTRITION PROGRAMMING FOR THE NEXT FIVE YEARS, INDICATING HOW THE AGENCIES WILL BUILD ON THEIR ON-GOING WORK, BUT ALSO IMPROVE THEIR APPROACHES AND PROGRAMMING IN ORDER TO WORK MORE EFFECTIVELY TOGETHER FOR THE REDUCTION OF CHRONIC UNDERNUTRITION.

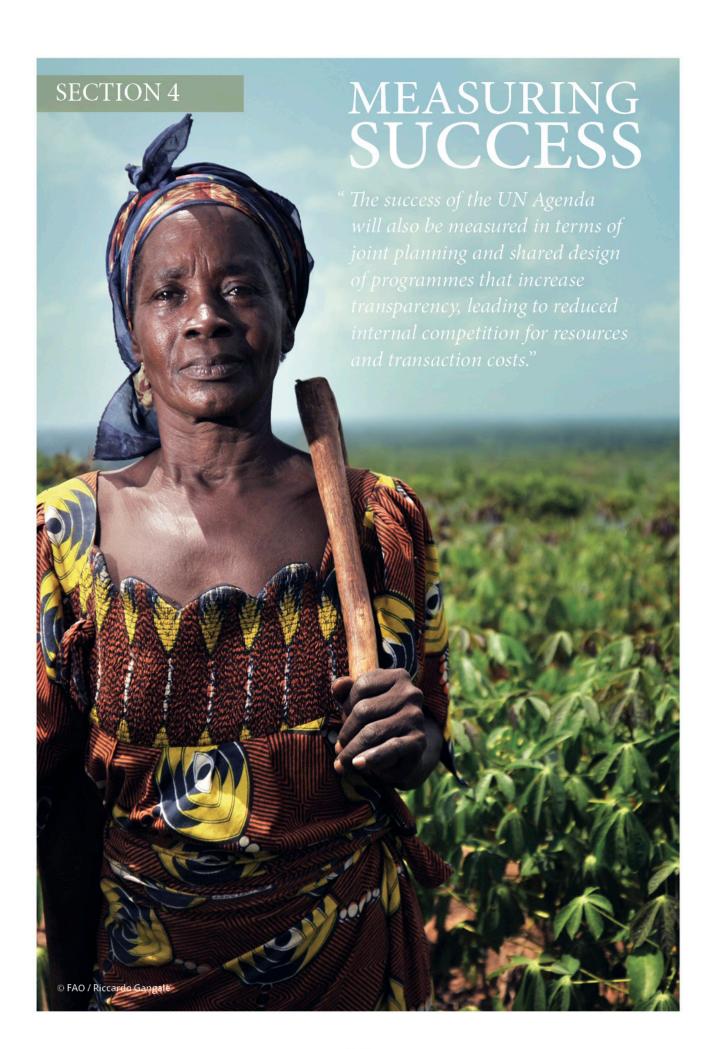
The UN agencies will contribute to achieving the national target of an eight percentage point decrease in chronic undernutrition over the next five years, as a significant step towards a healthy and productive population. The reduction in chronic undernutrition will be from 43% (2013) to 35% (2019).

The UN agencies of FAO, IFAD, UNFPA, UNICEF, WFP and WHO have unique qualities to offer to contribute to this goal.

Collectively the UN agencies offer multi-sectoral expertise in nutrition at international and national level, with a footprint in all sectors, thereby increasing the potential for complementary programming (ensure collaboration within the UN and brokering relationships between sectors).

The UN agencies are well positioned to provide policy support and strengthening in line with the national priorities, i.e. national implementation of PAMRDC and development of ESAN III due to their access to high level Government officials in key sectors.

The UN agencies have the depth and breadth of programming to close the virtuous circle of policy informed by practice, and practice supported by policy. The UN can lead by example: using evidence from research or monitoring systems to improve programming and by strengthening nutrition surveillance systems to provide national data sets on nutrition status.



4.1 IMPACT ON CHRONIC

MALNUTRITION

The actions carried out under the UN Agenda for the Reduction of Chronic Malnutrition will contribute to a reduction in chronic undernutrition in line with GoM targets. It will advocate successfully for increased resources (financial and human) for nutrition-related programming and will actively promote a culture of evidence-based policy and programming.

TABLE I - EXPECTED RESULTS

RESULT	INDICATOR	MEANS OF VERIFICATION	GOAL (2020)
Reduction in chronic undernutrition in children children under five (population level chronic undernutrition).	Percentage point change in chronic undernutrition of children under five years of age.	National Anthropometric Statistics Sources: i. SETSAN Vulnerability Analysis, ii. Household Budget Survey (IOF) iii. Demographic and Health Survey (DHS)	Reduction to 35% in 2019 (8 percentage points)
Adequate domestic or public resource (financial and technical) commitment to nutrition specific and nutrition sensitive programming.	Number of provincial PAMRDC with funded annual operational plans (Sector ¹ resource allocation and expenditure to nutrition specific and nutrition sensitive programming)	Annual budgets of Provincial PAMRDC (REACH & SETSAN are working on a methodology to track allocation and spending on nutrition)	A third of annual operational Provincial PAMRDCs are funded (from National Budget and additional resources) (10% increase in nutrition sensitive allocation / expenditure in key sectors)
Improved nutrition surveillance systems for tracking trends in undernutrition ²	Bi annual anthropometric surveys representative at provincial level 6 monthly facility based nutrition surveillance data	Anthropometric surveys Facility-based nutrition surveillance data sets	Two anthropometric surveys between 2015 – 2020 Functioning facility based nutrition surveillance system

¹⁻ Key sectors: agriculture, fisheries, health, social protection, WASH

²⁻There are on-going discussions between UNICEF/WHO and the National Statistics Office, the Ministry of health and SETSAN about the introduction of regular anthropometric measurements of the six WHA targets, as part of the National Nutrition Surveillance system and/or the introduction of a bi-annual anthropometric survey statistically valid at provincial level.

REFERENCES

AZZARI, C. G. CARLETTO, B. DAVIS AND A. NUCIFORA (2011) "Child Malnutrition in Mozambique," Unicef and WB, April 2011.

BLEICHRODT, N. E BORN, M. P.: A meta-analysis of research on iodine and itsrelationship to cognitive development. In Stanbury JB (ed.) The damagedbrain of iodinedeficiency. Cognizant Communication Corporation, 1994. New York.

GRANHEIM, S. Estudo de caso UNSCN Análise de políticas nacionais impacto dos sistemas alimentares na nutrição em Moçambique. Oct. 2013.

LEVIN, H. M., POLLITT, E., GALLOWAY, R. E MCGUIRE, J.: Micronutrient deficiency disorders. In JAMISON,

D. T. E MOSLEY, W. H. (EDS): Disease control priorities in developing countries. World Bank. Oxford University Press, 1993.

HADDAD, L. J. E BOUIS, H. E.: The impact of nutritional status on agricultural productivity: Wage evidence from the Philippines. Oxford Bull Economics and Stat, 1991. 53(1): 45 68.

INE. Population Census 2007.

MIN OF HEALTH. National Action Plan for the Reduction of Chronic Malnutrition (PAMRDC) 2010.

MINISTRY OF PLANNING AND DEVELOPMENT. National Poverty Assessment (NPA) 2010.

NATIONAL INSTITUTE OF STATISTICS. DHS 2003, DHS 2011.

NATIONAL INSTITUTE OF STATISTICS. Household Budget Survey (IOF) 2008.

NATIONAL INSTITUTE OF STATISTICS. Multiple Cluster Indicator Survey (2010).

PRIDMORE AND HILL. Addressing the Underlying and Basic Causes of Child Undernutrition in Developing Countries: What Works and Why? 2009.

REPUBLIC OF MOZAMBIQUE. Five Year Government Plan 2015-2019.

REINHARD AND WIJAYARANTNE. The use of stunting and wasting indicators for food security and poverty. 2002.

ROSS, J. S. AND THOMAS, E. L.: Iron deficiency anemia and maternal mortality. PROFILES 3 Working Notes Series, 1996; No. 3. Washington DC.

SHRIMPTON, ROGER: Um Plano Estratégico para a Nutrição em Moçambique. Helen Keller International, Maputo, Fevereiro de 2002.

UNICEF-WHO-THE WORLD BANK. Joint child malnutrition estimates- Levels and trends. Global database on child growth and malnutrition [online data base]. Geneva: World Health Organization, 2014.

UN. UNITED NATIONS GLOBAL NUTRITION AGENDA (UNGAV V. 1.0).Delivering on the commitment to eradicate malnutrition in all its forms: the role of the UN system.

ANNEX 1

LANCET FRAMEWORK: NUTRITION SPECIFIC AND NUTRITION SENSITIVE PROGRAMMING ...

BENEFITS DURING THE LIFE IN COURSE

- Morbidity and mortality in childhood
- ↑ Cognitive, motor, socio emotional development
- ↑ School performance and learning capacity
- ↑ Adult stature
- ↓ Obesity and NCDs
- ↑ Work capacity and productivity

NUTRITION SPECIFICS INTERVENTION AND PROGRAMMES

- Adolescent health and preconception nutrition
- Micro-nutrient supplementation or fortification
- Breastfeeding and complementary feeding
- · Dietary supplementation
- Dietary diversification
- Feeding behaviors and stimulation
- Treatment of severe acute malnutrition
- Disease prevention and management
- Nutrition interventions in emergencies

Optimum fetal and child nutrition and development Breastfeeding, Feeding and Low burden of nutrient rich foods caregiving practices, infectious diseases and eating routine parenting stimulation Access to and use Food security Feeding and including availability, caregiving of health service, economic access and resources (maternal a safe and hygienic use of food household and environment community level) Knowledge and evidence Politics and governance Leadership, capacity and financial resources Social, economic, political and environmental context (national and global)

NUTRITION SENSITIVE PROGRAMMES AND APPROACHES

- Agriculture and food security
- Social safety nets
- · Early child development
- · Maternal mental health
- · Women's empowerment
- · Child protection
- Classroom education
- · Water and sanitation

BUILDING AND ENABLING ENVIROMENT

- · Rigorous evaluations
- Advocacy strategies
- Horizontal end vertical coordination
- Accountability incentives regulation, legislation
- Leadership programmes

ANNEX 2

WHA GLOBAL TARGETS FOR THE REDUCTION OF CHRONIC MALNUTRITION •

- 01 By 2025, 40% reduction of the global number of children under five who are stunted.
- 02 By 2025, 50% reduction of anemia in women of reproductive age.
- 03 By 2025, 30% reduction of low birth weight.
- 04 By 2025, no increase in childhood overweight.
- By 2025, increase the rate of exclusive breastfeeding in the first six months up to at least 50%.
- 06 By 2025, reduce and maintain childhood wasting to less than 5%.

ANNEX 3

STRATEGIC OBJECTIVES OF THE MULTI-SECTORAL ACTION PLAN FOR THE REDUCTION OF CHRONIC UNDERNUTRITION (PAMRDC) 2011-2015 (20) IN MOZAMBIQUE .

- 01 To strengthen activities with impact on the nutritional status of adolescents.
- O2 To strengthen interventions with impact on the health and nutrition of women of reproductive age before and during pregnancy and lactation.
- 03 To strengthen nutrition activities for children in the first two years.
- To strengthen household-oriented activities to improve access and utilization of food with a high nutritional value.
- To strengthen the Human Resources capacity in the area of nutrition.
- To strengthen the national capacity for advocacy, coordination, management and progressive implementation of the Multi-sectoral Action Plan for the Reduction of Chronic Undernutrition.
- 07 To strengthen the food and nutrition surveillance system.



United Nations Agenda for the Reduction of Chronic Undernutrition in Mozambique

> Maputo, Mozambique February, 2016