We can overcome undernutrition: Mozambique Case Study
Children who suffer from chronic malnutrition fail to grow to their full genetic potential, both mentally and physically. It significantly increases the likelihood of premature death, and those that survive are prone to ill health and are less able to contribute to an active and productive life. The condition is measured by stunting—shortness in height compared to others of the same age group—which manifests itself in the early life cycle of children, and the effects of which are irreversible.

Mozambique’s impressive economic performance, its potential to become the breadbasket of the region, and positive developments in the country’s nutrition agenda augur well for the country’s struggle against stunting.

Effects of Stunting

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Poised for progress?

A serious problem

This is just as well. For Mozambique has one of the highest rates of stunting in the region. Almost one child in two is stunted and half the country’s women are anaemic. Achieving the national target of reducing the child stunting rate to 35% by end 2020 will require a high level of political commitment and mobilization.

Mozambique steps up the struggle— with help from partners

With the right support in key strategic areas, the conditions are ripe for faster progress and the EU is firmly committed to supporting Government-led efforts.

Daunting problems, massive task

Targeted stunting reduction (million Under 5’s stunted children)

<table>
<thead>
<tr>
<th>Year</th>
<th>Target Effort needed</th>
<th>Reduction needed to achieve WHA target</th>
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<tbody>
<tr>
<td>2012</td>
<td>1.79 million</td>
<td>0.72 million</td>
</tr>
<tr>
<td>2015</td>
<td>1.07 million</td>
<td>0.53 million</td>
</tr>
<tr>
<td>2020</td>
<td></td>
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<tr>
<td>2025</td>
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Beginning prevalence (2012): 41.2%  Target prevalence (WHA 2025): 19.8%

Trend in stunting reduction estimated in 2012 = 1.67%

The graph shows the historic trend in prevalence of stunting until 2012 and the forward projections for 2020 and 2025.

A growing problem calls for more ambitious target?

Measurement of progress against global World Health Assembly (WHA) targets indicates that Mozambique is currently lagging with regard to key nutrition indicators (under-5 stunting, wasting, overweight, and anaemia in women of reproductive age). In 2012, nearly 1.8 million children under five years of age were stunted. This number is projected to remain unchanged unless current trends are reversed.

The country will need to be more ambitious and to mobilize additional coordinated and strategic investments if the revised 35% national stunting target is to be reached by 2020, and even more so to reach the WHA global target of 40% stunting reduction by 2025. The graph shows the historic trend in prevalence of stunting until 2012 and the forward projections for 2020 and 2025.
Undernutrition: some distressing figures

Stunted and anaemic

Stunting and maternal anaemia are the most pressing nutrition problems in Mozambique. Stunting is largely irreversible after the age of 2 years and, of the 43% of children under the age of five affected, half are severely stunted. Some 69% of children aged 6 months to 5 years, and 80% of those under 18 months, are anaemic.

This is much higher than the estimated average of 40% for developing countries (WHO, 2013). Moreover, 54% of women of reproductive age are anaemic and child wasting (acute malnutrition) is also above acceptable levels. Undernutrition on this scale is holding back the human capital and development potential of the country.

Stunting has been estimated to result in productivity losses of between 2% and 3% of GDP (~US$300-$500 million annually).

Every year, Mozambique loses US$116 million to vitamin and mineral deficiencies.

Sources: PAMRDC, World Bank.

Multiple causes, multiple challenges

A mixture of factors helps explain the slow progress in tackling undernutrition in Mozambique1:

- Major improvements in child survival and access to basic social services mean that more children survive, albeit with poor nutrition status.
- Despite notable improvements, 47% of the population still lacks access to drinking water from improved sources, and 39% still defecate in the open. High diarrhoea rates and parasitic infections impact the absorption of nutrients and causes blood loss and anaemia (see graph on next page).
- Inadequate access to nutritious foods. The meal of one in ten households consists mainly of a staple cereal and green leaves, only rarely complemented by other nutrient-rich foods. Stunting is most prevalent among the poorest, but the wealthiest fifth of the population also accounts for one quarter of stunted children, indicating that other factors are at play like education (see map).
- Early marriage and high levels of adolescent pregnancy increase undernutrition rates. One in two girls are married before 18 and many have babies in their teens (see box on the right).
- Large geographical inequities. Stunting is twice as high in the North and Centre as it is in the South. Nampula and Zambezia provinces, where 38% of Mozambicans live, are particularly affected.

There is a significant correlation between the age of the mother and the child’s nutritional status. Based on DHS 2011 data, more than one third (37.4%) of girls aged 15-19 years had already begun childbearing. This rate is significantly higher in rural areas and among the lower wealth quintiles.

Multivariate analyses show that younger mothers and short spaces between births give rise to increased stunting rates. Teenage pregnancies are also linked to premature births and low weights. In Mozambique, nearly one third of infants 0-6 months are stunted.

Mozambique’s commitment: reasons for hope

A Multisectoral Action Plan

- A good policy and strategic framework is already in place: A Multisectoral Action Plan for the Reduction of Chronic Undernutrition (PAMRDC) 2011-2015 (2020) is the country’s common results framework for nutrition action. This spells out ways of reducing stunting from 43% to 35% by 2020. The national policy and strategic framework was found to be conducive for nutrition3.

- The Plan identifies critical target groups, sets out seven strategic objectives, and outlines specific interventions and key progress indicators. It also identifies nine institutions that will be accountable for achieving results, with support from the private sector and civil society.

- Since 2012 the plan has been decentralised. Provincial PAMRDC plans were approved for at least 5 out of the 11 provinces and several provinces receive support from a specific donor. The plan for Tete province has even taken its budgets and integrated planning down to district level.

A multi-stakeholder platform

The other reason for hope is that mechanisms are in place to co-ordinate the efforts of those concerned with advancing the cause of food security and nutrition in Mozambique:

- The Technical Secretariat for Food and Nutrition Security (SETSAN) is the coordinating body for nutrition. SETSAN facilitates monthly coordination meetings for PAMRDC and reports to the Council of Ministers twice a year on the progress of the Plan’s implementation. The President of Mozambique is a member of the Scaling Up Nutrition (SUN) Lead Group.

- SETSAN has helped build the trust of development partners. SETSAN’s organisational reform towards “Instituto de Promoção de Segurança Alimentar e Nutricional” (IPSAN) is an opportunity for Mozambique to demonstrate leadership, commitment and accountability—and for its partners to show that they appreciate this by providing support.

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3 UN SCN Mozambique Case Study on Nutrition Sensitivity of Policies (August 2013).
The challenges Mozambique faces

So the plans are there. The biggest challenge now is to overcome obstacles to implementing them, including:

- Institutional barriers that prevent effective translation of nutrition-related strategies into actions at the provincial and district levels;
- A failure to prioritise human and financial resources for nutrition despite high-level involvement. (Mozambique recently achieved the MDG1 hunger-reduction target, which could have led to complacency as undernutrition is widely equated with a lack of food);
- Strategic gaps in capacity at all levels to implement coordinated programmes;
- A weak tracking system for monitoring progress and evaluating performance; and
- A lack of formal regulation and strong accountability mechanisms to support the PAMRDC actions.

Scaling up nutrition: the EU lends a hand

Getting the right focus

EU support, including its rural development interventions, prioritises two distinct nutrition approaches:

- First, it focuses on the two most populous provinces where nutrition indicators are among the poorest in the country;
- Second, it is investing in information that helps define best measures, and in scaling up actions at provincial levels. Among the interventions are food fortification and improved water/sanitation.

Because Mozambique is implementing a decentralised model, the actions can be tailored to local conditions. This is a marked advance on efforts elsewhere, where much of the work to combat poor nutrition has been focused on international and national levels. The EU’s support for nutrition has gradually increased in the past four years and now amounts to a coherent package of measures. The nutrition agenda has been raised through the EU’s Mozambique National Indicative Programme (NIP) 2014-2020, in which nutrition has been integrated into the flagship Rural Development sector with an important governance component.

Chronic malnutrition is a major structural challenge of our society. Women have a role that no-one else can play in raising awareness […]

Combating this public health problem is within our capabilities, through a balanced diet.

Mozambican President Filipe Nyusi, July 2015

Mozambique has the potential to become the breadbasket of the region.

Photo by: Sylvia Beamish.
WE CAN OVERCOME UNDERNUTRITION: MOZAMBIQUE CASE STUDY

EU commitment: a coherent package in line with strategic priorities of the EU nutrition action plan

Strategic Priority 1: Enhancing mobilisation and political commitment for nutrition

The EU is enhancing the mobilisation of the efforts of Mozambique and its partners by:

- **Encouraging policy dialogue**
  - Through its active participation in the Nutrition Partners Forum, the EU is involved in the ongoing political dialogue about using nutrition indicators in the Performance Assessment Framework. This is linked to EU disbursements of development aid channelled through general budget support for a total envelope of €200 million covering the period 2016-2019. This would give a strong signal that nutrition is central to development concerns.
  - The EU is also co-funding the 2013 Baseline Study on Food Security and Nutrition. This national survey is conducted every five years by SETSAN. The 2013 study (over half was funded by EU) helped to set robust baseline indicators for the MDG1.C Programme and for the overarching national nutrition-related strategies.

- **Sustaining institutional and organisational capacities of SETSAN**
  - The EU is continuing to support the Food Security and Nutrition Technical Secretariat (SETSAN) and build its leadership capacities to drive and coordinate the intersectoral PAMRDC action plan. It is also supporting the establishment of better monitoring and evaluation systems by mobilising experts to build SETSAN institutional capacities to monitor the MDG1.C Programme at both central and provincial levels. In so doing, the EU is helping strengthen the capacities to carry out effective monitoring and evaluation of PAMRDC. The aim is to create a positive momentum with local authorities at decentralized levels to operationalize the PAMRDC. The more civil servants engage on a daily basis with each Mozambican citizen for the reduction of stunting, the greater the chances of success.

- **Supporting civil society**
  - The EU is supporting Civil Society efforts to develop social accountability mechanisms on food and nutrition rights.

Strategic Priority 2: Scaling up actions at country level

The EU is following three main approaches:

**A geographical focus for greater impact**

- By strategically concentrating its actions in two provinces with some of the poorest nutrition-related indicators, notably Nampula and Zambezia, the EU aims to reach the greatest possible number of children and mothers.

**How were Zambezia and Nampula provinces selected?**

In 2014, EU commissioned a study to help identify an area of Mozambique for the geographic focus of the 11th EDF rural development programme. In an in-depth analysis, data for 2005-2014 on over 80 different socioeconomic and physical indicators were scrutinised for their thematic relevance to rural development, geographic level (province or district), accuracy, timeliness and accessibility.

Nutrition indicators included child stunting. Provinces were ranked against each indicator. Zambezia and Nampula were ranked lowest in terms of their current level of rural development and were prioritised for the future Programme.

**Supporting the scaling up of the Multi-sector Action Plan for the Reduction of Chronic Undernutrition (PAMRDC)**

- In light of the limited progress in recent years, the Government of Mozambique (GoM) and partners recognised the importance of establishing and implementing the Action Plan at the provincial and district levels.

Under the 11th European Development Fund (EDF), a nutrition-specific programme of approximately €30 million for the period 2016-2020 (currently being designed) will help build the Government’s capacity to implement provincial PAMRDC plans, strengthen the Nutrition Governance system at both central and local government levels, and deliver nutrition-related public services with a focus on Zambezia and Nampula.

The support will include both capacity-building and a direct channelling of funds. SETSAN’s capacities to coordinate, monitor, evaluate and report will be strengthened, as will analytical, planning and budgeting capacities in key Government sectors. The delivery of relevant components —such as water-sanitation-hygiene (WASH) and a package of essential nutrition services agreed in the plans will also be scaled up.

- The 11th EDF NIP also provides for complementary nutrition-sensitive support. For example small producers will be integrated into the value chains, infrastructure and systems that boost agricultural production and productivity. This will even include feeder roads to better link the worst affected rural areas with public services and economic opportunities.

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A focus on fortification

- Agriculture’s potential to contribute to improved nutrition has not yet received enough attention in Mozambique, so the EU (together with other partners) is supporting the fortification of processed foods with micronutrients. The EU has allocated €2.47 million (covering 2013-2018), half of which will focus on expanding fortification to products which are most commonly consumed in Mozambique. Besides promoting economic development, this technology can be a cost-effective strategy to improve nutrition as highlighted by the Copenhagen Consensus, if carefully thought-out and properly monitored. The fortification agenda will also benefit from centrally-managed funds — some of which are earmarked for a critical review of fortification and its actual results.

Delivering food security and nutrition interventions at grass-roots level

The Government of Mozambique is committed to improving its strategies for combating hunger by tailoring interventions to the specific socio-economic status of its vulnerable citizens. To adapt a global response to local reality, SETSAN and relevant ministries have embarked on a strategy to decentralise the PAMRDC. The involvement of 11 provincial and 158 district authorities in the planning, budgeting and execution of a multi-sectoral plan of action is not easy. Expertise was mobilized with EU funds to support the rolling out of the National Food and Nutrition Security Strategy to the most isolated communities.

Concurrently, civil servants, civil society representatives and the private sector are actively involved in the EU-funded MDG1.C initiative, learning on the job the best recipes for fighting hunger. The MDG1.C implementing partners (FAO, IFAD and WFP) are actively coaching Mozambicans to better link agriculture/food security and nutrition initiatives and to identify synergies between various sectors. Agriculture, access to market, health, water and sanitation, social protection, education etc, all have a role to play in Mozambique to achieve the common objective of reducing stunting levels among future generations.

Strategic Priority 3: Strengthening the expertise and the knowledge-base

The EU has helped build the expertise and knowledge needed to overcome undernutrition, and will continue to do so. Achievements and plans include:

Analysing causes

- EU support is coordinated with the Government, thereby contributing to the SUN Movement in Mozambique. For example, the EU funded the Nutrition Situation and Causal Analysis in 2014, which brought people together to better understand the geographical differences in stunting and their causal pathways. This helped to plan a common approach to improving food and nutrition security. In addition, the study helped define appropriate responses and to prepare for the mid-term review of the PAMRDC.

Learning lessons

- Support for the 2015 Mid-Term Evaluation of the MDG1.C Programme includes a specific focus on nutrition. By generating evidence-based lessons learned, this evaluation helps demonstrate the added-value of better linking food security and nutrition in Mozambique as well as the importance of multi-sectoral planning to reduce stunting. This will feed into the preparation of the upcoming 11th EDF on rural development and nutrition-specific interventions, and will benefit all partners concerned with nutrition and agriculture.