Enhancing Multisectoral Investments to Sustainable Nutrition Financing

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MALAWI 2025/26

Nutrition Budget Brief

Key Messages

1. **Malawi's progress toward achieving the 2030 global nutrition targets set by the World Health Assembly (WHA) remains off-track, with only one of six indicators currently on course—which is keeping prevalence of wasting among children 6-59 months below 5 per cent.** Promisingly, childhood wasting rate has declined from 4 per cent in 2010 to 2 per cent in 2024.

2. **Stunting remains persistently high, increasing slightly from 37 per cent in 2015/16 to 38 per cent in 2024,** against the WHA target of reducing it by 40 per cent by 2030. The national prevalence of stunting masks good progress happening in specific districts. Notably, thirteen districts[1] and three cities[2] have achieved stunting rates below the national average, demonstrating that targeted interventions can yield meaningful results. Meanwhile, fifteen districts[3] and one city[4], continue to report rates above the national average underscoring the need for intensified efforts in those areas.

3. **At the 2025 Nutrition for Growth Summit, Malawi reaffirmed its commitment to accelerate progress to improving nutrition outcomes to meet 2030 WHA targets.** The new government's commitment to introduce catalytic interventions is critical to achieving the 2030 WHA targets—40 per cent reduction in stunting, 50 per cent anemia reduction among women of reproductive age (15-49 years), 30 per cent reduction in low birth weight among infants, maintain childhood overweight below 5 per cent, 60 per cent increase in exclusive breastfeeding in the first six months and maintaining childhood wasting below 5 per cent.

4. **The Government, through the Department of Nutrition, is currently developing the Local Resource Mobilisation Strategy and a Multisector Nutrition Advocacy Strategy** to enhance sustainable nutrition financing in the medium to long term. The frameworks are expected to guide the Government in identifying and leveraging both tapped and untapped resources, pivotal in accelerating progress towards achieving the 2030 WHA targets.

5. **Despite these commitments, public investments in nutrition through the National Budget (on-budget) remain critically low,** at only 0.2 per cent of GDP and 0.6 per cent of the 2025/26 total government budget (TGB)—far below the benchmark of 3 per cent recommended by the SUN Eastern and Southern Africa (ESA) region.

6 **The procurement of essential components, such as nutrition supplies[5], remains heavily reliant on donor support and is often funded off-budget.** This dependency poses significant risks amid shifting donor priorities and the ongoing reduction in both global and local Official Development Assistance (ODA), threatening the sustainability of key nutrition interventions and the gains made.

7 **The devolved nutrition budget has increased from MK251 million to MK306 million, marking a 22 per cent increase in nominal terms.** However, it remains insufficient and represents only 0.3 per cent of the total district Other Recurrent Transaction (ORT) budget for 2025/26. Furthermore, there is currently no resource allocation formula to objectively determine allocations across districts.

Recommendations

The Government, through support from Development Partners, is encouraged to:

1. **Strategically prioritise low-cost and high-impact nutrition interventions,** while doubling down on efforts to reinforce the systems' approach, multisectoral collaboration, and coordination across stakeholders, key to accelerating efforts to reduce malnutrition in all its forms to achieve the WHA targets five years to 2030.

2. **Increase domestic investments in nutrition, while innovatively diversifying funding sources, as a pathway to unlock untapped funding mechanisms**, such as the Child Nutrition Fund (CNF), which matches each dollar investment by the Government for the procurement of nutrition supplies.

3. **Develop and implement both the nutrition domestic resource mobilisation strategy and the Multisector Nutrition Advocacy Strategy.** These frameworks are essential to unlock sustainable financing, reducing donor dependency, and drive measurable progress toward the 2030 WHA targets and Nutrition for Growth commitments.

4. **Enhance the functionality and use of the Nutrition Resource Tracking System** to improve transparency, monitor financial flows, and ensure accountability for both domestic and donor-funded nutrition interventions.

5. **Design and implement a nutrition resource allocation formula (NRAF), leveraging the ongoing redesign of the intergovernmental fiscal transfer system (IGFTS).** The formula is crucial in improving the equity of spending, ensuring districts are funded based on their geographical coverage, needs, and vulnerabilities, among other factors.

The Child Nutrition Fund matches each dollar investment by the Government for the procurement of nutrition supplies.

Introduction

This budget brief analyses nutrition spending trends in Malawi's 2025/26 budget and offers recommendations for improving the financing of nutrition interventions. The analysis in this brief draw on a comprehensive review of several budget documents, including Financial Statements, Annual Economic Reports, Detailed Budget Estimates, Programme-Based Budgets (PBBs), and ceilings for Local Councils from 2021/22 to 2025/26.

The analytical framework guiding this brief is rooted in UNICEF's 2019 systems approach to maternal and child nutrition, which has been further adapted and operationalised through the Southern African Development Community (SADC) Nutrition Tracking Tool. The SADC tool adopts the systems approach to effectively strengthen and hold accountable five key sectors—food, health, education, social protection, and water, sanitation, and hygiene (WASH)—in their contributions to improved nutrition outcomes. These systems operate within a broader "enabling environment" that includes supportive policies, governance structures, financing mechanisms, and data systems. Through this tool, nutrition interventions were systematically identified and classified as either direct or indirect (Table 1).

Using the SADC Tool, the analysis identified seven key Ministries, Departments, and Agencies (MDAs) whose programmes directly or indirectly contribute to improved nutrition outcomes (see Table 2). Relevant budget lines within these MDAs were tagged and classified using a systems-based approach, depending on their alignment with nutrition-specific and nutrition-sensitive interventions. To enhance the accuracy of nutrition financing estimates, each direct budget line was assigned a weight of 100 per cent, while indirect budget lines were weighed proportionally based on their estimated contribution to addressing malnutrition across sectors.

TABLE 1

Direct and Indirect Definitions

Classification	Explanation
Direct	Direct interventions are actions or programmes specifically designed to address and improve nutrition outcomes.
Indirect	Indirect interventions are actions or programmes that may not primarily target nutrition but have a positive impact on nutritional status by addressing broader determinants such as poverty, education, or food security.

Source: SADC Nutrition Financing Tracking Tool: Methodological Note

TABLE 2

The Systems Approach and Relevant MDAs and Budget Lines

System	MDA	Visible Nutrition Budgets	Intervention (Direct / Indirect)
Health	MoGCDSW	Family Nutrition and HIV	Direct
	MoH	Inter-sectoral Determinants	Indirect
		Health Promotion	Indirect
		NCDs	Direct
		Multi-Sectoral Nutrition Programme-Reduce Stunting in Malawi II (Germany-KFW)-DI	Direct
Food	Agriculture	Food and Nutrition Security Programme	Direct
		Afikepo Nutrition Programme	Direct
		Adolescent Nutrition - Sensitive Agric Pilot Project	Direct
		Crop production	Indirect
		Livestock and Fish Production	Indirect
		Post-Harvest loss Management	Indirect
	Natural Resources	Sustainable Fisheries, Aquaculture Development and Watershed Management (DII)	Indirect
		Sustainable Fisheries, Aquaculture Development, and Watershed Management-DI	Indirect
		Aquaculture Development Project-DII	Indirect
		Aquaculture Mega Farm- DII	Indirect
		Fisheries Production	Indirect
Education	MoGCDSW	Investing in Early Years (World Bank)- DI	Indirect
		ECD- Generic	Indirect
	Local Councils	ECD	Indirect
	MoE	School Health Nutrition HIV and AIDS	Direct
WASH	MoWS	Sanitation & Hygiene	Indirect
	Local Councils	Water Supply (Boreholes)	Indirect
	MoWS	Sustainable Rural Water Supply and Sanitation	Indirect
Social Protection	MoGCDSW	Social Cash Transfer (SCTP)	Indirect
		SCTP-DPs-DI	Indirect
	NLGFC	Regular SCTP-DI	Indirect
	MoGCDSW	Resilience, Livelihoods, and Nutrition	Indirect
Enabling	NLGFC	Nutrition (Local Councils)	Direct
	MoH	DNHA	Direct

Context and Overview of the Nutrition Sector in Malawi

The Government of Malawi is progressively strengthening the enabling environment to enhance the nutrition landscape in Malawi. The Government rolled out the Malawi National Nutrition Policy and Strategic Plan (2025–2030)[6] in June 2025, under the theme Nourishing Malawi: Building a Healthier Future Together. The policy offers a holistic approach to addressing the root causes of malnutrition—poverty, poor dietary habits, systemic challenges in health, agriculture, education, and climate resilience. The implementation of the policy shall be complemented by other sectoral-specific strategies and guidelines[7] to achieve a well-nourished and healthy population that effectively contributes to the attainment of the long-term vision, Malawi 2063.

Underpinning the policy governance are the global and regional commitments that Malawi has leveraged to strategically position maternal and child nutrition as a cornerstone of national development. In 2025, the Government of Malawi renewed its commitment to achieving the 2030 World Health Assembly (WHA) Global Nutrition Targets.[8] Complementing these targets are the Nutrition for Growth (N4G) commitments[9], which Malawi reaffirmed during the 2025 Paris Summit. All these targets present an opportunity for Malawi to accelerate nutrition financing, strengthen accountability mechanisms, and foster multisectoral coordination as part of the renewed implementation of the Scaling Up Nutrition (SUN) 3.0 Strategy and achieving Sustainable Development Goal Targets.[10]

Malawi is on course to meeting only one out of the six WHA 2030 global nutrition targets aimed at improving maternal, infant, and young child nutrition—which is keeping the prevalence of wasting among children 6-59 months below 5 per cent.[11] Nationally, wasting has declined from 4 per cent in 2010 to 2 per cent in 2024,[12] with two districts—Likoma (17 per cent) and Nkhotakota (5.3 per cent), exceeding the WHA threshold and 11 districts reporting rates above the 2 per cent national average[13].

Malawi faces the triple burden of malnutrition: undernutrition, micronutrient deficiencies, and rising overnutrition.

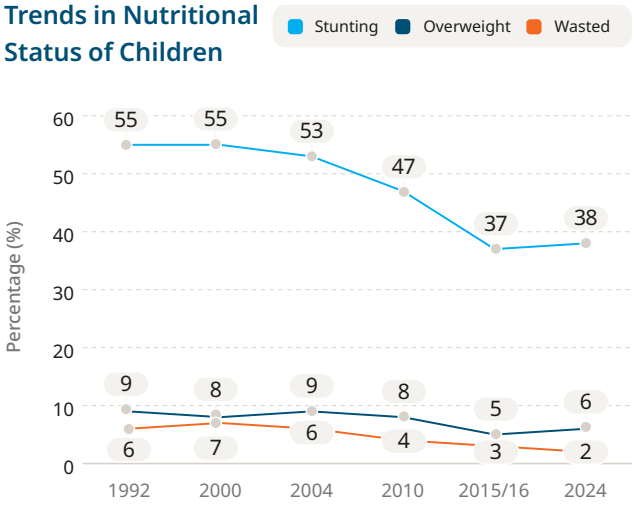
Stunting remains persistently high, increasing slightly from 37 per cent in 2015/16 to 38 per cent in 2024, against the WHA target of reducing it by 40 per cent by 2030. The national prevalence of stunting masks good progress happening in specific districts. Notably, thirteen districts[14] and three cities[15] have achieved stunting rates below the national average, demonstrating that targeted interventions can yield meaningful results. Meanwhile, fifteen districts[16] and one city[17],continue to report rates above the national average, underscoring the need for intensified efforts in those areas.

Incidents of overnutrition are also on the rise, with about 21 per cent of the population between 15 and 49 years being overweight, while 6 per cent of children are overweight—just slightly above the WHA targets of maintaining under-five overweight below 5 per cent. This evolving nutrition landscape highlights the increased incidence of the triple burden of malnutrition: undernutrition, micronutrient deficiencies, and rising overnutrition—underscoring the need for scaling multisectoral efforts to address the emerging health burden.

Progress on maternal, infant, and young child nutrition (MIYCN) remains slow and concerning, with key indicators falling short of national and global targets. Exclusive breastfeeding rates have remained persistently low, at 60 per cent as of 2024, falling short of the WHA targets[18] of increasing this rate by 60 per cent by 2030 (Figure 2). Notably, only 24 per cent of children aged 0-5 months receive the minimum dietary diversity, and just 8.7 per cent meet the minimum acceptable diet[19]. Similarly, anemia among women of reproductive age (15–49 years), has worsened from 28 per cent in 2010 to 32 per cent in 2022[20] against the WHA targets of a 50 per cent reduction by 2030[21]. These persistent gaps reflect systemic challenges in nutrition education, food access, and service delivery, and pose serious implications for child survival, cognitive development, and long-term productivity.

FIGURE 1

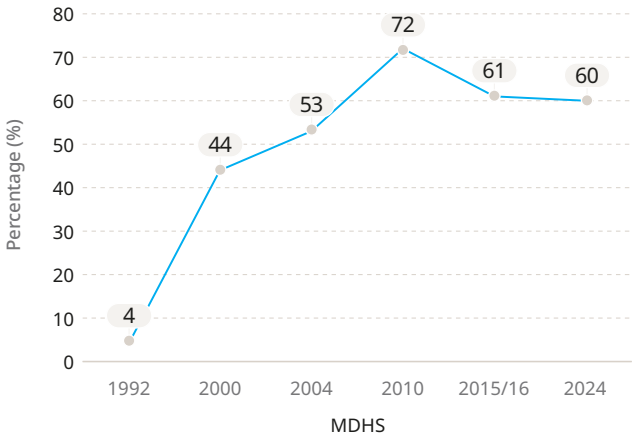
Trends in Nutritional Status of Children



Source: Malawi Demographic and Health Surveys (2024)

FIGURE 2

Per cent of children aged 0-5 months who are exclusively breastfed



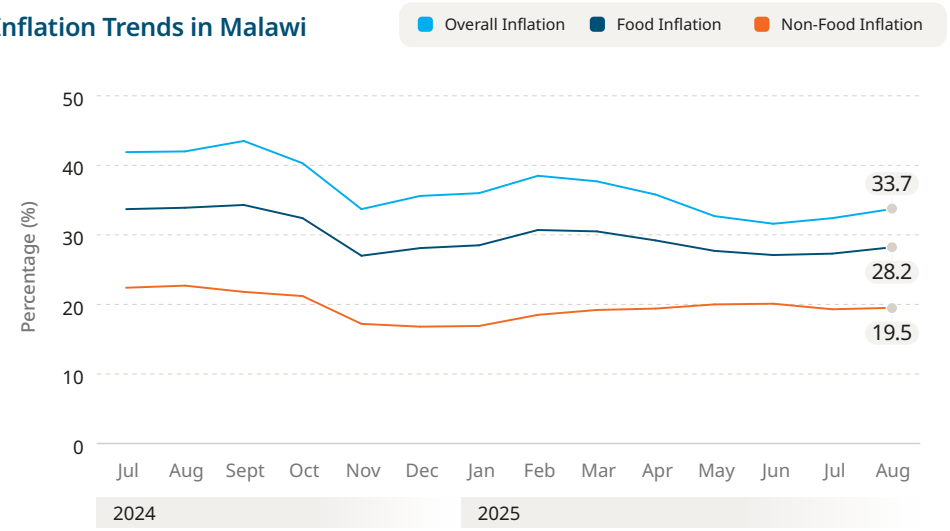
Source: Malawi Demographic and Health Surveys (2024)

Food insecurity continues to worsen, with approximately 4 million people—representing 22 per cent of the population—projected to face acute hunger during the lean season (October 2025 to March 2026).[22] The vast majority of these (3.9 million) are from the rural areas, with only 64 thousand people living in urban areas. Additionally, 6 million people (33 per cent) are classified as stressed —with minimal adequate food but struggle to meet essential non-food needs, relying on limited and unsustainable coping strategies. This crisis is driven by a combination of factors, including limited availability of agricultural inputs, high import costs, and climatic variability, that have disrupted the food systems and lowered productivity.

The persistent inflationary pressure in Malawi threatens to worsen food and nutrition security, undermining years of progress in improving nutrition outcomes (Figure 3). As of August 2025, headline inflation stood at 28.2 per cent, largely driven by high food inflation at 33.7 per cent.[23] These sustained inflationary pressures, compounded by the upcoming lean seasonal period (October 2025 to March 2026), threaten to limit access to safe and nutritious food, particularly among vulnerable groups such as children and women, whose nutritional needs are more susceptible to shocks, worsening acute malnutrition in Malawi.

FIGURE 3

Inflation Trends in Malawi



Source: Reserve Bank of Malawi (RBM) Statistics

As of August 2025, headline inflation stood at 28.2 per cent, largely driven by high food inflation at 33.7 per cent.

Malawi's vulnerability to climate change poses a threat to ongoing efforts towards strengthening the transformative food systems initiatives to enhance food and nutrition security. The rapid and erratic rainfall patterns and recurrent droughts over the past five years have exposed the fragility of food and nutrition security in Malawi, undermining all dimensions of food security—availability, access, utilisation, and stability that are enablers of nutrition. To safeguard nutrition gains and build resilience, the Government is encouraged to scale up targeted interventions, like climate-smart agriculture, nutrition-sensitive social protection, and nutrition mainstreaming to ensure the lives of vulnerable populations—particularly women and children—are protected from climate-induced shocks and supported through sustainable and equitable access to nutritious food.

Malawi is on course to recruiting Nutrition Frontline Workers within the district councils to assist in delivering community-based nutrition services. However, uptake has been slow, largely attributed to limited funding. To date, only 41 positions have been established across 11 district councils—far below the national target of 1,081 positions across all 28 districts.

Considering the criticality of this position, particularly at the community level, the Department of Nutrition (DN) is encouraged to leverage the new government and political leadership to re-ignite commitments towards recruitment of this cadre—optimising the promised increase in direct community investments, especially in districts with high stunting levels.

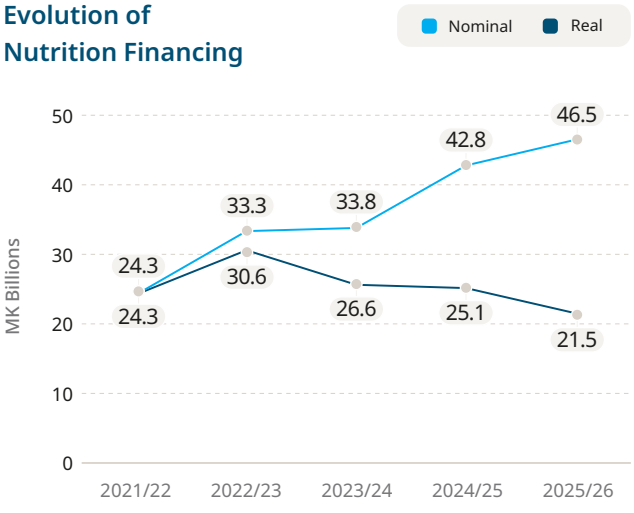
Size of Nutrition Spending

Allocations to nutrition programmes through the National Budget (on-budget) have increased by 9 per cent, from MK42.8 billion in 2024/25 to MK46.5 billion in 2025/26 (Figure 4). The increase is largely attributed to substantial increases in allocations to key programmes like the Food and Nutrition Security Programme (FNSP) which has increased by 4 times, from MK966 million in 2024/25 to MK4.1 billion in 2025/26. The allocation to the Department of Nutrition (DN) has doubled from MK860 million in 2024/25 to MK1.7 billion in 2025/26. However, in real terms, the budget has declined by 21 per cent, factoring in an average inflation of 27 per cent.

However, the size of public investments in nutrition continues to fall short of the estimated financial needs (Figure 5). As a share of Total Government Budget (TGB), the nutrition budget has significantly declined from 1.2 per cent in 2022/23 to 0.6 per cent in 2025/26 and has remained constant as a share of GDP, at 0.2 per cent. The current levels of nutrition investments, therefore, remain far short of meeting the regional benchmarks, such as those set by Eastern and Southern Africa Scaling Up Nutrition (ESA-SUN), which recommend that ESA nations allocate at least 3 per cent of the national budget to nutrition.

FIGURE 4

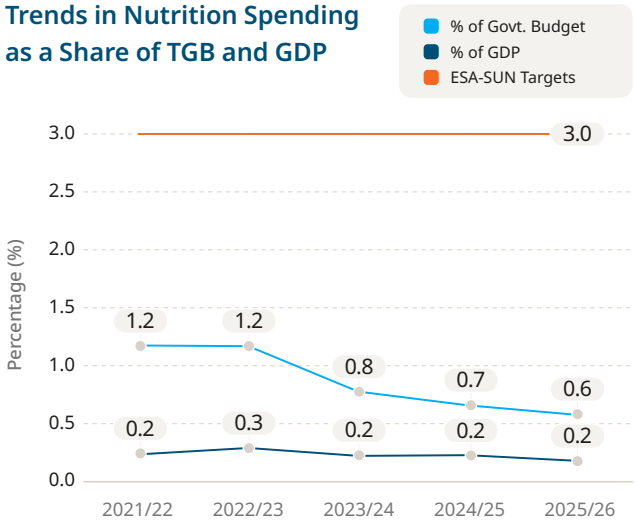
Evolution of Nutrition Financing



Source: Government Budget Documents (2021/22 to 2025/26)

FIGURE 5

Trends in Nutrition Spending as a Share of TGB and GDP



Source: Government Budget Documents (2021/22 to 2025/26)

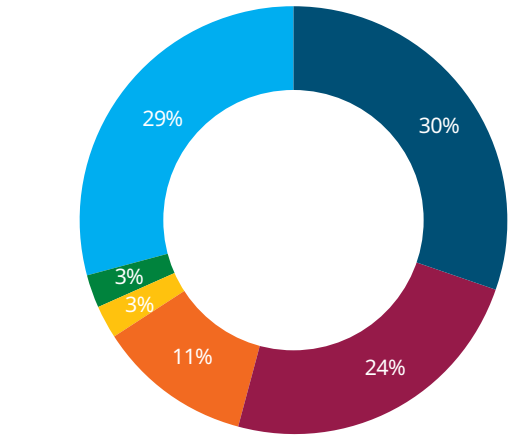
Composition of Nutrition Spending

Using a three-year average (2023/24 to 2025/26), the largest nutrition-funded programme is Crop Production, with a weighted average share of 30 per cent (Figure 6). Investing in Early Years Project (IEYP) receives the second-highest allocation, with a share of 24 per cent, followed by regular SCTP (11 per cent), Department of Nutrition (3 per cent) and School Health and Nutrition (2 per cent). Allocations to all other nutrition programmes collectively account for a 29 per cent share of nutrition financing within the same period.

The majority of nutrition programmes are therefore budgeted under the Ministry of Agriculture, accounting for an average share of 40 per cent between 2023/24 and 2025/26 (Figure 7). This is largely attributed to huge allocations to crop production, which is one of the key programmes within the ministry. The Ministry of Gender, Community Development and Social Welfare (MoGCDSW) is the second-largest funded, averaging 33 per cent, followed by the National Local Government Committee (NLGFC) (14 per cent), channelled towards nutrition-sensitive social protection programmes and local councils. Interventions through the Ministry of Natural Resources and Climate Change (MoNRCC) and the Ministry of Water and Sanitation (MoWS) are the least funded, accounting for an average share of 2 per cent and 0.1 per cent, respectively.

FIGURE 6

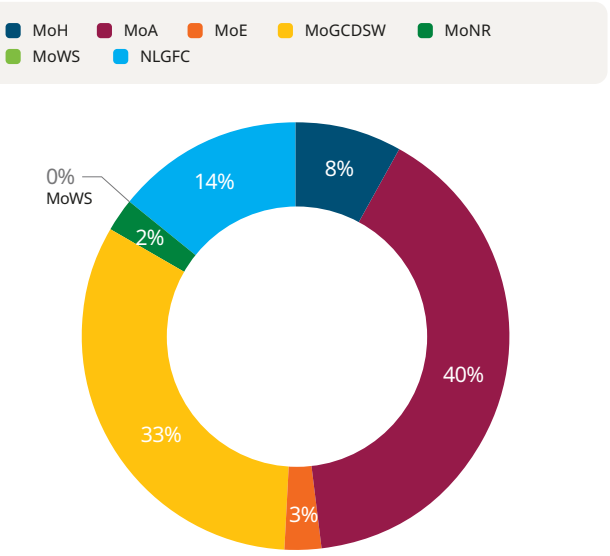
Composition of Nutrition Financing by Programme, Average 2023/24 -2025/26



Source: Government Budget Documents (2023/24 to 2025/26)

FIGURE 7

Composition of Nutrition Spending by MDA, Average 2023/24 to 2025/26



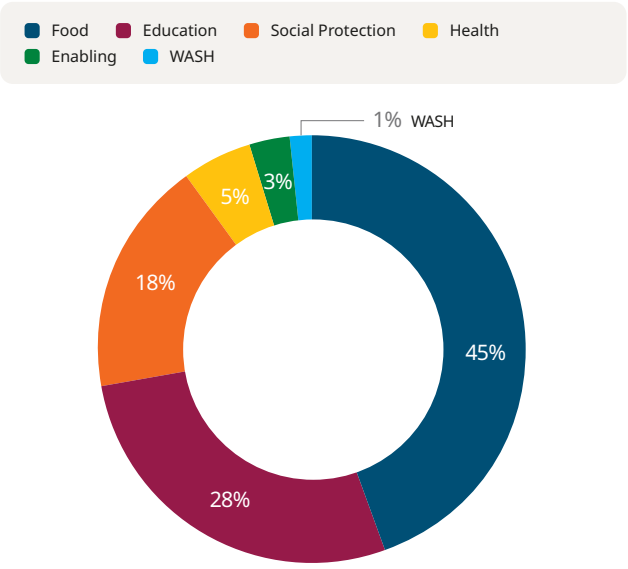
Source: Government Budget Documents (2023/24 to 2025/26)

Using the systems approach, nutrition interventions through food systems received the largest share of funding within the three-year average period, accounting for 45 per cent (MK18.1 billion) between 2023/24 and 2025/26 (Figure 8). Nutrition interventions through the education sector are the second largest, receiving an average of 28 per cent, followed by social protection (18 per cent). The share of nutrition financing allocated to the health, enabling environment, and WASH systems averages 5 per cent, 3 per cent, and 1 per cent, respectively. This is a concern, given that health sector-related nutrition strategies account for 4 of the 10 most common interventions for countries that successfully reduce stunting. WASH accounts for 1 per cent.

Only 5% of nutrition financing is allocated to the health system and just 1% to WASH.

FIGURE 8

Nutrition Spending by Sector, Average 2023/24 to 2025/26



Source: Government Budget Documents (2023/24 to 2025/26)

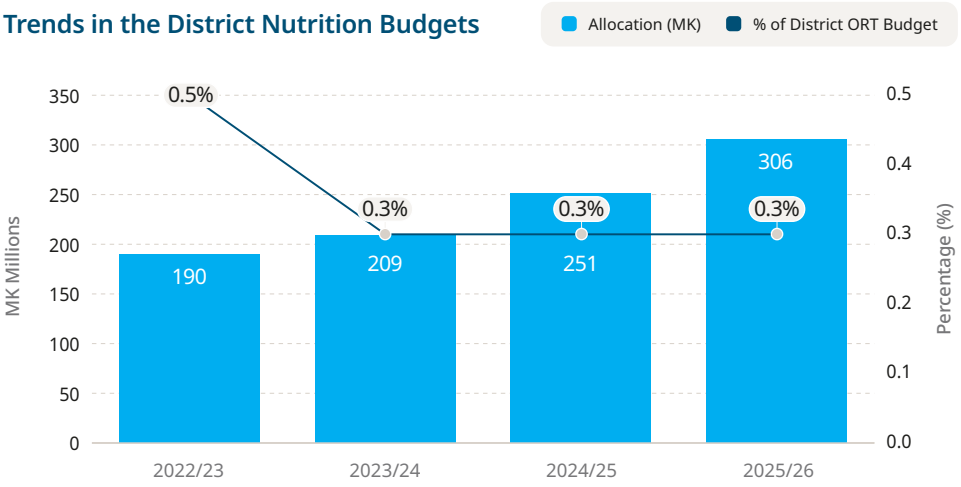
Fiscal Decentralisation and Equity Considerations

The devolved nutrition budget has increased from MK251 million to MK306 million, marking a 22 per cent increase in nominal terms (Figure 9). However, in real terms, the allocation reduced by 11 per cent, considering the average inflation of 27 per cent. The allocation remains below the 5 per cent 2025 Nutrition for Growth Targets and represents only 0.3 per cent of the total district Other Recurrent Transactions (ORT) budget for 2025/26 (Figure 9).

The NLGFC is developing the Nutrition Resource Allocation Formula as part of the larger Inter-Governmental Fiscal Transfer (IGFT) reform. The formula is crucial in improving the equity of spending, ensuring local councils are funded based on their geographical coverage, needs, and vulnerabilities, among other factors. As of 2025/26, the NLGFC is applying a marginal top-up approach based on the previous year's allocation, an arbitrary approach which does not consider the unique district-specific nutrition needs and socio-economic factors.

FIGURE 9

Trends in the District Nutrition Budgets



Source: NLGFC, 2025/26

Despite a nominal increase, the devolved nutrition budget actually reduced by 11 per cent in real terms after accounting for inflation.

Nutrition Budget Credibility and Execution

The 2024/25 nutrition budget was highly credible, with only a 1 per cent variance between approved and revised allocations—well within the recommended ±5 per cent benchmark.

Nutrition budgets faced very minimal adjustments in 2024/25, as the variance between the approved and revised nutrition allocation was 1 per cent (Table 3). This was within the recommended ±5 per cent as per the Public Expenditure and Financial Accountability (PEFA) framework for a budget to be deemed credible. While allocations for most budget lines were maintained during the mid-year budget review (MYBR), budgetary provisions to food systems related lines within the Ministry of Natural Resources and Climate Change faced notable adjustments, at 9 per cent, largely due to the downward revision of development projects—Sustainable Fisheries, Aquaculture Development and Watershed Management, Aquaculture Development Project and Fisheries Production all of which were revised down by 7 per cent, 12 per cent and 11 per cent, respectively. Going forward, strengthening budget credibility and execution is key to enhancing predictability and ensuring the timely provision of planned nutrition services and activities.

TABLE 3

Performance of Nutrition Budgets

MDA	2024/25 Approved (Million MK)	2024/25 Revised (Million MK)	Execution Rate (%)
MoH	3,871	3,871	100
MoA	15,360	15,268	99
MoE	1,080	1,080	100
MoGCDSW	13,506	13,505	100
MoNR	2,871	2,605	91
MoWS	13	13	100
NLGFC	6,550	6,550	100

Source: Government Budget Documents (2025/26)

Nutrition Financing

The financing of nutrition interventions, such as nutrition supplies, remains heavily reliant on donor support and is often funded off-budget. This dependency poses significant risks amid shifting donor priorities and the ongoing reduction in Official Development Assistance (ODA), threatening the sustainability of key nutrition interventions. For instance, the withdrawal of key donors such as the U.S. Government has led to a reduction in nutrition financing by approximately USD$7.1 million[24], equivalent to 27 per cent of the 2025/26 on-budget nutrition allocation (Table 4). ODA withdrawal threaten to further worsen stunting levels, and derail community-based nutrition services, —undermining years of investment in human capital development.

Unlocking new and innovative financing sources is particularly important given the shifting of global funding priorities and geopolitical dynamics that threaten the sustainability of critical nutrition programmes. This requires the Government to progressively increase and sustain domestic financing that could help unlock new financing for critical nutrition interventions in Malawi, including accessing financing instruments such as the Child Nutrition Fund (CNF)[25]. CNF is a matched funding that matches each dollar investment made by the Government for the procurement of nutrition supplies[26].

TABLE 4

Trends in US Funding to Nutrition in Malawi, Thousand US$

Fiscal year	2021	2022	2023	2024	2025	% Reduction	% of the 2025/26 Nutrition Budget
Grand Total	23,865	31,275	35,141	49,465	7,068	86	27

Source: US Foreign Assistance Dashboard

Amidst shifts in funding dynamics, the Government, through the Department of Nutrition, is currently developing the Local Resource Mobilisation Strategy and a Multisector Nutrition Advocacy Strategy to guide in strengthening domestic investment and coordinating financing efforts. These strategies are expected to progressively enhance the Government's capacity to mobilise diverse resources both locally and globally, while firmly anchoring nutrition as a national development priority and ensuring sustainable financing for nutrition interventions.

The National Nutrition Resource Tracking System (NURTS)[27] presents a strategic opportunity to enhance transparency and accountability in nutrition financing. The Government, through the Department of Nutrition, has previously used NURTS to effectively track resource flows at both national and district levels, supporting evidence-based planning and equitable allocation. While its functionality is limited due to funding constraints, the Government is encouraged to revitalise NURTS within a broader resource mobilisation strategy to realise its full potential and strengthen the resilience of Malawi's nutrition sector.

Citations

[1, 13, 14] Karonga, Nkhatabay, Rumphi, Mzimba, Likoma, Nkhotakota, Ntchisi, Salima, Lilongwe, Blantyre, Thyolo, Mulanje, Balaka.

[2, 15] Zomba, Lilongwe, Mzuzu.

[3, 16] Chitipa, Dowa, Mchinji, Dedza, Ntcheu, Mangochi, Machinga, Zomba, Phalombe, Chikwawa, Nsanje, Neno, Chiradzulu, Kasungu, Mwanza.

[4, 17] Blantyre City.

[8, 11, 18] https://www.who.int/news/item/27-05-2025-world-health-assembly-re-commits-to-global-nutrition-targets-and-marketing-regulations.

[5] Ready-To-Use Therapeutic Foods (RUTF), nutrition screening toolkits, reporting tools, Therapeutic milk, Micronutrient powders.

[6] Nutrition Policy June 2025 and National Multisector Nutrition Strategic Plan 2025 - 2030 June 12.

[7] Nutrition Education and Communication (NECS); Maternal Infant and Young Child Nutrition (MIYCN); Micronutrient; Adolescent Nutrition; School Health and Nutrition (SHN); Early Childhood Development (ECD); Integrated Management and Prevention of Oedema and Wasting (IMPOW); Nutrition related – Noncommunicable diseases (NNCDs); Agriculture Sector Food and Nutrition (ASFN); Nutrition Sensitive Social Protection (NSSP); Nutrition Advocacy; and, Local Resource Mobilisation.

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[21] Malawi Demographic and Health Surveys (2015/16 and 2024).

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[26] Malawi can access CNF support through a partnership involving CIFF, UNICEF, and the FCDO: https://ciff.org/priorities/child-health-development/nutrition/.

[27] https://documents1.worldbank.org/curated/en/963321481836642824/pdf/ISR-Disclosable-P125237-12-15-2016-1481836631834.pdf.

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