Malnutrition remains a challenge nationally and is a major contributor to preventable child deaths in Malawi. Children's nutritional status is a reflection of their overall health and development, and a sign of the household, community, and national investment in family health. Many Malawian children often suffer from micronutrient deficiencies, which include anemia and zinc deficiency. Stunting (being too short for one's age), which is at 37.1%, is also a major challenge in Malawi and children living in rural Malawi are more affected. The UNICEF Nutrition Programme aims to achieve an outcome of at least 60% of children under 5 years old having access to quality nutrition services by 2018. UNICEF also supports the Nutrition Unit in the Ministry of Health to plan, manage, and carry out quality nutrition interventions. In addition, UNICEF aims to ensure that during times of emergency, mothers and children receive lifesaving nutrition interventions.

Malawian has made significant progress in reducing stunting by 10% in 5 years. In addition to this the Nutrition Programme has played a pivotal role in saving the lives of 45,000 children under 5 in 2017 by treating them for acute malnutrition.

Despite these great developments, malnutrition remains a serious challenge and major contributor to child mortality in Malawi.

The immediate causes of malnutrition and micronutrient deficiencies in Malawi are poor diets, with only 8% of children between the ages 6-23 months meeting the minimum acceptable diet. Another cause of malnutrition is infectious diseases such as diarrhoea, which lead to increased chances of growth faltering.

The percentage of stunting is higher in the rural areas, with 39% of children living in rural Malawi being stunted as compared to 25% of children in urban areas.

UNICEF and its partners are working to ensure that cases of acute and chronic malnutrition are adequately addressed in order to ensure improved nutrition and well-being of the population which can consequently contribute to the growth and prosperity of Malawi.

UNICEF Malawi supports interventions in nutrition aimed at the prevention of stunting. Interventions to prevent stunting focus particularly on adequate nutrition for adolescent girls, pregnant girls and women, as well as babies during their first 1,000 days between conception and their second birthday. These interventions include the provision of maternal iron/folate supplementation, promoting exclusive breastfeeding, promoting age appropriate complementary feeding, and provision of Vitamin A supplements to children between 6-59 months. Other interventions consist of de-worming, promoting the consumption of micronutrient rich foods, and the prevention and treatment of children with severe acute malnutrition. The UNICEF Nutrition Programme also uses Community Based Care Groups as platforms to deliver behavior change communication messages that promote the uptake of community based health and nutrition services.

The implementing partners of the UNICEF Nutrition Programme are the Department of Nutrition, HIV and AIDS in the Ministry of Health, the Nutrition Unit and several Non-Governmental Organisations.

Prevention of Stunting
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Strengthening the capacity of health facilities
UNICEF supports the Government of Malawi with systems strengthening, capacity building, and monitoring, to provide quality nutrition services in health facilities and community based health facilities across the country.

Strengthening supply chain for nutrition commodities
UNICEF works towards strengthening the government of Malawi’s capacity for supply chain logistics to ensure that lifesaving nutrition supplies are readily available to treat children with severe acute malnutrition.
Promoting nutrition through backyard gardens and cooking classes

By Joseph Scott, UNICEF Malawi

Monica was inspired to become a health volunteer after her child suffered from malnutrition in 2007 and nearly died. This experience convinced her that she needed to do something to help save lives of children in her community. Monica knew that if her children were to be healthy, she had to listen to the advice given to her by health workers. More importantly, Monica participated in a training supported by UNICEF that equipped her to lead care group sessions promoting the establishment of backyard gardens in local communities.

She convinced her husband to start a backyard garden, where they plant different types of vegetables. As well as diversifying the family’s food intake, it also meant that when floods damaged their maize crop this year, the crops in the backyard garden were not affected.

“I always explain to mothers the importance of backyard gardens. They are an easy way to access different food groups as they don’t require much resource. Vegetables such as spinach and pumpkin leaves are easily found in the village and these can do much to improve the nutrition of not only the children but the whole family,” says Monica.

Monica has been able to help her community members to establish backyard gardens. As a role model, she explains the importance of having different vegetables within the household. “I always try to advise mothers to at least plant some vegetables in their backyard. These are so important especially for mothers who have small children as they can access nutritious food within their home,” she says.

Currently, nearly every household in Chakhuma Village has a backyard garden. The volunteer structure, also known as care groups, has been working hard to popularise the idea of backyard gardens as one way of fighting malnutrition.

UNICEF, with financial support from the Africa Solidarity Trust Fund, is working to build the resilience of communities like Monica’s to cope with droughts and other related shocks. In Phalombe, UNICEF, in collaboration with the Food and Agriculture Organisation (FAO), implemented a nutrition programme that included back yard gardens, to improve food diversification and cooking classes, to teach mothers how to cook nutritious meals for their children.

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