

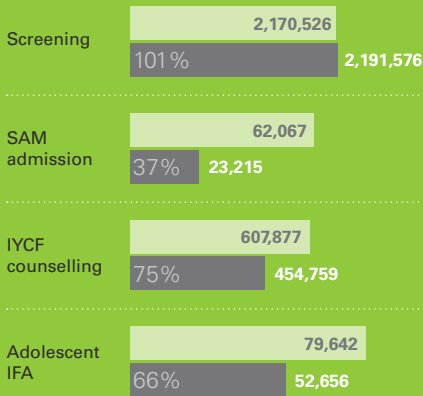


# Malawi Nutrition Cluster Updates

## Nutrition Response Progress

August 2023

Vol.5



## CMAM Programme Performance

SAM Children 6-59 months (July 2023)

Cure rate

94.6%

Death rate

1.2%

Non-responder

1.6%

Default rate

2.6%

**16.2%**

**MAM Admissions** of children and pregnant women has increased by 16.2 percent from the same month in the previous year (2,373 in June 2022 and 2,759 in June 2023).

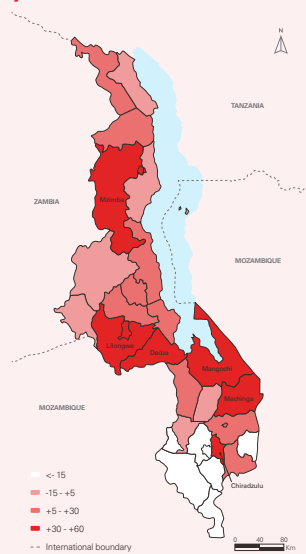
## Key Highlights

In July, 2,493 children under five years were admitted for treatment of severe acute malnutrition (SAM), showing a 4.5 percent increase from 2,379 in July 2022. In the same month, 2,177 children and 582 pregnant and lactating women were admitted as having moderate acute malnutrition (MAM), showing a total of 16.2 per cent increase from July 2022.

In August, 99,678 children under five were screened in nine districts and 618 children (0.6 percent) were identified to be malnourished and referred to health facilities for further treatment (163 children with SAM and 455 children with MAM).

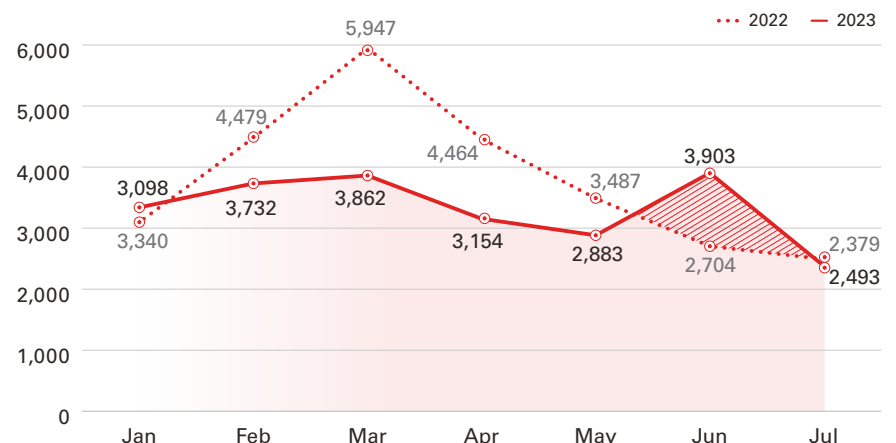
In August, 81,900 caregivers of children 0-23 months (4,987 Male, 76,913 Female) received counselling on optimal infant and young child feeding practices. This was achieved through care group sessions, one-on-one counselling at health facilities, growth monitoring and promotion sessions, and mass screening in communities affected by cholera and floods.

Difference in number of SAM cases among children under five July 2022/23



**SAM Admissions among children under five increased by 30 percent on average in seven districts** compared to the same month in previous year (Chiradzulu, Dedza, Mangochi, Machinga, Mzimba, Lilongwe, Nkhonkhotakota)

## Trends of severe acute malnutrition admissions 2022/23





29-year-old Pilirani Kachimanga is seen carrying her 6 months old daughter Trinity Kachima at their home in Lipalama Village in Chiradzulu southern Malawi - ©UNICEF Malawi/2023/Chikondi

## Volunteers tackle nutrition myths for healthy children

### The importance of diversified diets

By James Chavula (UNICEF Malawi)

Pilirani Kachimanga grew up hearing that eggs are hazardous for pregnant women and lactating mothers.

During her first pregnancy over a decade ago, elderly women warned her that she would give birth to a crybaby with a head “as hairless as an egg” if she broke the taboo.

“The thought of having a bald-headed baby who wept relentlessly was terrifying, but I didn’t stop eating eggs for my health and the good of the unborn child,” narrates Pilirani. “Strangely, nothing peculiar happened, except that I looked healthier than my friends who believed the myths and my baby was born with greater weight than theirs.”

The 39-year-old woman, who defied the fear of the unknown, recalls that many pregnant women, breastfeeding mothers and children aged below five were malnourished in Lipalamu area, Traditional Authority Mpunga in Chiradzulu District, southern Malawi.

Overdependence on *nsima* and porridge from maize flour, energy-boosting meals with scanty nutrients required for children’s growth was to blame.

“The elders also told me a baby cannot live on breast milk alone, but babies spoon-fed porridge instead of being exclusively breastfed for six months, had ballooned bellies, low weight and slow growth,” she explains.

Pilirani feels lucky to have overcome the myths for the benefit of her three children.

“Many children in my neighborhood were malnourished due to myths that created fear of the unknown. From 15-year-old Femia to seven-month-old Trinity, none of my three children suffered malnutrition,” she brags. Pilirani exclusively breastfed the three children for six months. Her smiling baby, born on 27 November 2022, personifies the benefits of exclusive breastfeeding, not extra foods likely to harm babies’ healthy growth and development.

On 27 May 2023, she introduced light complementary feeding, mostly porridge comprising a mix of ingredients from six food groups in Baby Trinity’s diet.

“I kept hands off extra meals because breast milk contains all the necessary nutrients for a baby and her digestive system wasn’t well-developed to break hard food,” Pilirani explains.

Trinity’s complementary platter contains porridge enriched with groundnut flour, eggs, vegetable soup, pawpaw juice and other foodstuffs.

Pilirani learned to prepare the soft meal with a bit of everything from *masanje*, the communal cooking demonstrations convened by nutrition promoters and clusters who share the importance of diversified diets and ways to prepare nutritious meals from locally available foodstuffs.

“Apart from the enriched porridge which my daughter takes four times a day, I also learned how to cook porridge from pumpkins and make juice from pawpaws and sweet potato leaves,” she states.

The interventions such as cooking lessons and door-to-door visits by the community-based volunteers helps fight malnutrition, and have proved pivotal in shattering myths and misconceptions fueling malnutrition in children.

“During the sessions, promoters tell us to eat more than just *nsima* which every Malawian grows up with. They show us many nutritious local foods that we can eat for our benefit if we master different ways of preparing them,” she explains.

Pilirani is one of 360 mothers under Mwaithu care group in Traditional Authority Mpunga, Chiradzulu District in southern Malawi. The group led by nutrition promoter Elias Maluwa comprises 36 clusters of 10 households each. The volunteers work with cluster leaders and village heads to end malnutrition. This is part of Afikepo Project funded by the European Union to ramp up nutrition, sanitation and hygiene so that children can live healthy lives and reach their full potential.

“We don’t want any child to suffer from malnutrition and its debilitating effects, so we work closely with village heads to confront the myths and misconceptions fueling malnutrition. We now have healthy children and mothers,” Elias states.

Sights of healthy children at play delight the volunteer who believes a healthy start in life boosts their growth, learning and productivity.

“We happily work to create a community free from malnutrition because Malawi needs healthy people to develop. We are saving our children and time once spent nursing sickly children. When children are happy and free from preventable conditions, we are all happy,” he explains.

Elias and his group also promote sanitation and hygiene to combat diseases that fuel malnutrition in children.

“Before Cyclone Freddy struck in March this year, 177 households had latrines. However, 82 were destroyed by the torrents that battered our area for four days nonstop,” he says.

None of the 11 pregnant women and 22 children aged under five in his zone was diagnosed with malnutrition in May this year.

**“The future looks bright if we continue working together to have healthy children born of healthy mothers and protect every child from malnutrition,” he explains.**

Maxwell Matumbo, one of the 20 Health Surveillance Assistants at Thumbwe health Centre, is equally optimistic.

He explains: “The community-based agents, especially the promoters, cluster leaders and village heads, are our ears and eyes in areas where they live. As community health workers, we are too few to get to every household, but these people quickly alert us when they detect suspected malnourished children, sanitation gaps and myths.

“As a result, the number of malnourished children detected during nutrition screening sessions in communities and at our health facilities is decreasing. From January to June this year, only two children received ready-to-use therapeutic food [a peanut butter-like paste] used to treat severe acute malnutrition without complications. Until 2019, we used to find eight malnourished children a month.”

The community health worker finds it incredible that no child is admitted to the health centre’s nutrition rehabilitation unit or receiving milk used to treat complications of severe acute malnutrition.

“I thank Afikepo for empowering community-based agents to confront malnutrition and myths in their midst. Now children are healthy and growing well, thereby spending more time in school, learning to become productive citizens, not burdened with preventable disease or wasting time and money on hospital trips.”



Malita and her grandmother at Mota Engil Camp where they participated in the camp feeding programme - ©The Hunger Project/2023/Manda



Cooking demonstration on how to prepare a nutritious sweet potato porridge during camp feeding at Bangula camp - ©The Hunger Project/2023/Manda

## Preventing malnutrition in the post Cyclone Freddy evacuation camps through feeding programmes

By Robert Manda (The Hunger Project)

In March 2023, Nsanje district was severely affected by Tropical Cyclone Freddy. The cyclone affected 51,344 households and 45,648 of these households sought shelter in 75 camps that were spread across the affected districts. By June 2023, only 10 camps remained active. One family that remained at the Mota Engil camp was that of 17-month-old Malita Patrick. Unfortunately, Malita developed malnutrition due to inadequate food intake at the camp.

With support from The Hunger project, the district conducted nutrition screening and community-led complementary feeding and learning sessions (CCFLS) in the camps for 12 days. The activities targeted children under the age of five and pregnant and lactating women. They also imparted infant and young child feeding (IYCF) and water, sanitation and hygiene (WASH) practices among caregivers at the camp.

Among the 1,893 children screened, 181 had moderate acute malnutrition (MAM) and 3 had severe acute malnutrition (SAM). Additionally, 232 pregnant women and 373 lactating mothers were screened, where 28 and 55 were identified as having MAM, respectively. Those identified as having moderate acute malnutrition were enrolled in the CCFLS program and those with severe acute malnutrition were referred to health centres for treatment. In order to ensure the success of the CCFLS programme, caregivers were requested to participate in group cooking and feeding at the camp. They each contributed by bringing firewood and food items.

They prepared food using the locally available six food groups and children were fed based on their age using the bowl and spoon tool kit.

To establish if the children were making progress, they were reassessed on days one, six and twelve. They were weighted and their mid-upper arm circumference and oedema were also measured.

After 12 days of CCFLS, a re-assessment of the CCFLS participants recorded a 100% weight gain in both children and women.

In addition to the CCFLS, health talks were conducted every day in the camps covering topics on bowl and spoon complementary feeding, optimal WASH practices, the six food groups, positive parenting, maternal health, community management of acute malnutrition (CMAM), growth monitoring points (GMP), integrated homestead farming, complementary feeding, fortification using multiple micronutrient powders (MNPs), iron folic acid (IFA) supplementation, food processing and preservation and nutrition screening by caregivers.

All in all, The Hunger Project Malawi with support from KFW through UNICEF reached a total of 2,498 people in the camps with food, nutrition key messages and screening under the comprehensive nutrition camp feeding programme. Malita's grandmother appreciated the support and encouraged that the provision of CSB and CCFLS continue for the displaced population to improve the nutritional status of children, pregnant women and lactating mothers.



Mothers and their children using the complementary feeding bowl and spoon toolkit after a cooking session at Namiyala camp - ©The Hunger Project/2023



## Adolescent girls benefit from Iron Folic Acid supplements through Back-to-School Campaign

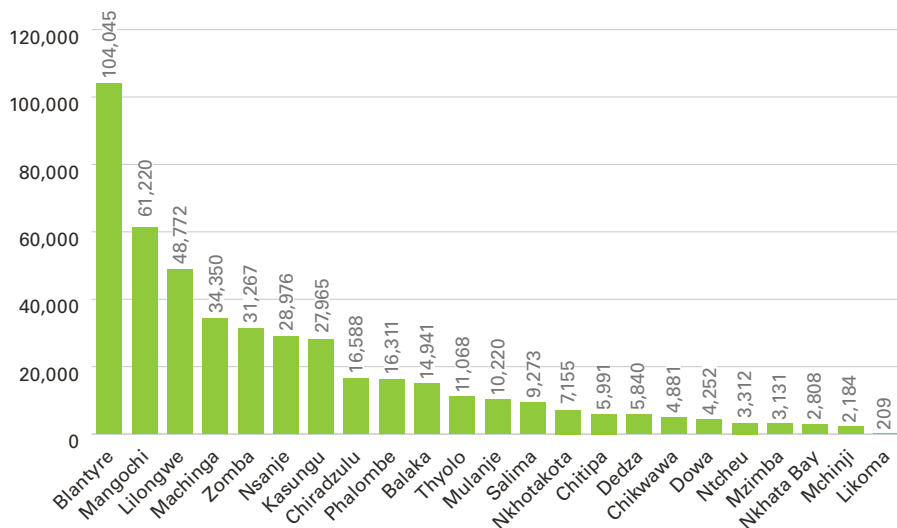
The Nutrition sector continued to support adolescent girls, 10-19 years old, with iron folic acid (IFA) supplementation through the Back-to-School campaign. During the reporting period, 3,357 adolescent girls 10-19 years old in Mangochi benefitted from IFA.

Since the start of the campaign in March 2023, a cumulative total of 52,656 adolescent girls have been reached with IFA representing a reach of 66 percent from Mangochi (8 schools), Nsanje (9 schools), Phalombe (29 schools), Blantyre (2 schools), and Machinga (11 schools). The adolescent girls also learned the importance of dietary diversity and consumption of iron-rich foods to reduce their susceptibility to anaemia.

## Infant and Young Child Feeding Counselling Update

Since January 2023, a total of 454,759 caregivers of children aged 0-23 months received counselling on optimal infant and young child feeding practices (24,172 males and 430,587 females), representing 75% of the target 607,877.

This was achieved through care group sessions, one-on-one counseling at health facilities, growth monitoring and promotion sessions, and mass screenings in communities affected by cholera and floods. The 13 southern districts affected by the floods strengthened the messaging of optimal nutrition and hygiene practices through broadcasting radio jingles on community radio stations.



\* \*No data available for Karonga, Mwanza, Neno, Ntchisi and Rumphii

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## Nutrition Cluster Partners

