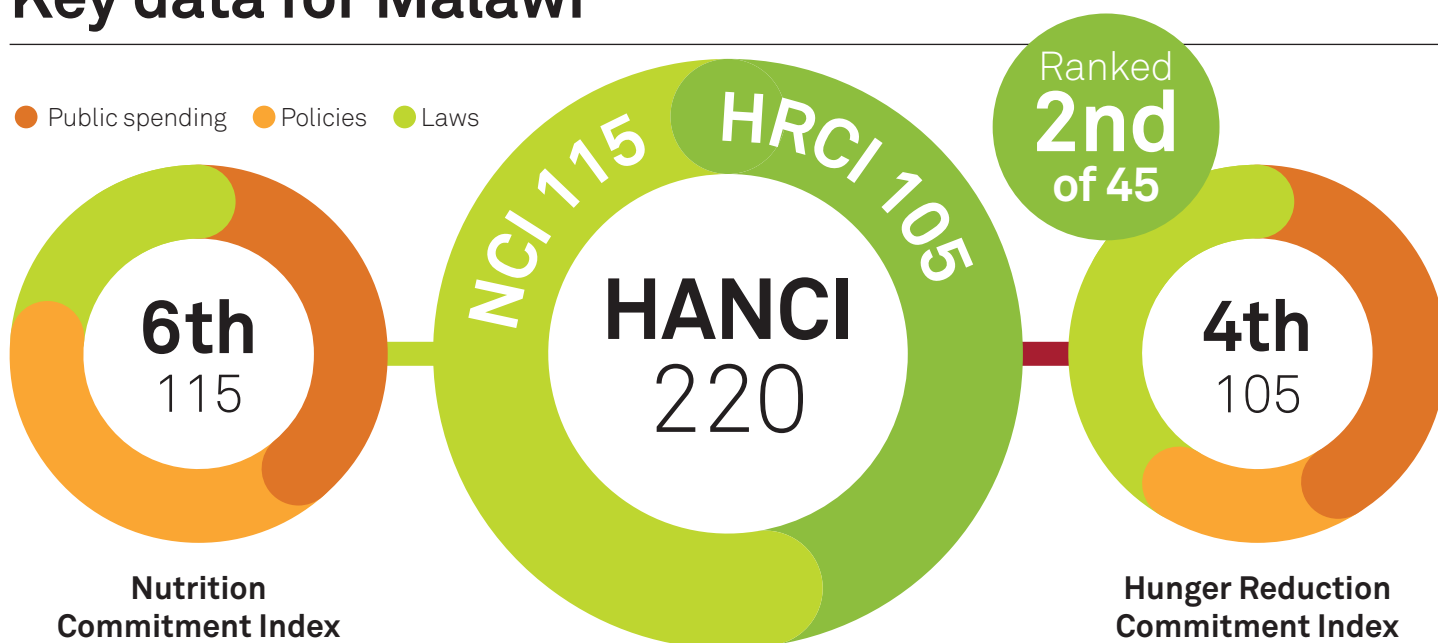


Hunger and Nutrition Commitment Index (HANCI)

Key data for Malawi



● Public spending ● Policies ● Laws



Hunger 4m (23% of population) **Stunting** 47% of children under 5 **Wasting** 4% of children under 5

HANCI compares 45 developing countries for their performance on 22 indicators of political commitment to reduce hunger and undernutrition. These come under three areas of government action: public spending, policies and laws.

Hunger Reduction Commitment Index (HRCI)

Public spending	Score	HRCI Rank of 45
Government expenditure on agriculture as a percentage of total	12.20%	5th
General government expenditure on health as a percentage of total	14.20%	7th
Policies		
Access to land	Medium /low	14th
Access to agriculture research and extension services	Medium /low	25th
Coverage of civil registration system – live births (latest year)	50%	28th
Status of Welfare Regime	3	24th
Laws		
Level of Constitutional protection of the right to food	High	Joint 1st ¹
Women’s access to agricultural land (2012)	Medium	Joint 6th ²
Women’s Economic rights	Medium	Joint 6th ³
Constitutions recognising the right to social security	Yes	Joint 1st ⁴

¹ Malawi is one of 14 HANCI countries with a high level of constitutional protection of the right to food. ² Malawi is one of 32 HANCI countries where women have equal legal rights but there are discriminatory practices. ³ Malawi is one of 27 HANCI countries where women have some economic rights under law, but these rights were not found to be effectively enforced. Five countries ranked higher. ⁴ Malawi is one of 29 HANCI countries where the constitution clearly references a right to social security

Hunger and Nutrition Commitment Index (HANCI)

Key data for Malawi



Nutrition Commitment Index (NCI)

Public spending	Score	NCI Rank of 45
Separate budget for nutrition	Yes	1st ¹
Policies		
Vitamin A supplement for children	96%	17th
Government promotes complementary feeding	Yes	1st ²
Access to an improved water source	83%	13th
Access to sanitation	51%	16th
Health care visits for pregnant women	92%	12th
Nutrition features in national development policies	Highest	1st
National nutrition plan (yes/no)	Yes	1st ³
Multi-sector and multi-stakeholder coordination (yes/no)	Yes	1st ⁴
Time bound nutrition targets (yes/no)	Yes	1st ⁵
National nutrition survey (yes/no)	Yes	1st ⁶
Laws		
Monitoring and enforcement of International Code of Marketing of Breastmilk Substitutes	Medium	19th ⁷

¹Malawi is one of 23 HANCI countries with a separate nutrition budget. ²Malawi is one of 36 HANCI countries to promote complimentary feeding. ³Malawi is one of 41 HANCI countries to have a costed national nutrition plan. ⁴Malawi is one of 36 HANCI countries to have a multi-sectoral and multi-stakeholder coordination mechanism. ⁵Malawi is one of 16 HANCI countries to have time-bound nutrition targets. ⁶Malawi is one of 34 HANCI countries to have conducted a DHS / MICS / comparable national nutrition survey in the past three yrs. ⁷Malawi is one of 11 HANCI countries where many provisions of ICBMS are in law.



It is true that this area has been hit by a serious lack of food. Wherever there is hunger, diseases are eminent and diseases obviously point to death. We see that some of our children are stunted and very weak. They are malnourished.

As a leader, I encourage parents to take such children to the hospital for clinical help. But we cannot help them here because where shall the food come from? We send the women and children to hospital in the hope that help will be found. If the situation continues, people will die. We have lost a lot of children due to malnutrition. Villager, Kasungu district, Malawi



Hunger and Nutrition Commitment Index (HANCI)

Key data for Malawi



Progress

- Malawi invests substantially in its agriculture sector, and is one of the few countries in sub-Saharan Africa which meets its Maputo promises, to spend over 10% of public expenditures on agriculture (spending 12.2%).
- Malawi invests substantially in its health sector, which receives 14.2% of public expenditures.
- The government promotes complementary feeding practices and 96% of children aged 6–59 months received 2 high doses of vitamin A supplements within the last year.
- More so, 88% of women aged 15–49 were attended at least once during pregnancy by skilled health personnel.
- Nutrition is a priority area in the Malawi Growth and Development Strategy, and a range of nutrition-focused policies have been put in place in the past eight years.
- Malawi has instituted a separate budget line for nutrition, improving public oversight and accountability for spending.
- The National Nutrition Policy and Strategic Plan set out time bound nutrition targets and set up an intersectoral coordinating body (National Nutrition Committee).
- Regular (once every three years) nutrition surveys enable policymakers to have access to up to date information.
- Nutrition is increasingly integrated in key sectoral policies and has received high-level political endorsement; the Department of Nutrition, HIV and AIDS, which implements the National Nutrition Policy and Strategic Plan, is situated in the Office of the President and Cabinet.

Areas for improvement

- People's access to improved sources of drinking water (83%) and sanitation (51%) are high compared to some of Malawi's neighbours; nevertheless, there is substantial scope for improvement in access rates for these services, with strong potential to improve nutrition outcomes.
- While the constitution of Malawi enshrines a right to food and the right to social security, women's economic rights and agricultural property rights can be strengthened to reduce their vulnerability to hunger. Some economic rights for women exist on paper, though they are not effectively enforced. Similarly, while women have de jure equal rights to access and own productive agricultural land, various discriminatory practices prevent their realisation.
- Institutional, legal and market frameworks for accessing land have been put in place, however do not as yet always help a majority of rural poor households to gain secure land tenure. Moreover, agricultural research and extension services are not always effective in reaching out to poor farmers, whether men or women.
- Donor-funded social protection programmes are piloted in selected districts and for selected groups (children, labour-incapacitated people), social assistance and social insurance mechanisms are still in their infancy, perhaps unsurprisingly given Malawi's low wealth (\$870 GNI per capita). Such mechanisms could be used to address widespread poverty and manage vulnerability to hunger.
- There is substantial scope for improving the civil registration system; currently only half of life births are covered. This potentially limits half of all children from gaining access to basic services, including health and education, and (once in place) social protection, as this is dependent on proof of legal identity.



The Member of Parliament of this area has never come here to inquire about our situation and how we can resolve hunger. The best way these leaders could assist us is if they came here and listened to the problems and helped us find solutions—that would be helpful Villager, Balaka district, Malawi



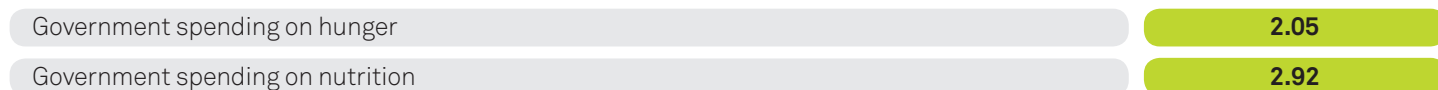
Hunger and Nutrition Commitment Index (HANCI)

Key data for Malawi



Expert view

Experts in Malawi were asked to assess their government's performance on hunger and undernutrition. **Strongest** ——— **Weakest**



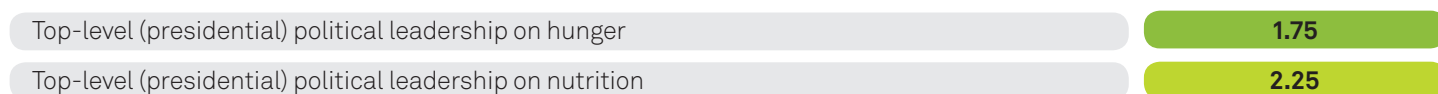
Hunger reduction budgets were considered to be more clearly developed, and also, more sensitive to electoral cycles. Government action on hunger, unlike nutrition, can decide elections.

Whereas government hunger budgets are highly sensitive to elections, the electoral manifestos of political parties weakly (3.68) define desirable nutrition outcomes, whereas hunger outcomes are defined somewhat better (2.87). Nutrition is seen to be less amenable to political messaging than hunger. For instance, it is much easier to campaign on whether households have enough food to eat and whether they are harvesting enough, than on the subtleties of whether people have access to those foods needed to meet dietary requirements.

	Hunger	Nutrition
Institutional coordination	2.13	2.57
Government intention and action	2.13	2.55
Locus of initiative	1.66	1.66
Analytical rigour	2.15	2.69
Learning and adaptation	2.31	2.51
Public commitment	1.94	2.31
Mobilisation of key stakeholders	2.31	2.46
Continuity of effort	2.38	2.76
Credible incentives	3.66	3.76
Political leadership	2.74	2.74

The strongest commitment scores were given to the 'locus of initiative'. Policies and programmes are generally carried out by the same ministry, department or government agency that initiates these, thus enabling better ownership and implementation.

The lowest scores were given to credible incentives to reward good performance and punish weak performance by both individual civil servants and bureaucratic agencies in the fight against hunger and undernutrition.



Levels of political leadership still need strengthening. Senior political leaders speak out fairly strongly against hunger and undernutrition, although their public statements are only little more than moderately convincing. Leaders are seen to have only a little better than mediocre (2.75) understanding of the hunger and nutrition status in the country; a mediocre (2.94) understanding of causal factors leading to hunger and undernutrition; and a fairly weak (3.38) understanding of potential solutions for these. More so, electoral manifestos of political parties weakly (3.68) define desirable nutrition outcomes, and are more geared towards hunger reduction targets (2.87).

“ I really wish I had access to fertilisers, God willing, I could work out miracles, produce whatever I can to be able to support my children's education ”

Villager, Kasungu district, Malawi