

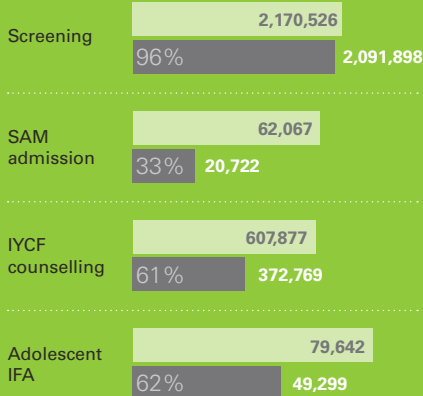


# Malawi Nutrition Cluster Updates

## Nutrition Response Progress

July 2023

Vol.4



## CMAM Programme Performance

SAM Children 6-59 months (June 2023)

Cure rate

93.6%

Death rate

1.8%

Non-responder

1.6%

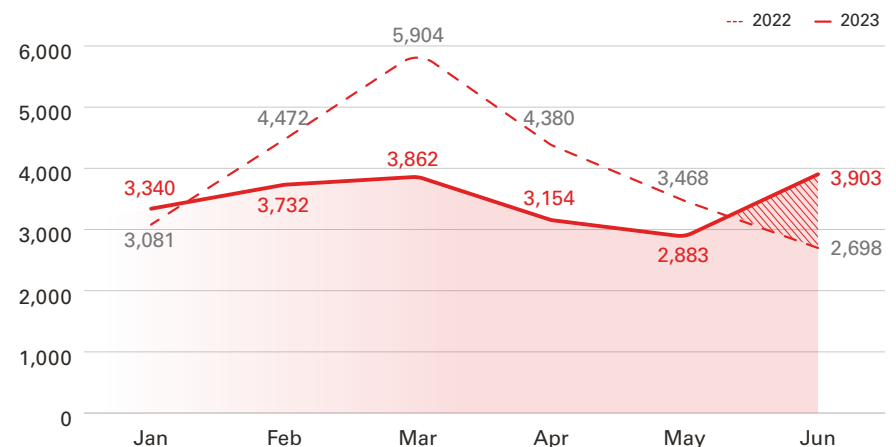
Default rate

3.0%

## Key Highlights

- In June, 3,903 children under five years were admitted for treatment of severe acute malnutrition (SAM), showing a 45 percent increase from 2,698 in June 2022. In the same month, 4,687 children and 1,218 pregnant and lactating women were admitted as having moderate acute malnutrition (MAM), showing a total of 136 percent increase from June 2022.
- As part of the Back-to-School campaign, Machinga district oriented 92 CBCC caregivers on the use of early childhood development (ECD) kits and provided counselling on nurturing care to the caregivers. The orientation focused on four Tropical Cyclone Freddy heavily affected areas in the district to ensure the continuation of early stimulation and nurturing care for their children.
- In July, 484,039 children under five were screened in 11 districts and 5,970 children (1.2 percent) were identified to be malnourished and referred to health facilities for further treatment (932 children with SAM and 5,038 children with MAM).
- In July, 74,139 caregivers of children 0-23 months (1,068 Male, 73,071 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 screenings in communities affected by cholera and floods.

## Trends of severe acute malnutrition admissions 2022/23 by flood affected areas



**136%** ↑

**MAM Admissions** of children and pregnant women has increased by 136 percent from the same month in the previous year (2,500 in June 2022 and 5,905 in June 2023).

**45%** ↑

**SAM Admissions** among children under five has increased by 45 percent from the same month in the previous year (2,698 in June 2022 and 3,903 in June 2023).

## Challenges

- Limited resources to procure RUTF and other nutrition supplies
- Limited partners supporting the supplementary feeding programme for MAM and increased household food insecurity may result in greater SAM cases



An HSA measuring MUAC on Bridget at Nkanda Primary School © Plan International Malawi/2023



PIM community briefing sessions on nutrition assessment © Plan International Malawi/2023

## In the Shadows of Disaster: Cyclone Freddy's Toll on Child Nutrition

By Winnie Botha (Plan International Malawi)

In the heart of Tropical Cyclone Freddy, most households lost everything, and one of the most pressing concerns became child nutrition. Parents faced the daunting challenge of nourishing their children amidst the wreckage and scarcity.

Lameck Nangwele, 31, and his wife Meria Solomon, 28, were forced to flee their home with their 4-year-old twins Bright and Bridget, seeking shelter at Nkanda camp in Mulanje district. Joining over 1,600 survivors at the camp, where about 500 were children under five, the burden of ensuring their children received proper nutrition weighed heavily on Lameck and Meria's hearts.

Meria recalls how she struggled to feed her children at the camp as survivors relied on relief food items which were mainly far from enough, and children's nutrition needs were not a priority.

"There were many children at the camp, and we used to fight to get food for the children.. Sometimes there was no food for the children, and we fed them dried cassava pieces (makaka)" she said.

Meria watched her twins grow weak and getting malnourished, and there was nothing she could have done after all, Bright and Bridget were no exception.

Plan International Malawi-PIM provided a comprehensive nutrition screening across the camps under T/A Nkanda in Mulanje and St Joseph Hospital at Nguludi in Chiradzulu District.

The screening, which included visual assessment and using the Mid-Upper Arm Circumference (MUAC), were feasible to ascertain the child's nutrition situation. A total of 6,964 under-5 children were accommodated in camps in Mulanje district and needed nutrition supplements due to inadequate dietary intake in the camps. Informed by the screening exercise, PIM mobilized resources through its different National Offices to respond to the crisis. These resources were used to implement different activities to improve the nutritional health of under-five children.

"PIM reached a total of 7,384 individual beneficiaries with direct nutrition food items, which included 1,807 under-five children (M=878, F=929). To meet the nutrition requirements, each household received fortified products to prevent and treat malnutrition, especially in under-five children." said Dr. Mary Shawa.

Shawa said through the nutrition screening exercise, PIM identified Meria and her twin, who were severely malnourished then.

"PIM assisted the twins with 10kgs of fortified CSB+ to improve their health and were referred to Chambe Health Centre, where they were later referred to Mulanje District Hospital", she said.

The timely support from PIM gave hope to Meria and more mothers in the camps, and slowly but surely, Bright and Bridget's tiny frames began to regain strength as they continued receiving therapeutic food supplements with vital nutrients.

As the days turned into months, stories of transformation filled the air. Children who once seemed on the brink of fading away are now playing and thriving.

PIM continues to give special attention to malnourished under-five children, pregnant and lactating women, and elderly persons. In the absence of outreach clinics, PIM has been providing transportation to severely malnourished under-five children. The organization is still conducting door to door nutrition assessments, and recent results show some improvement in malnutrition levels among the under-five children.



Chief Makhwira holding the RUTF packets  
© UNICEF Malawi/Chavula/2023

## Chief Makhwira Uncovers RUTF Dealers

By James Chavula (UNICEF Malawi)

Chief Makhwira of Chikwawa District in southern Malawi likens misuse of medical supplies to murder.

“When people pilfer or divert life-saving commodities to traders, they don’t care about life, but only their selfish gains,” he explains.

On 2 June this year, the traditional authority busted two shop owners selling Ready-to-Use Therapeutic Food (RUTF) at Livunzu trading centre in his low-lying territory along the east bank of the Shire River.

The fortified peanut butter supplement is prescribed for treating severe acute malnutrition in children under five.

Makhwira launched an undercover inquiry, covertly buying the commodity before reporting it to health authorities.

“When a concerned citizen told me some shops were selling RUTF suspected to be stolen from Makhwira health centre, I sent Village Head Chipeta to buy some. When I looked at the sachets my counsellor bought, I took a photo and sent the images to a senior health surveillance assistant who forwarded them to the district nutrition officer.”

To the nutrition services coordinator at Chikwawa District Health Office (DHO), the photos sharply resembled those of Central Medical Stores supplies to health facilities nationwide with support from UNICEF. To confirm the discovery, he sent K10,000 for the chief to buy some more.

“After cashing out the money, I sent a motorcyclist to buy eight packets. The next day, the nutrition officer, accompanied by the UNICEF field monitor, came to examine the packets whose batch numbers matched the RUTF delivered to Makhwira health centre,” says Chief Makhwira.

Assured beyond doubt that the sachets on sale were diverted from the nearest public health facility, the three reported the matter to Livunzu police station.

“I personally asked the officer-in-charge to ensure justice is done for the children who bear the brunt because my area has the district’s worst malnutrition rates though it is a food basket,” says Makhwira.

The police boss promised to urgently bring the suspects to book and enlisted the support of investigators from Chikwawa Police Station, who had no transport.

The detectives only arrived three days later in an ambulance dispatched by the DHO with support from UNICEF.

The police confiscated 132 RUTF sachets and prescribed drugs from two suspected shops when they swooped on Livunzu market.

They arrested the two shop owners and took them to Chikwawa Magistrate’s Court, where they told the magistrate that they ordered the medical supplies from Mozambique.

The court found them guilty of possessing and selling medicine and medical supplies without permits, but they walked free after each paid K200,000.

“Much as the law took its course, the fine was too lenient for profit-seekers who put the lives of malnourished children in grave danger. But this is not surprising considering that no health worker was tried for colluding with the convicts,” Makhwira says.

He urges community members and health advisory committees to closely monitor the movement of medical supplies to combat RUTF abuse.

“The revelation by Chief Makhwira shows that distributors could be short-changing the children. All testimonies and clues point towards health workers’ involvement, which requires all relevant officers to keep an eye on the flow of RUTF and nutrition services,” he explains.

The nutrition officer says RUTF mismanagement fuels RUTF stock-outs and misuse, including serving it to healthy children while the malnourished stunt and die in agony.

He wishes the magistrate had imposed a stiff penalty for the good of children receiving a raw deal.

“If I were the magistrate, I would have based my verdict on the suffering of children who needed the RUTF found in the wrong hands to overcome debilitating malnutrition. They are either being denied the full dose or receiving fewer packets,” Katundu observes.

He commends the chief for setting the tone for a community-led clampdown on RUTF misuse.

In July 2021, Chikwawa District Health Management Team engaged local leaders, including traditional authorities, to take the lead in efforts to stop the pilferage and misuse of RUTF like any other medicine.

“The main message was that RUTF is medicine and anyone found with it is committing a crime,” says Katundu. “Ever since we’ve had tip-offs from community members, but none from a high-level community leader like Chief Makhwira.”

The chief’s persistence offers numerous lessons on how community leaders can help protect public health resources.

Katundu explains: “Chief Makhwira is a living example that community leaders should leave everything to the government.

**“When a community member is misusing public resources, everyone has to take part in protecting their community interests. RUTF is medicine meant to benefit their children.”**

The UNICEF field monitor who handled the case says the chief has shown great commitment to be emulated by other community leaders as nutrition champions.

She states: “The chief is keen to end the misuse and pilferage of RUTF in his community. He took the initiative to report the malpractice he observed around his area to the DHO and police for quick action.”

“He followed up on the case until it was concluded. This sends a strong message that he will never condone such malpractice in his area where malnutrition is high and children are dying.”

UNICEF continues to work closely with Ministry of Health and development partners to develop action plans for RUTF management through community engagement meetings with health workers, local leaders, village development committee leaders, and faith leaders.



## Back-to-School Campaign Supports the Nutrition and Health of Adolescent Girls

The Nutrition sector continued to support adolescent girls, 10-19 years old, with iron folic acid (IFA) supplementation. In July, a total of 8,531 adolescent girls 10-19 years old (7,765 in Phalombe and 765 in Machinga) benefitted from IFA through the Back-to-School campaign.

Since the start of the campaign in March 2023, a cumulative total of 49,299 adolescent girls have been reached with IFA representing a reach of 62 percent from Mangochi (8 schools), Nsanje (9 schools), Phalombe (29 schools), Blantyre (2 schools), and Machinga (11 schools). The adolescent girls also received nutrition messages on dietary diversity and consumption of iron rich foods to reduce their susceptibility to anemia.

In four areas that were heavily affected by Tropical Cyclone Freddy in Machinga district (TA Ngokwe, TA Chikweo, TA Mkwepere, TA Ntaja, and TA Ntholowa), a total of 96 School Health Nutrition teachers, Primary Education

Advisors and Health Surveillance Assistants (HSAs) conducted engagement meetings to discuss the challenges that the IFA programme was facing and how they could collaborate

with school committees, local leaders and youth clubs to improve the uptake of IFA supplementation.



Iron folic acid supplements provided to adolescent girls in the classroom © UNICEF Malawi/2023

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