



Project Brief

Southern African Nutrition Initiative: Improving women and children's health in Malawi, Mozambique and Zambia



CARE's Southern African Nutrition Initiative (SANI) aims to improve the nutritional status of women of reproductive age and children under 5, while working with local health authorities and communities in Malawi, Mozambique and Zambia. Specifically, SANI is expected to contribute to the improved health of approximately 230,000 individuals directly, and over 345,000 individuals indirectly.

Background

Malawi, Mozambique and Zambia continue to have some of the highest child mortality rates in the world, with 58 per 1000 child deaths for Malawi, 90 for Mozambique, and 70 for Zambia, much of which can be attributed to malnutrition. Stunting, the result of long-term undernutrition, is also very high amongst children under 5 in these countries: 49% in Malawi; 43% in Mozambique; and 40% in Zambia.

This situation is further compounded by the following inter-related causes:

- Only 55% of infants are exclusively breastfed in Malawi, Mozambique and Zambia, despite the benefits of exclusive breastfeeding for child survival.
- Dietary diversity scores among breastfed infants are low in Malawi and Mozambique, with only 29% receiving minimal dietary diversity in Malawi and 30% in Mozambique.
- Poor environmental sanitation, open defecation, contamination from free-roaming livestock, and diarrheal diseases contribute to 18% of child deaths in Mozambique, 11% in Malawi and 9% in Zambia.
- Food insecurity is a widespread, regional issue, worse amongst female-headed households. During 2013/2014, 1.5 million Malawians were food insecure, 35% in Mozambique, and only 40% of Zambians had enough to eat.

The **SOUTHERN AFRICA NUTRITION INITIATIVE (SANI)** is a 24,652,087 million CAD project to address undernutrition in women of reproductive age (15-49) and children under 5 in Malawi, Mozambique and Zambia. SANI is a partnership between CARE, Cuso International, the Interagency Coalition on AIDS and Development (ICAD), McGill University, and the Governments of implementing countries. The project is funded by the Government of Canada, CARE, and the Canadian public. SANI is a four-year and six-month project, from March 2016 to September 2020.



575,000

CARE aims to reach over 575,000 beneficiaries in Malawi, Mozambique and Zambia through SANI, contributing to the reduction of under-nutrition in women and children.

Project Outcomes

The ultimate outcome of the SANI project is to contribute to the reduction of maternal and child mortality in the targeted regions. The intermediate outcomes are:

- **Improved nutrition practices and services** of women of reproductive age and children under 5 in Malawi, Mozambique and Zambia. For example, counselling skills and women-centered services at the health facility will be included as part of the training of health workers and included as measures of quality of services during supportive supervision.
- **Improved maternal, infant and young child nutrition and gender sensitive practices** for women of reproductive age and children under 5 in Malawi, Mozambique and Zambia. For example, women will be trained in water systems maintenance/repair, as public speakers, and in key financial and decision-making roles.
- **Strengthened governance and accountability of gender-equitable nutrition policies and programs** for women of reproductive age and children under 5 in Malawi, Mozambique and Zambia. For example, capacity building of Nutrition Coordinating Committees will take place at provincial, district and ward levels to address and integrate gender into all aspects of national nutrition programming.



Malnourished women are more likely to die in childbirth or have low birth weight babies, who are themselves more vulnerable to disease and death. Chronically malnourished children suffer life-long consequences in cognitive ability, school performance and future earnings, limiting the development potential of nations. CARE knows that addressing malnutrition today could bring economic benefits 100 times greater than the cost of interventions.

Key Project Interventions & Activities

Women are primarily responsible for the care and nutrition of household members but have very little control over income and limited authority to make decisions about their own and their children's healthcare. CARE will address and reduce these inequalities between men and women, through a gender-transformative project focus.



■ Train and Equip Community Health Workers

- Provide training to health care workers to deliver quality nutrition counselling and lifesaving treatment to those suffering from malnutrition.
- Provide equipment and supplies (such as height boards, mid-upper arm circumference measuring tapes, and weight scales to promote growth monitoring).
- Identify and treat acute malnutrition through case management and therapeutic feeding.



■ Improve Nutrition Practices

- Educate women and men about the nutritional needs of infants, young children, women of reproductive age, women who are pregnant or have recently given birth, and women who are breastfeeding.
- Educate community members in nutritious eating habits, including cooking demonstrations with both women and men to encourage the use of new nutritious foods.
- Support community backyard gardens by providing drought-resistant seeds and equipment, and educating communities on improved planting and fertilizing methods.
- Provide nutrition support to women and families living with HIV and AIDS.



■ Improve Water, Hygiene and Sanitation

- Facilitate access to clean drinking water and hygiene facilities through construction or rehabilitation of water-points/wells, hand-washing stations and latrines.
- Train community groups to assess, rehabilitate, monitor and repair wells and latrines.
- Educate community members on healthy sanitation practices, including hand-washing and waste disposal.



■ Promote Gender Equality and Empower Women

- Mainstream gender throughout the project to ensure that all project interventions and activities focus on achieving gender equality and benefitting women's access to nutrition and health services.
- Transform gender norms that adversely affect the health and nutrition outcomes of women and children, particularly through Community Dialogues with women, girls, men, boys, health service providers, and community leaders.
- Support health and nutrition service providers to ensure accountability in the provision of high-quality, woman-centred services.
- Promote and support "gender champions" - men and boys who will lead, support and continue the gender norm transformation in their communities and families after the project is completed.



The SANI Project at a glance...

PROJECT NAME:	Southern African Nutrition Initiative (SANI)
PROJECT DONOR:	Government of Canada
PROJECT LIFESPAN:	March 2016 – September 2020 (4 years, 6 months)
PROJECT PARTNERS:	CARE Cuso International Interagency Coalition on AIDS and Development (ICAD) McGill University Institute for Global Food Security
GOVERNMENT PARTNERS:	Ministry of Agriculture and Livestock Ministry of Gender Ministry of Health Departments of Water and Sanitation
PROJECT ULTIMATE OUTCOME:	To improve the nutritional status of women of reproductive age (15-49 years) and children under the age of 5 in targeted districts of Malawi, Mozambique and Zambia.
INTERMEDIATE OUTCOMES:	<ul style="list-style-type: none"> Improved nutrition practices and services of women of reproductive age (WRA; 15-49) and children under 5. Improved maternal, infant and young child nutrition and gender-sensitive practices for WRA and children under 5. Strengthened governance and accountability of gender-equitable nutrition policies and programs for WRA and children under 5.
COMMUNITIES TARGETED:	<ul style="list-style-type: none"> Dowa and Ntchisi Districts, Malawi Funhalouro and Homoine Districts, Mozambique Mpika and Shiwa Ng'andu Districts, Zambia
NUMBER OF BENEFICIARIES:	230,054 women, men and children directly 345,333 women, men and children indirectly

