



World Food
Programme

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FNG Namibia

Executive Summary



Introduction

Nutrition is a crucial pillar in the development of a healthy, productive nation. Improving diets, especially of children and women, brings immediate and long-term health, education and economic benefits, as highlighted in the recent Cost of Hunger Study conducted in Namibia in 2021.

Maternal and child malnutrition is a cross-cutting issue in Namibia with serious consequences for survival,

growth, health, development and economic productivity for individuals and society. In Namibia, 24 percent of children under 5 are stunted, 6 percent are wasted and half of all children under 5 are anaemic (1). Improving the nutrition situation in a country requires coordinated actions across the food, social protection, health, and education systems. These actions need to be grounded in a good understanding of the local context, its opportunities and bottlenecks, and a synthesis of global and local evidence.

In response to the Government of Namibia's goal of improving nutrition outcomes, the National Planning Commission under the Office of the President, together with the World Food Programme (WFP), Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) and the International Fund for Agricultural Development (IFAD) conducted a Fill the Nutrient Gap (FNG) analysis in 2020/21. The analytical process sought to understand local drivers that affect the availability, cost and affordability of nutritious diets.

Process

The FNG process began at the end of 2020 with virtual multistakeholder inception meetings followed in January 2021 by a series of in-person engagements in Namibia among the key partners involved. After primary data was collected and Consumer Price Index (CPI) food price data was prepared by the technical team, the analysis and subsequent modelling of interventions was conducted between February and June. Virtual exchanges and technical validations were conducted to ensure the relevance of inputs and validity of results. In July 2021, two virtual multistakeholder thematic workshops were conducted to present the main findings and develop recommendations with participants who represented a variety of sectors and institutions. The list of recommendations was circulated among all stakeholders for additional inputs and to ensure that recommendations were sound.

Methodology

The two-pronged FNG approach consists of a review of existing secondary literature and a Cost of the Diet analysis (CotD) which uses linear programming for lowest cost diet optimization. The minimum cost of energy-sufficient and nutritious diets was estimated from CPI food prices (January 2021) and primary price data collected from 25 remote locations across the country. Expenditure data from the Namibia Households Income and Expenditure Survey of 2015–2016 was used to assess the extent to which Namibian households are able to access these diets.

Main findings

- Progress has been made in improving public health, but mortality related to dietary causes (including hypertension, stroke and diabetes) is on the rise. Malnutrition is an issue that affects all wealth groups.
- The nutritious diet could cost on average 99 Namibian Dollars (NAD) for a five person household per day. Meeting nutrient needs could cost up to three times more than meeting only energy needs.
- At least one in three households would not be able to afford a nutritious diet. Rural households are most at risk of being unable to afford the diet, with non-affordability more than 70 percent in certain regions.
- Fresh, nutritious foods are best at meeting micronutrient needs and their prices drive the cost of the nutritious diet. Current food expenditure patterns indicate that households are not consuming sufficient quantities of fruit and vegetables.
- Although most households live at least partly off agriculture, the agricultural sector contributes only a small fraction to GDP. Nutrient-dense foods are not widely produced and the main domestic supply is staple foods.
- Breastfeeding practices are suboptimal and exclusive breastfeeding rates are below global targets. Dietary diversity of children under 2 is low and associated with the level of household budget spent on food.
- Adolescent girls and breastfeeding women have the highest cost of a nutritious diet and face a higher risk of not meeting their micronutrient needs. Targeted nutrition-specific interventions could help meet their higher nutrient needs.
- Living with HIV/AIDS significantly increases the cost of meeting nutritional needs. People living with HIV/AIDS in remote rural areas are therefore very likely to be unable to consume healthy, nutritious diets.
- Poverty is the main cause of insufficient, unbalanced and unhealthy diets. Safety nets could improve access to nutritious diets for vulnerable groups if they were targeted better.
- School enrolment rates drop around the upper secondary grades, which is a critical stage during adolescence. Nutritious and diverse school meals could incentivize attendance and contribute to improved dietary intake.
- Combining interventions from multiple sectors could significantly reduce the cost of the nutritious diet for households. Improved targeting of interventions and greater employment opportunities could make nutritious diets more accessible.

Cross-cutting priorities and actions identified by stakeholders

Agriculture

- Connect farmers to markets and financial infrastructures.
- Enable food fortification and improve access to fortified foods for vulnerable groups.
- Engage the private sector in nutrition discussions by setting up SUN Business Network.
- Collaborate with the private food processing sector to fortify grains such as maize on a larger scale.
- Identify the potential of indigenous foods and research their nutritional benefits.
- Introduce organic community-based agriculture. Conventional interventions often depend more on agricultural inputs than organic interventions do.
- Ensure information reaches those at the grass roots level to improve production.

- Encourage the private sector to contribute to improvements and support of producers/farmers, and encourage efficiency and effectiveness of new production schemes.
- Strengthen the development of water infrastructures.
- Implement new technologies that enable the digitization of agriculture.
- Source funding to implement the Harambee Comprehensively Coordinated and Integrated Agricultural Development Programme (HACCIADep) value chains including poultry, horticulture, dairy, small stock and cereal.
- Strengthen regional trade to increase diversity of products across regions.

Social protection

- Target social protection and grants appropriately and make them nutrition-sensitive (particularly for gender-sensitive and HIV-focused programmes).
- Replace current in-kind support (food banks) with conditional basic income grant support for the most vulnerable and marginalized. Give general food rations/food vouchers to vulnerable People Living with HIV (PLHIV), coordinated with interventions of the Ministry of Health and Social Services.
- Integrate behaviour change strategies to improve nutrient intake for children.
- Allocate more funding for social protection and ensure that all targeted programming has a nutrition-specific component.
- Ensure that food items in food assistance parcels are fortified.

Education

- Improve the nutritional quality and diversity of school meals, including through the home-grown school feeding programme and including fortified foods in school meals.
- Strengthen linkages and support to smallholder farmers, especially women, with education, training and agricultural inputs, to enable them to supply fresh, nutritious foods to schools. Build operational capacity for handling fresh food supply at schools.
- Take a behaviour-focused view on curricula and teach practical nutrition skills and knowledge by including children in the growing, preparation and safety of food.
- Extend the school feeding programme to secondary school and include breakfast and lunch.
- Develop guidelines for the food that should be provided in school meals and the produce that should be selected for school gardens.

Health

- Introduce the role of Community Dietitians and improve nutrition training for community health workers and nurses.
- Develop capacity of health workers on nutrition management for those with HIV.
- Establish responsibilities and capacity for coordination and information sharing on nutrition across actors.
- Discuss fortification and fortification standards at government level, including implementation through government mechanisms.
- Provide nutrition education for the community.
- Sensitize health workers to complementary feeding, provide training and implement the Baby Friendly Hospital Initiative (BFHI).
- Strengthen iron and folic acid supplementation for pregnant and lactating women (PLW) and introduce micronutrient or iron and folic acid supplementation for adolescent girls to improve pre-pregnancy nutritional status.

Multisectoral coordination

- Provide reliable mechanisms to ensure alignment and coordination across sectors and types of actors.
- Discuss fortification and fortification standards at government level and implement legislation on fortification standards
- Integrate and align FNG findings with the 6th National Development Plan and Food and Nutrition Policy implementation action plan (currently pending cabinet approval).
- Inform drafting of SUN roadmap for Namibia based on the Cost of Hunger in Africa (COHA) and FNG findings.
- Establish community advocates for nutrition and empower community members to take action and ownership of community garden activities through communication and advocacy.
- Set up committees to improve the coordination and maintenance of school gardens through improved community engagement and greater ownership.
- Establish Nutrition Champions platforms.



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