



World Food Programme

SAVING LIVES
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FILL THE NUTRIENT GAP ZAMBIA

Placing nutrition at the centre of multisectoral interventions

BACKGROUND

The Fill the Nutrient Gap Analysis was led by the National Food and Nutrition Commission (NFNC) and supported by the World Food Programme (WFP). It estimated the lowest cost of a nutritious diet and the proportion of households able to afford that diet in the lean and non-lean seasons for each province of Zambia. Diet costs were calculated for a household consisting of five individuals: a lactating woman, an adult man, an adolescent girl, a primary school-aged child, and a breastfed child aged 12–23 months. The analysis modelled various interventions for their potential impact on cost and affordability of a nutritious diet, enabling comparison between the potential benefits of programmes and policies aimed at improving nutrition outcomes.

MAIN FINDINGS

1. The economic barrier to adequate nutrition is high.

Over half the population of Zambia (53 percent) could not afford the lowest cost nutritious diet. This diet, covering macronutrient and micronutrient needs, costs on average 33 Zambian Kwacha (ZMW) per five person household per day, three times as much as a diet meeting only energy needs. In rural provinces such as Western and Northern, a third of households could not afford a diet covering only energy needs, and more than three quarters could not afford a nutritious diet. Food price inflation has increased the cost of the diet in the past 18 months and has created additional barriers to household access to nutritious diets. Since 2019, the proportion of households that would not be able to afford a nutritious diet has increased from 44 percent to 54 percent.

2. Targeted interventions can improve nutrient intake for all vulnerable individuals.

Pregnant and lactating women, adolescent girls, and children under 2 are the most nutritionally vulnerable individuals within a household. Targeted interventions for each of these individuals can reduce their nutritious diet cost by 20–40 percent, depending on target individual and type of intervention, and can fill essential micronutrient gaps. Suboptimal breastfeeding and unhealthy snacking increase the cost of the diet. This highlights the importance of a behaviour change strategy that goes beyond promotion of infant and young child feeding. Consumers need to be nudged to demand, and producers and retailers to supply, healthy and nutritious foods. Meanwhile, nutrition-specific interventions such as iron-folic acid tablets should be provided, as well as age-appropriate nutritious foods to those who cannot afford them.

3. Multi-sectoral action is required to accelerate prevention of malnutrition.

Targeted nutrition specific interventions need to be complemented by actions that reduce the cost of nutritious foods and improve household income. The analysis found that the cost of the diet can be significantly reduced by a combination of interventions across sectors, such as micronutrient supplementation, social protection transfer packages, livelihood support programmes, and free nutritious school meals. When combined with support for income-generation, packages of multisectoral interventions can most effectively reduce non-affordability of the nutritious diet.

RECOMMENDATIONS FROM THE MULTI-SECTORAL STAKEHOLDER GROUP

1. Appropriate funding for the Home-Grown School Meals strategy should support expansion to adolescents and promote production of nutritious foods at school level.

FNG evidence in support of recommendation:

- Nutritious, diverse school meals which include animal source foods, fruit and vegetables, can reduce the amount a household has to spend to provide adequate nutrition to a child by up to one third.
- School meals offer an incentive to go to school. Provinces with lower per capita income have a lower percentage of school-going children and a higher dropout rate for adolescent girls.

2. Homestead food production needs to be diversified through increased production of nutritious foods (including horticulture, livestock and/or fish farming) and improve linkages between producers and markets to increase availability and stabilize prices of nutritious foods.

FNG evidence in support of recommendation:

- In rural areas, up to one third of the total amount of food consumed comes from own production, indicating that household production is a major pathway to support consumption of nutritious foods.
- Consuming produce from own production can reduce household cost by up to one third.
- The production and sale of foods can help households cover the cost of the nutritious diet and, in some provinces, also generate surplus income and improve availability at local markets.

3. Policy discussion to support commercial fortification of maize and other products needs to be strengthened.

FNG evidence in support of recommendation:

- A quarter of Zambian households regularly purchase commercially milled maize meal.

- Despite a higher market price, fortified maize meal will reduce the cost of a nutritious diet.
- Consumption of three portions of fortified, unrefined maize meal per day could meet over 60 percent of the needs for iron. It could also cover large gaps in other micronutrients (e.g., B12 and zinc) for the general population.

4. Coverage of current social safety nets should be expanded, specifically scaling up cash transfers to households with children under 2, and Food Security Packs to support farming households in producing fresh, nutritious foods.

FNG evidence in support of recommendation:

- The poorest 50 percent of rural households are missing at least ZMW 8 per day to buy the cheapest form of a nutritious diet.
- Livelihood support programmes such as the Food Security Pack show potential to cover the cost of a nutritious diet, especially if the household produces high-value nutritious foods.
- A combination of a cash transfer and a nutrition-specific intervention for nutritionally vulnerable groups reduces their risk of malnutrition the most.

5. Continue support for improved infant and young child feeding.

FNG evidence in support of recommendation:

- The high proportion of young children who are not able to consume a minimum acceptable diet correlates with the high cost of a nutritious diet, highlighting the need to ensure that households have the resources and knowledge to provide nutritious complementary foods to children.
- Suboptimal breastfeeding practices can increase the cost of the nutritious diet of the child aged 6–23 months by up to 70 percent.
- Using nutritious foods for children above 6 months complements breastfeeding by increasing consumption of micronutrient rich foods, thereby enabling adequate intake of micronutrients such as iron, zinc, and magnesium.

