



World Food Programme

SAVING
LIVES
CHANGING
LIVES

Nutrition at the Heart of WFP's Work in Madagascar

WFP's nutrition portfolio is **cross-cutting** to Madagascar Country Strategic Plan. It comprises of **specific interventions** for nutritionally vulnerable groups **during emergencies**, **moderate acute malnutrition cases management**, **community-based malnutrition prevention**. WFP also ensures school feeding and agricultural value chain programmes are geared towards improving availability, access and consumption of nutritious foods. As a **key government partner**, WFP supports the **capacity strengthening of national nutrition governance institutions**.

Country context

Malnutrition remains a major public health and development challenge in Madagascar. Nearly 40% of children aged 6 to 59 months suffer from chronic malnutrition, placing the country among the ten most affected globally.

25% of children receive the minimum acceptable diet for their age, and in the Grand South, **86% of households lack access to nutritious food. Anaemia affects 46% of young children and 26% of women and adolescent girls.**

Despite government targets to reduce acute malnutrition to below 5%, **it still affects 7.7% of children under five, with much higher rates in drought-affected southern regions.** As a result, Madagascar loses an estimated 12.8% of its GDP each year due to chronic malnutrition and hunger.

2024 Key figures in Madagascar



24,600
children (6-23
months) were
supported



27,000
pregnant and
breastfeeding
women



58 functional Learning and Nutritional Recovery Homes (FARNes) provide nutritional supplementation for children with moderate acute malnutrition, complementing the **1,175 community sites managed by the National Nutrition Office (ORN)** with support from WFP.



880 households received a diversified monthly food basket from local retailers through a voucher-based cash transfer pilot.



3 semi-industrial and artisanal food processing units have been built.



1 245 primary schools benefit from a school meals programme that provides nutritious meals and nutrition education activities for school children.

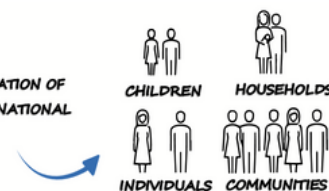
WFP's Nutrition Theory of Change in Madagascar

WFP's vision for nutrition in Madagascar is built around three key outcomes:

- Strengthened institutional capacity for nutrition governance.
- Improved and sustained access, demand, and consumption of healthy and nutritious diets.
- Enhanced access to prevention and treatment services for malnutrition among the most vulnerable populations, both during and after crises.

GOAL CONTRIBUTE TO THE OPERATIONALISATION OF THE NATIONAL NUTRITION POLICY AND THE NATIONAL NUTRITION MULTISECTORAL ACTION PLAN

IMPACT BY 2028



TO ACHIEVE THEIR FULL POTENTIAL

By simultaneously **improving the availability of and access to nutritious foods** —while promoting their consumption— **WFP aims to contribute to the development of sustainable, locally driven food systems.**

Objective 1

Nutrition sector governance is strengthened, and institutional capacity to deliver nutrition services is enhanced.

Objective 2

Communities have resilient livelihoods and the capacity to develop nutrition-sensitive value chains.

Objective 3

The quality of school meals is improved, and school health and nutrition services are available and effectively used by students.

Objective 4

Vulnerable groups, including children, adolescents, pregnant and breastfeeding women, and people living with HIV, have access to essential nutrition services.

Institutional Capacity Strengthening

Objective 1 Support to Nutrition Governance

WFP provides technical assistance to the Government of Madagascar through multisectoral institutions coordinated by the **National Nutrition Office (ONN)**, including the **Ministry of Health (MinSan)**, **Ministry of Agriculture (MinAE)**, **Ministry of Education (MEN)**, and the **National Office for Disaster Risk Management (BNGRC)**. WFP supports the **Scaling Up Nutrition (SUN) movement** in Madagascar and coordinates the UN Agencies and Donor Platform to ensure a harmonized approach to nutrition support.

WFP leverages innovative tools such as the **Fill the Nutrient Gap (FNG)** analysis to help multisectoral stakeholders develop evidence-based recommendations, including for the mid-term review of the National Multisectoral Action Plan for Nutrition (PNAMN). Additionally, WFP collaborates with UN agencies, specialized NGOs, universities, and research centers to support the implementation of the national nutrition policy.



Sustainable and Improved Access to Healthy and Nutritious Food

Objective 2 Nutrition-Sensitive Value Chains



WFP promotes nutrition-sensitive value chains to enhance the effectiveness of nutrition interventions through local food production. A sectoral assessment conducted by WFP highlighted the need to strengthen food regulation and quality control mechanisms — efforts supported in collaboration with the **National Food Fortification Alliance (ANFA)**.

In four regions of the Grand South and South-East, WFP supports community-level food processing, using high-quality standards and proven social marketing approaches. Through the establishment of multifunctional units, the project aims to develop **diversified value chains — from producers to consumers.**

School-Based Nutrition

Objective 3 School Nutrition

WFP supports Madagascar's transition to a **home-grown school feeding model, currently reaching over 600 schools**. WFP facilitates cash transfers to diversify school meals using locally available seasonal foods. A nutritious menu catalogue —covering 30% of students' essential nutrient needs— was developed with ONN and the Ministry of Education (MEN) and optimized using the School Meal Planner (SMP) Plus tool.

WFP has also developed a toolkit and training plan to deliver key messages on nutrition and hygiene within schools, promoting healthy practices among students.



Expanded Access to Nutrition Services for Vulnerable Groups

Objective 4 Continuum of Nutrition Care

WFP supports a continuum of care to prevent and treat malnutrition among the most vulnerable groups, especially in crisis-affected areas.



PrevMA: In emergency settings, WFP provides targeted nutrition supplementation to vulnerable populations as a complement to general food assistance, helping to prevent spikes in acute malnutrition.

“Miaro” Approach: This integrated community-based model targets pregnant and breastfeeding women and young children. It combines in-kind or cash-based nutrition supplementation (via value vouchers), support for diversified food production (such as community gardens and small livestock), and social and behaviour change communication (SBCC). The goal is to reduce all forms of malnutrition, improve dietary diversity, increase use of prenatal care, and promote better child feeding and care practices.

Moderate Acute Malnutrition (MAM): In partnership with ONN, WFP provides ready-to-use supplementary foods (RUSF) to children aged 6 to 59 months suffering from MAM through community sites managed by Regional Nutrition Offices. This is paired with nutrition counselling by trained community health volunteers.

WFP also pilots a community-based approach to MAM management in remote areas through FARNES (Learning and Nutritional Recovery Homes), which provide local support to malnourished children.

Social Protection Integration: WFP works with the Ministry of Population and Solidarity to integrate nutrition into social protection programmes, particularly for people living with HIV or tuberculosis, by improving targeting and service delivery to the most vulnerable.

Social and Behaviour Change Communication (SBCC): WFP collaborates with specialized partners to design and implement a comprehensive SBCC strategy to foster lasting improvements in dietary and nutrition-related practices.



Thank you to our donors for their continued support

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