



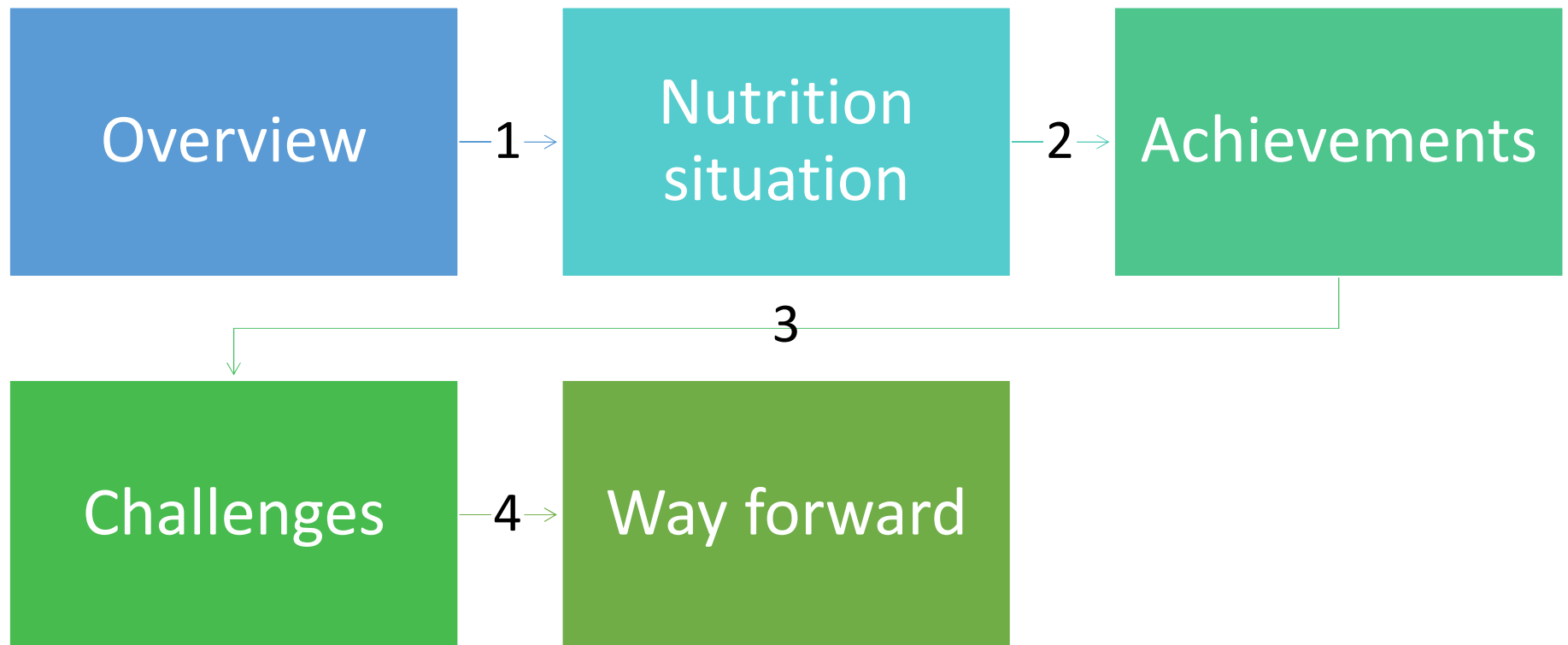
Making nutrition central to development

High Level Forum
Maseru, Lesotho
October 3, 2018.





Outline





“Nutrition is both a maker and a marker of development. Improved nutrition is the platform for progress in health, education, employment, empowerment of women and the reduction of poverty and inequality, and can lay the foundation for peaceful, secure and stable societies”.

Why & How

Linked to goals and indicators beyond goal 2

Optimal nutrition is **ESSENTIAL** for achieving the SDGs

Multisectoral nutrition security approach is necessary for success



■ GLOBAL TARGETS

World Health Assembly Global Nutrition Targets 2025

Stunting



TARGET: 40% reduction in the number of children under-5 who are stunted

Anemia



TARGET: 50% reduction of anemia in women of reproductive age

Low birth weight



TARGET: 30% reduction in low birth weight

Overweight



TARGET: No increase in childhood overweight

Breastfeeding



TARGET: Increase the rate of exclusive breastfeeding the first 6 months up to at least 50%

Wasting



TARGET: Reduce and maintain childhood wasting to less than 5% from 8% by 2025

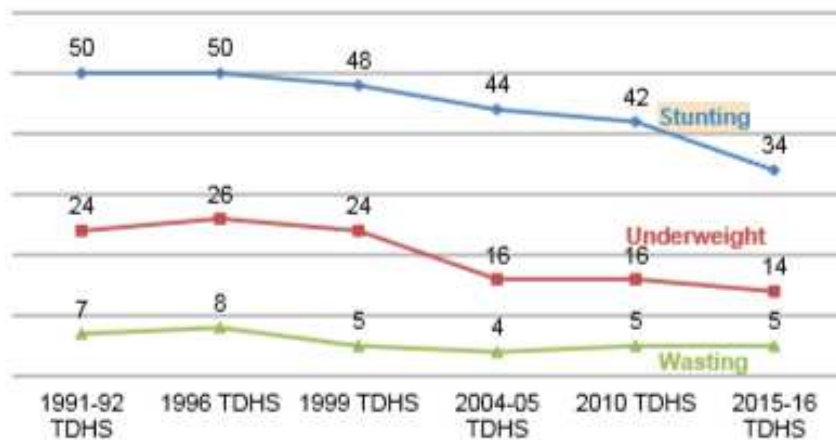


What is Tanzania
doing?

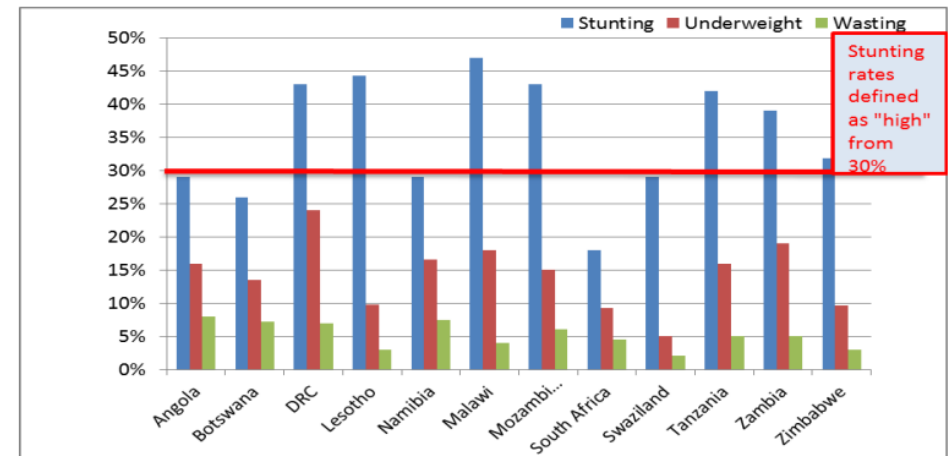
Nutrition Situation



Percentage of children under age 5 classified as malnourished



Source: TDHS-Tanzania Demographic Health Survey



Source: SADC Regional Vulnerability Assessment and Analysis (RVAA) Synthesis Report, 2013

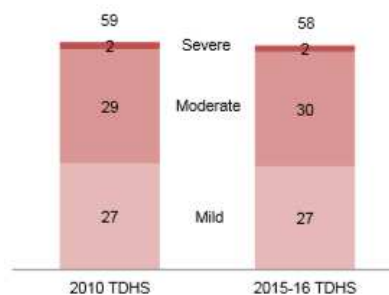
Other indicators

- Exclusive breastfeeding
2004/05 – 50%
2010 – 50%
2015/16 – 59%

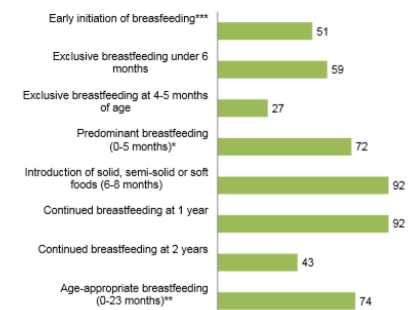
- Minimum acceptable diet

- Anemia
2004/05 – 72%
2010 - 59%
2015/16 - 58%

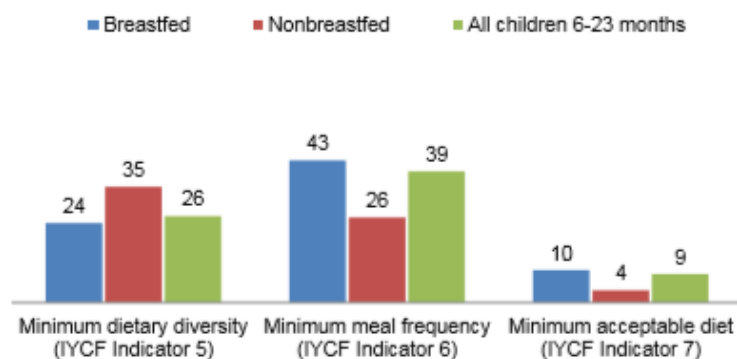
Percentage of children age 6-59 months



Percentage of children



Percentage of children age 6-23 months



Initiatives undertaken

Develop National Multisectoral Nutrition Action Plan

Establish Human resource for nutrition – provide Scheme of service and nutrition focal points in line ministries

Increase government resource allocation for nutrition – 1000/child

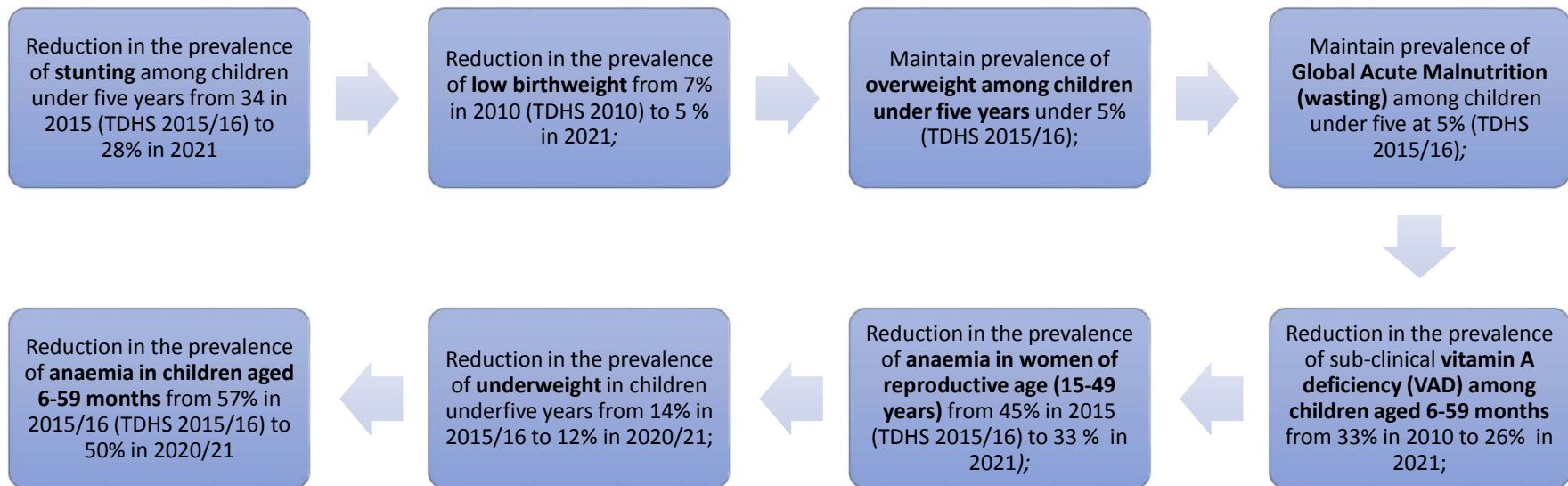
Country involvement in SUN movement – HLSCN

Establishment of robust multisectoral collaboration – TWG

Political commitment – Compact signing

Partners commitment to scale-up evidence-based High Impact Nutrition Interventions

Targets & Priority areas



Achievements



Reduction in prevalence of stunting children under five among from 42% (2010) to 34% (2016)



Reduction in the prevalence of underweight among children under five from 16% (2010) to 14% (2016)



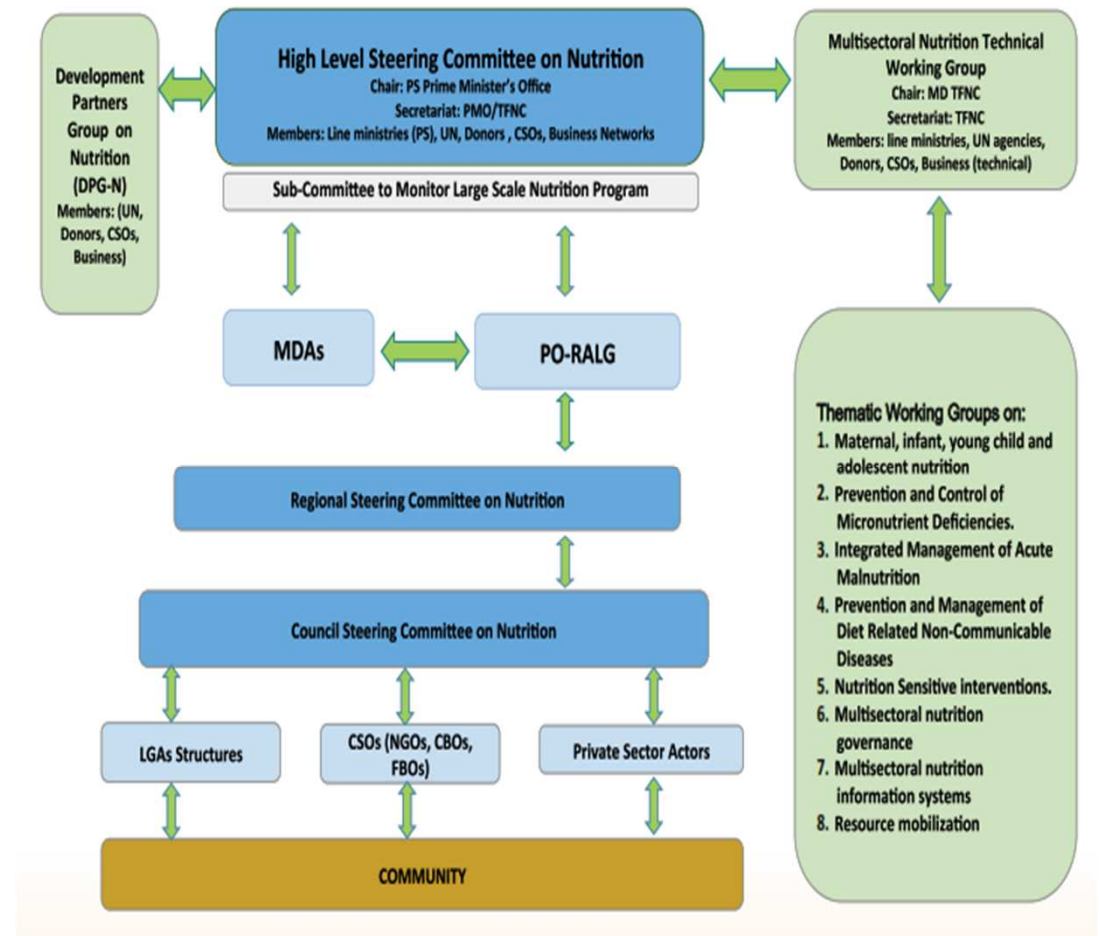
Maintaining the prevalence of Global Acute Malnutrition (wasting) among children under five at 5 % wasting



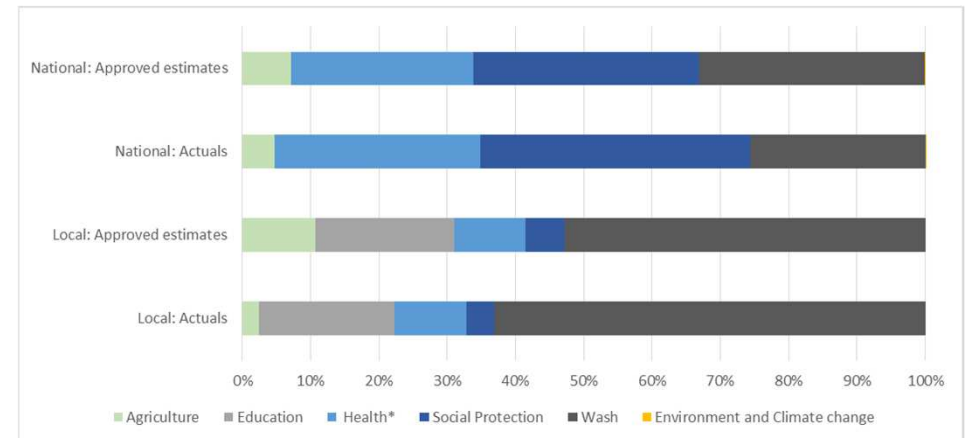
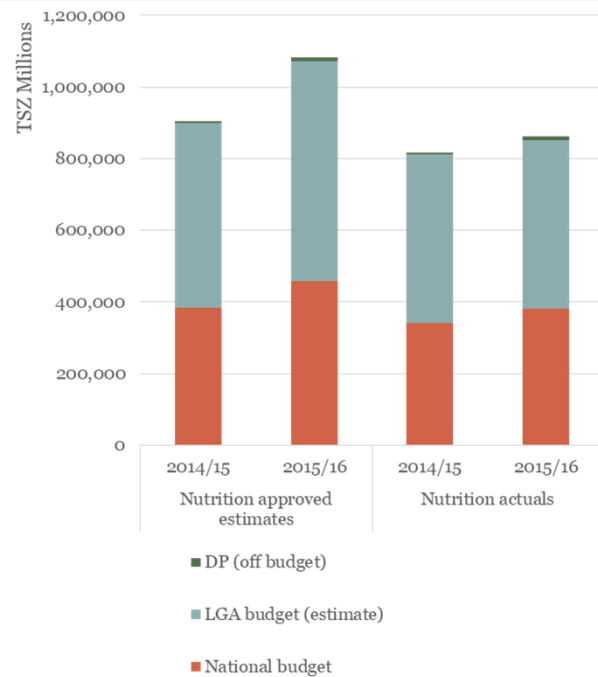
Increase prevalence of Exclusive breastfeeding for children 0 – 6 month from 50% (2010) to 59% (2016).

What made us reach this far?

- Multisectoral coordination & coordination
- Political commitments
- Increased in Government resource allocation for Nutrition
- Increased human resources for nutrition
- The Government and partners commitment
- Private sector involvement



Investment in nutrition



Remaining Challenges

Prevalence of household food insecurity in rural, peri-urban and urban areas.

Social –cultural behaviors and practices that negatively impact nutrition.

Prevalence of communicable and NCD that impair nutrition.

The requisite resources to stem the increasing burden of malnutrition in the country and its long term impacts.

Good governance deficits in terms of transparency and accountability at different leadership and management levels to address malnutrition in the country.

Way Forward



Improve multisectoral coordination through NMNAP review(s)



Finalize and implement resource mobilization strategy to increase domestic and donor funding



Incentive system for Local government to increase domestic resources spending and performance on selected nutrition specific interventions



Thank you!