

# NAMIBIA

## SUN Country Summary | September 2012

Namibia joined the SUN Movement November 2011

*"We are all invited to be part of the commitment to make malnutrition in Namibia history."*

**-The Rt. Honorable Prime Minister Nahas Angula,  
NAFIN Convener and member of the SUN Lead Group**

### MEASURING PROGRESS IN NAMIBIA

	Indicator 1	Indicator 2	Indicator 3	Indicator 4
NAMIBIA				

#### **Indicator 1:** Bringing people into a shared space for action (the multi-stakeholder platform)

The Office of the Prime Minister (OPM) is the **convener** of the National Alliance for Improved Nutrition (NAFIN) that was established in November 2010 (through Cabinet decision number 17<sup>th</sup>/23.11.10/001) to tackle the high levels of stunting in Namibia. The Rt. Honorable Prime Minister Nahas Angula is chair of the NAFIN and is also a member of the SUN Lead Group.

NAFIN is the **multi-sector, multi-stakeholder platform**, which meets quarterly. Participation of ten line ministries, including the Ministry of Finance and the National Planning Commission, is stipulated by three Cabinet Decisions passed between 2010 and 2011.

The general objective of NAFIN is to develop and coordinate the implementation of a multi-sectoral National Nutrition Strategy and strategically manage national nutrition promotion activities around four key areas: i) Malnutrition reduction among women and children; ii) Capacity development across sectors with priority given to ensuring food and nutrition security for most disadvantaged households and communities; iii) Ensuring that the economic and social benefits of nutrition security are reflected in sectoral plans and policies as well as the National Development Plans and iv) Preventing and reducing overweight and obesity. Five main strategies are employed by NAFIN to reach its objectives including: i) Integrating the nutrition strategy and action plan in the National Development Plan and Vision 2030; ii) Building a common approach across sectors and levels of government; iii) Providing expert advice on nutrition issues from a multi and cross-sectoral perspective to the cabinet, parliament and individual government ministries and agencies; iv) Promoting better communication across multiple stakeholders; and v) Fostering partnerships among, public, non-government and private sectors.

In establishing NAFIN, the Cabinet directed that the Ministry of Agriculture, Water and Forestry should be the convener of the Food and Nutrition Security Task Force, the Ministry of Health and Social Services (MoHSS) should be the convener of the Maternal, Infant and Young Child Nutrition Task Force (MIYCN) and the Private Sector Members of NAFIN, the Namibian Agronomic Board (NAB), should be the convener for the Food Fortification Task Force. Each working group has its own terms of reference (TOR) and is accountable to NAFIN.

The **SUN Government Focal Point is yet to be appointed** but the Head of Nutrition Sub-Division within the MoHSS, is recognized as the SUN technical specialist and interim Focal Point. Synergos Namibia, a non-governmental organization, is functioning as the NAFIN Secretariat with technical support provided by UNICEF.

The **Donor Convener(s)** is UNICEF. A specific SUN Task Force has been name-checked and includes Synergos Namibia, GAIN and the MoHSS as well as UNICEF. The US Government works in Namibia through its partners CDC, FANTA-3 and I-TECH.

There is **no UN Agency facilitation mechanism** at this time although engagement with REACH has been on-going for technical assistance on the Country Implementation Plan (CIP) and Result Matrix. The UN Agencies active in Scaling-Up Nutrition are UNICEF, WHO, WFP, UNESCO, FAO and UNDP.

**Civil Society Organizations (CSO)** are members of NAFIN. The Namibia Non-Government Organizations Forum (NANGOF) Trust is the umbrella body. CSOs contribute to scaling up nutrition to the communities through direct activities at household level. For example, Catholic Aids Action has a number of community based volunteers that provide care and support services for people living with HIV. Namibian Red Cross Society (NRCS) has a cadre of community based volunteers that could be engaged to support the scale up of nutrition activities on the ground. These channels are currently being explored as part of the SUN Country Implementation Plan.

The **Private Sector** engagement has provided financial support through the Pupkewitz Foundation and the Millers Association. A number of industries like Namib Mills, Namibia Dairies and Praktika Afrika are fully engaged in the Food Fortification TWG. The Pupkewitz Foundation of the Pupkewitz Holdings has to date contributed NS\$ 450,000 (US\$ 55,000) to NAFIN. These funds have been used to hold national and regional consultation meetings and a part has also been earmarked for a Pearl Millet Fortification Consultancy commissioned by the Food Fortification TWG.

The **University of Namibia (UNAM)** is a member of NAFIN. In addition, the Centre for Research Information Action (CRIAA) works with local communities to support sustainable production of indigenous natural products and small-holder farmers contributing to Scaling-Up Nutrition.

### **Indicator 1 Status: 3**

### **Indicator 2: Ensuring a coherent policy and legal framework**

Following on from the Cabinet Decision that established NAFIN, a document launched during the formal launch of NAFIN was used as a basis to inform a set of Cabinet decisions to support and expedite nutrition actions in Namibia. This Cabinet decision entitled '**Report on Malnutrition in Namibia: The Time to Act is Now**' (Cabinet Decision no 3<sup>rd</sup>/01.03.11/004) was released in March 2011. This Cabinet

decision resolved eight core resolutions and five additional resolutions. The five core resolutions covered recommendations on fortification, agricultural bio-fortification, targeted feeding programs and food distribution for vulnerable sections of the population and as part of emergency responses, increased awareness programs and advocacy actions to improve community awareness and therefore action, community based growth monitoring programs and nationwide deworming, immunization and supplementation campaigns. The five additional resolutions recommended that accountability be pegged to OPM and/or the respective line ministries, the involvement of regional councils in the implementation of the recommended actions, curriculum modification to strengthen the teaching of nutrition and related subjects, linkages be made between food distribution and food production initiatives as well as the inclusion of the national youth services in food distribution. These recommendations supported a multi-sectoral, multi institutional response to existing and scaled up nutrition activities.

A third set of multi-sectoral nutrition sensitive and specific cabinet resolutions were released under the leadership of the OPM in August 2011, under Cabinet decision number 14<sup>th</sup>/16.08.11/003, entitled **Report on the National Vulnerability Assessment 2010/2011**. This set of cabinet decisions encompassed recommendations to the Disaster Risk Management Team, which is a Directorate within the OPM and called upon the joint actions with the Education sector, the Health Sector, the Rural Development Sector, the Environment and Tourism sector, the Agricultural sector and special projects under the OPM.

Namibia has a National Food and Nutrition Policy dated 1995 and a National Strategic Plan for Nutrition dated 2010. In addition, there are a variety of nutrition-specific strategies and guidelines covering all aspects from infant and young child feeding, to micronutrient deficiency control, to acute malnutrition management to nutrition management for people living with HIV/AIDS.

Nutrition-sensitive policies and strategies in Namibia cover all key sectors including agriculture (National Agriculture Policy 1995 and Green Scheme Policy 2008), water and sanitation (National Water Supply and Sanitation Policy 2008), development (National Development Plan 2008), public health (frameworks for HIV/AIDS response, youth health, non-communicable diseases and sanitation), education (National Policy for School Health 2008), social protection with a special attention to orphans and vulnerable children. A Civic Organization Partnership Policy is also in place

The national legislation with a bearing on nutrition covers salt iodization, water management and social protection with the Social Security Act being amended in 2004. The maternity protection law provides 12 weeks of maternity leave. Measures for the implementation of the International Code of Marketing of Breastmilk Substitutes (BMS) are currently awaiting final approval.

### **Indicator 2 Status: 3**

### **Indicator 3: Aligning programmes around a Common Results Framework**

The NAFIN has prioritized the following actions: 1) Making fortification work better; 2) Addressing the nutritional needs of infants and young children; 3) Nutrition advocacy and awareness; 4) Institutional and vulnerable group feeding programs; 5) Technical innovation and capacity development; 6) Minimum food basket.

A demonstration of political commitment was strongly communicated when all 13 Governors from the Regions in Namibia, met in Windhoek in August 2011, at the invitation of the Chair of NAFIN, the Rt. Hon Prime Minister Nahas Angula. The purpose of the meeting was to create awareness about the nutrition situation in the country and all the respective regions. A key output from the meeting was the Declaration of Commitment signed by all 13 Regional Governors where they pledged to act as regional representatives for NAFIN and support the initiatives to scale up nutrition. The Regional Governors pledged to mobilize communities and community leaders for bi-annual national immunization days, breastfeeding campaigns, dietary diversification efforts, maternal nutrition activities and water and sanitation activities. The Regional Governors also pledged to support food distribution among vulnerable groups and school feeding and link this to the support of local food production.

Namibia is currently working on the development of a Country Implementation Plan with a Common Results Framework to ensure delivery at scale. As part of nutrition-specific programs, the Ministry of Health is implementing national scale supplementation programs of vitamin A for 6-59 months old children (64% coverage, 2010) and for post-partum women (68% coverage, 2010), deworming for children under six years (74% coverage, 2011) and iron/folic acid supplementation for pregnant and postpartum women. Zinc treatment for diarrhea is included in the IMNCI Program and treatment of severe and acute malnutrition is available in 115 facilities. Namibia is prioritizing large scale fortification of wheat and maize flour through voluntary participation of the private sector in the Food Fortification Task Force.

Relevant programs in other key sector include the Green Scheme national program and the Water and Sanitation national program implemented by the Ministry of Agriculture, Water and Forestry; the Child Welfare Grants from eligible Orphans and Vulnerable Children (12% of the population below 18 years) implemented by the Ministry of Gender Equality and Child Welfare and the School Feeding national program, which covers approximately 1200 schools and 270 000 pupils.

### **Indicator 3 Status: 2**

### **Indicator 4: Financial tracking and resource mobilization around a Common Results Framework**

NAFIN has a line item within the Ministry of Finance with allocated resources for N\$ 200 000 per year (about US\$ 24 000) for a period of 4 years (2011-2014).

The “Time to Act is now” estimated the cost of nutrition-specific interventions including improved water supply and sanitation at an additional US\$ 4.2 million a year from public and private resources to successfully mount an attack against malnutrition.

The Ministry of Health and Social Services has planned for an overall US\$ 7.8 million (N\$ 65,000,000) to reduce malnutrition in Namibia over the five years period of 2009 - 2013. Apart from that there is no Government budget line on nutrition. Nutrition specific interventions are funded by partners and by government under the Subdivision Food and Nutrition for programs such as Nutrition Surveillance and Maternal and Child Nutrition, Micro-nutrient Deficiency Diseases and Non-communicable diet-related diseases. New interventions such as the Nutrition Management with HIV and the treatment of acute malnutrition are also funded by development partners.

There is agreement about limitations in the financial resources available and allocated to nutrition between Government and partners, but the amount has not been agreed upon.

Indicative budget for key programs that impact on nutrition

Activity Name	Estimated budget (US\$)	Budget Projections (US\$)	
	2012/13	2013/14	2014/15
NAFIN	37,000	24,500	37,000
Regional and District Health Services (Primary Health Care and Family Health Division)	11.7 million	8.2 million	8.6 million
School Feeding Program	7.3 million	7.3 million	7.3 million
Water and sanitation	54 million	106 million	105 million
Child grants	25 million	25 million	25 million

**Indicator 4 Status: 2**