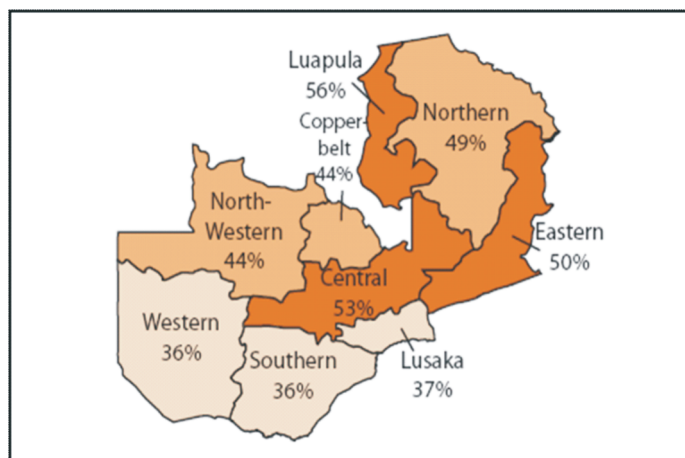
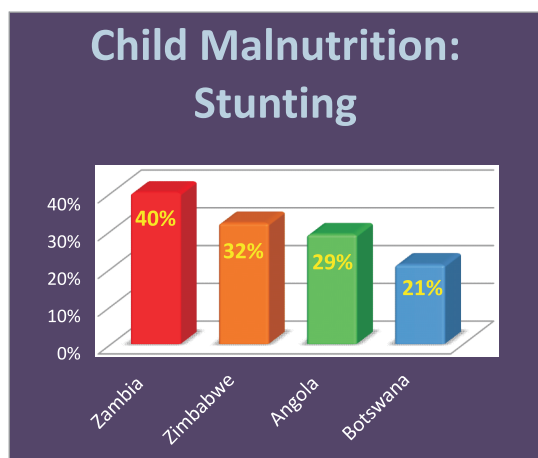




# Zambia Nutrition and Related Facts

## THE BIGGER PICTURE

Zambia is one of the countries in Africa with the highest level of stunting in children under the age of five, standing at 40% while the average for Africa stands at 42%(ZDHS 2013/14). Worse still, in children 18-23 months of age in Zambia stunting is at 54 % (ZDHS 2013/14).



Stunting in children under five years of age in Zambia	1990	2001/2	2007	2014	MDG Target 2015
	40%	53%	45%	40%	20%

The rate of poverty and vulnerability in Zambia has for a long time been too high, estimated at 60.5% while in rural Zambia alone it is estimated at 80% (National Social Protection Policy 2014).

Reviews conducted on social assistance programmes reveal that there is limited coverage and inadequate unpredictable funding. Only 850 000 children are reached through the home grown school feeding scheme programme and only 50 000 – 60 000 families are covered by the public welfare assistance scheme and social cash transfers (National Social Protection Policy 2014).

## MATERNAL AND CHILD NUTRITIONALSTATUS

- 10% of women aged 15-49 are underweight, that is, they have a Body Mass Index (BMI) below 18.5 (ZDHS 2013/14).
- 23% of women are overweight or obese (ZDHS 2013/14).
- Mothers less than 20 years are about twice as likely to have low birth weight babies (15%), compared to mothers aged 20-34



This is not an indication of good nutritional status!!!

(8%) and mothers aged 35-49 (7%) (ZDHS 2013/14).

- 1 out of 3 women give birth by the time they are 18 years old (ZDHS 2013/14).
- 29% of girls 15-19 years old are already mothers or pregnant with their first child (ZDHS 2013/14).
- Pregnant women only visit antenatal clinics when they are about 5 months pregnant (ZDHS 2013/14).
- According to the most recent and available data, anemia among pregnant women in Zambia is 47% compared to the WHO standards (greater than 40% - severe public health



This is too late!!  
They need to go for antenatal as soon as they suspect they are pregnant to receive iron and folate supplements and other health services

### KNOW MORE

*Eliminating anemia results in a 5 to 17 percent increase in adult productivity, which may add 2 percent to our country's GDP.*

*Low birth weight may reduce a person's intelligence (IQ) by 5 percentage points.*

## CHILD NUTRITIONAL STATUS



### KNOW MORE

*1% decrease in height due to stunting = 1.38% decrease in productivity of the child in future (NFNC Nutrition Profiles 2015)*

- 1 out of 22 Zambian children dies before reaching the age of one (ZDHS 2013/14)
- The death rate of children before the age of 28 weeks has stood at 24 out of 1000 live births for the past five years (ZDHS 2013/14).
- 1 out of 13 children does not survive up to the age of 5 years (ZDHS 2013/14).
- The death rates of infants and young children under 5 has stood at 45 out of 1000 live births and 75 out of 1000 live births for the past 5 years respectively. (ZDHS 2013/14).
- About 52% of all child deaths after 6 months are due to malnutrition
- making this the single greatest cause of child deaths (UNICEF 2008; DFID 2011).
- 37% of infants receive complementary foods before the age of six months. This is unlike the recommended period of 6 completed months (ZDHS 2013/14).
- Only 11% of children ages 6-23 months are fed appropriately based on recommended infant and young child feeding (IYCF) practices (ZDHS 2013/14).
- About 53% and 46% of Zambian children have Vitamin A and iron deficiency respectively (NFNC Nutrition Profiles 2015)



## WATER, HYGIENE AND SANITATION

According to the World Health Organization (WHO) estimates, 50% of malnutrition is associated with recurrent episodes of diarrhea, which often result from unsafe water, insufficient sanitation, and inadequate hygiene.

- ▶ About 5 million people are living without safe water and over 9 million people don't have access to adequate sanitation in Zambia. SOURCE: Water Aid 2014.
- ▶ Over 4,000 children die every year from diarrhoea caused by unsafe water and poor sanitation in Zambia. SOURCE: Water Aid 2014.  
Access to water reduces diarrheal diseases by 25% and improved waste disposal by 22%. (NFNC nutrition profiles 2015).
- ▶ Promoting proper hygiene such as hand washing with soap/ash can reduce the risk of diarrheal disease by 46% and death due to diarrhea by 17% (NFNC Nutrition profiles 2015).
- ▶ In the peri-urban population of Lusaka alone, at least 56% do not have access to an adequate water supply and about 90% do not have access to satisfactory sanitation facilities. SOURCE: Water and sanitation for the urban poor 2015

## FOOD AND NUTRITION SECURITY

Only 36% of households in Zambia have enough food to eat, while 19% of households seldom or never have enough to eat, categorizing them as chronically food insecure. SOURCE: Sitko et al. (2011) working paper no. 52 food security research project Lusaka, Zambia.

- ▶ The best available direct measure of food insecurity is an estimate of daily energy intake. The estimated average daily requirement for men and women is 2 750 Calories and 2 600 Calories respectively.
- ▶ It is unfortunate that nearly half of the country's rural population, 45% have daily caloric intakes below 1,750 (an average for individuals of all age groups) per day (According to FAO food balance sheet calculation) while their families spend nearly 80% of their incomes on food.  
For example calorie consumption ranges from 1,185 in Luapula province and 2,103 in Lusaka compared to the above estimated average daily requirement.
- ▶ The minimum number of meals that a person requires per day is 3.
- ▶ Ideally, a diet should constitute enough food from the staple category (cereals, starchy fruits and root tubers) and at least one food item from each of the other groups (legumes and nuts, dark green leafy vegetables and/or yellow vegetables, animal source food, and fats and fat substitutes).
- ▶ According to the NFNC Food and Micronutrients Consumption Survey (2014) Lusaka Province has the highest percentage of households that could afford three meals a day at 64% while Luapula province had the lowest proportion of households that could afford 3 meals at 14% and the highest proportion of households that could only manage two meals per day at 81%.
- ▶ On average, only 2% of calories consumed by Zambians are from pulses, vegetables, and nuts, highlighting the serious need for both agricultural and dietary diversification (The FAO food balance sheet calculation).

*Agriculture in Zambia supports the livelihoods of over 70% of the total population. However agriculture and caloric intake among Zambians is overwhelmingly dominated by maize. Maize accounts for 57% of Zambians' daily caloric consumption. On the contrary a more diversified diet is what is necessary to improve a number of outcomes in areas such as birth weight, child height (Stunting), and improved iron concentrations.*

*Source: www.FAOSTAT.org; Sitko et al. (2011) working paper no. 52 food security research project Lusaka, Zambia.*

## NUTRITION HUMAN RESOURCE

Approved government establishment posts are inadequate to serve the needs for nutritionists nationwide; the numbers of nutritionists within current national workforce amounts to approximately 1.8 staff per 100,000 population, but if the target establishment was filled, this value would only increase to 2.4 per 100,000. Source: Expert Committee estimates 2009: Nutritionists and Dieticians Needs Assessment for Zambia.

It is estimated that **1808** Nutrition degree holders would be required in the workforce if Zambia is to achieve nutrition security and develop economically to a medium income country.

Source: Expert Committee estimates 2009: Nutritionists and Dieticians Needs Assessment for Zambia.

### Know More

*Studies in both human and economic development have shown that nutrition wellbeing is a fundamental prerequisite for sustainable and national economic development. As such, no country can claim it is either developed or developing if its population lack nutrition security (NFNC Nutrition profiles 2015)*

SECTOR	NATIONAL HQ	HOSPITAL/HEALTH CENTER	PROVINCIAL	DISTRICT
Health	3	290	9	72
Agriculture	3	-	9	72
Training Institutions	25	-	9	1000
Private/NGO	60	20	40	216
Total	71	310	67	1360

Source: Expert Committee estimates 2009: Nutritionists and Dieticians Needs Assessment for Zambia

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