



# Realigning Agriculture to Improve Nutrition: RAIN Project

# Working Multisectorally in Mumbwa District to Improve Nutrition

#### Introduction

The Realigning Agriculture to Improve Nutrition (RAIN) project is an innovative way of tackling the root causes of poverty and hunger. An unique component of the project is to 'coordinate and align' Zambian ministerial sector activities at the district and community levels to address the intertwined and multisectoral causes of child stunting. The coordination across sectors is thought to improve the impact and sustainability of the project as well as to encourage replication, thereby better addressing malnutrition.

The Mumbwa District Nutrition Coordinating Committee (DNCC) was established to realign and coordinate the activities of different actors in the district. To do this, the DNCC set out to build on the strengths of existing actors, systems and capacities to facilitate a shift in how stunting is understood and addressed. The result has not only been coordinated strategies and joint interventions for stunting prevention, but real and persistent changes in how malnutrition is viewed and how ministries interact on the issue.

Ultimately, the DNCC aims to demonstrate that multisectoral coordination and alignment, bringing in health, agriculture and other key sectors, is a viable and effective approach to address stunting, and to provide a practical example of how this can be achieved, sustained and replicated elsewhere in Zambia.

This brief captures the practical experience of the DNCC in turning a concept into action, namely the convergence of activities to ensure that a child receives nutritious foods while at the same time having access to safe water, good sanitation, appropriate care and quality health services.

# **Convening entity**

The DNCC is essentially a monthly meeting convening core representatives of key line ministries with mandates to address the underlying determinants of malnutrition. But the DNCC is also a lot more than this, due to the particular process of observing, learning, sharing and trust-building that was key to its inception and continued growth.

The DNCC has become a space for different government sectors and civil society organisations to convene, where learning, experimentation and the adaptation of interventions can be facilitated, and where multi-sectoral work can be understood as "business unusual".

The regular meeting of the Committee has strengthened collaboration between different sectors as they pursue a stated vision and objectives, supported by a definition of specific roles and responsibilities for each participating actor, and the commitment to reflection and learning.

These elements have been forged through the growing trust and deepening relationships that have created the principal rationale of the group and were facilitated as an explicit part of its establishment, as opposed to simply coming together occasionally to oversee a programme being implemented through separate sectors.

# **Putting alignment into practice**

In order to find practical mechanisms to enable a multisectoral response to address stunting at local or community level, the DNCC has focused on a specific area or location such as schools, clinics or extension camps. In this way, services from the different sectors required to address the multiple causes of stunting can converge. Focusing on a particular locality allows for the identification of specific action by different actors that can be coordinated and accounted for.

It was recognised that within a ward—the administrative structure closest to people - clusters of government facilities provide easier access to some communities than others. Starting and building on these "clusters of government facilities", often near a road, interventions can be "seeded" and "expanded" elsewhere across the ward. This requires a dedicated strategy to ensure outreach across communities and coordination amongst the implementers. It also requires active learning amongst the group to ensure that challenges are addressed and scale up is carefully thought through for a particular context, rather than a one-size-fits all.

#### A Three-Pronged Approach:

This strategy is premised on a three-pronged approach that starts within the selected entry point and works out across the ward and ultimately the entire district.

The **first prong** is that of ward-level officials working through existing delivery channels of various ministries present within the same geographical area. These include health facilities for the Ministry of Health (MOH), schools for the Ministry of Education, Science, Vocational Training and Early Education (MESVTEE) and agricultural camps for the Ministry of Agriculture and Livestock (MAL). The physical presence of these officials enables other Ministries to engage the process and deepen the alignment.

Key to this is that government staff within these delivery channels understand the importance of nutrition and how an aligned, coordinated approach works. Staff members include teachers, nurses, environmental health technicians and extension officers. They are orientated to appreciate the importance of seeking linkages between their work and others in order to align adequate food, care, and health for the target population, in particular children and women.

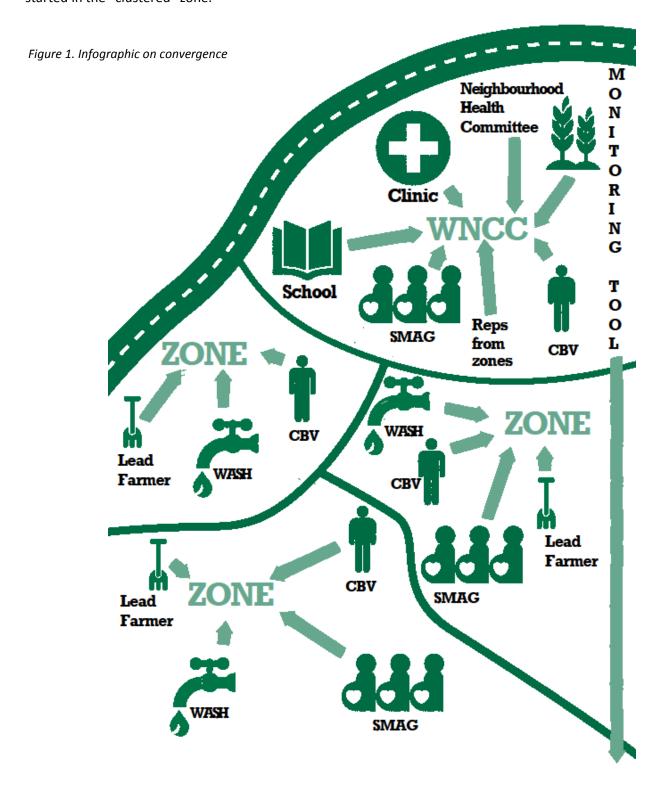
Once staff members are orientated, the inputs required for the priority interventions need to be ensured. These include nutrition commodities, operational water points, adequate sanitation facilities in schools and homes, promotion materials and agricultural demonstration plots within the camps. This has planning implications for all government members of the DNCC and has substantial implications for funding flows to enable these ministries to effectively coordinate and align their work.

The **second prong** of the strategy is partnership with community structures, essential to enable focused interaction with communities. These structures are established under different government programmes and are based on volunteer groups. They include Lead Farmers under MAL, Water Sanitation and Hygiene Groups (WASH) Groups under the Ministry of Local Government and Housing (MLGH), Community Teachers under MESTVEE, Community Welfare Assistant Groups under the Ministry of Community Development Mother and Child Health (MCDMCH); and Child Health Promoters, Safe Motherhood Action Groups (SMAGs) and Neighbourhood Health Committees under MoH, amongst many others. Government staff provide the mentoring required to build an understanding of undernutrition and how to address it through an aligned approach.

These community based volunteer (CBV) groups are required to participate in the routine process of sensitising communities about nutrition. These groups must be orientated towards understanding their work as being necessarily multisectoral. In this way, the various groups would understand and seek important linkages with other groups, government officials and interventions, across communities. In this way, a WASH group would connect to the Farmer Field School and a clinic, as an example.

The interventions facilitated by the various ministries not only involve the establishment or strengthening of specific community groups but also include a broader community sensitisation approach. The work of Community Welfare within MCDMCH is particularly important to engage the community groups to build their consciousness about nutrition and to "demand" the interventions provided by the state — and where appropriate, non-state actors.

The **third prong** builds on the establishment of Ward Nutrition Coordinating Committees (WNCC) as learning spaces where nutrition interventions can be established. The WNCC consists of local-level government staff and community representatives from across the ward. They are also points where sub-ward committees can be established. Representatives from these sub-wards or zones are drawn from community volunteer groups and are responsible for establishing Zone Nutrition Coordinating Committees, which ultimately replicate the interventions started in the "clustered" zone.



To ensure adequate monitoring, community members and local extension staff are required to utilise the monitoring and evaluation system developed by the DNCC – simple indicators that measure the delivery of nutrition interventions. It is also important to elicit feedback from communities about what services they enjoy and whether relevant ministries, officials and community representatives are undertaking their responsibilities, and there are various participatory ways of doing this.

# **On-Going Learning and Adaptation**

This feedback contributes to the on-going learning approach of the DNCC as implementation lessons became available and the interventions are adjusted and adapted. This reflects the DNCC approach of "learning, experimenting and adapting", which is key to the success of the committee and achievements of its aim.

# Box 1: Converging at community level through women's groups

The **Realigning Agriculture to Improve Nutrition (RAIN)** project is an innovative way of tackling the root causes of poverty and hunger implemented by two NGO's in Mumbwa district in Zambia. NGO implementation presents different opportunities for convergence as it can be more intensive in its implementation. In this case, a key component of the project has been the establishment and support to women's groups as the "site for convergence" at community level.

Women's groups of 15-20 women are the target for delivering reoccurring agriculture, and nutrition trainings. The women groups are central to the project, as they are used as a learning platform and are the point at which all the different interventions (gender, agriculture and nutrition) converge.

Women group leaders have been trained in agricultural activities through field staff from Mumbwa Child Development Agency (MCDA) in collaboration with agricultural extension officers, whilst the existing government structures for health, have facilitated the nutrition component training for the community health volunteers. The gender component was directly implemented by MCDA with women group members and spouses.

The women groups are trained by the women group leaders, community health volunteers and MCDA staff, who pass on the information and skills to the group members at bi-weekly meetings and through demonstration in their own gardens and homes.

Women's groups are thus the "sites for convergence" between the agriculture and the health sectors, to align them for achieving the common goal of improving nutrition. The group members see the interventions as seamless and understand clearly how they complement each other.

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