The Challenge

Inadequate care and feeding practices, food insecurity, an unhealthy household environment and inadequate health services are some of the leading causes of early childhood malnutrition.

Approximately 29% of Ugandan children aged 6-59 months are stunted (low height for their age), 4% are wasted (low weight for their height) while 11% are underweight (have a body mass index (BMI) below that normal for their age and height group).

Stunting, the principal measure of chronic, or long-term malnutrition, has life-long consequences for health, human capital, economic development and prosperity.

SN4A Approach

SN4A is an example of an integrated nutrition-sensitive approach. It seeks to improve nutrition outcomes by encouraging families to grow, and encourage consumption of diverse food at the household level, particularly amongst women of reproductive age (WRA) and infants.

Recognising that improvements in nutritional outcomes are affected by gender roles within households, SN4A engages both men and women within the community to review and address intra-household decision-making on food production, expenditure, consumption and allocation, as well as access to resources and women’s time and workload that often affect childcare practices.
When we started hearing about the five food groups that our families are supposed to eat to stay healthy, it felt really strange. I was not very familiar with all these food groups, but what they were teaching us made a lot of sense because it was something that affected our children. I resolved to learn all that I could about growing diverse foods and implement it in my home garden. I set up a vegetable garden at home to grow different foods and I was not very familiar with all these food groups, but what they were teaching us made a lot of sense because it was something that affected our children. I resolved to learn all that I could about growing diverse foods and implement it in my home garden. I set up a vegetable garden at home to grow different foods and plant fruit trees. Today we have enough of each of the five food groups. For carbohydrates we have the orange fleshed sweet potatoes, banana and cassava; protein from beans and groundnuts; vegetables such as eggplant, nakati (bitter tomato) and dodo; and jack fruits and avocados for fruits. "

Wilson Kyomuhendo,
a farmer in Katebe village, Kyenjojo district.

To ensure sustainability and scalability, the project works with local government structures to strengthen their capacity to plan and implement nutrition-sensitive strategies.

Primary schools are used as nutrition hubs. Village health teams (VHTs) mobilise parents to come to schools and learn about nutrition-sensitive agriculture as well as about good sanitation and hygiene practices.

Long-term sustainability is enhanced through the capacity building of local and national governments to stimulate and maintain demand for nutritious diets. Nutrition Action Groups (NAGs) are empowered to promote the adoption of recommended food production, preparation, and consumption as well as sanitation and hygiene practices at the household level.

SN4A Results
- A total of 23 government-aided primary schools were selected as nutrition hubs and demonstration gardens established in the schools with support from the sub-county agricultural officers. The 23 school hubs have managed to sustain themselves without financial support from the project. Communities are mobilised to learn good agricultural practices from the schools and supported to replicate best practices in their households.
- The project also trained 1,200 Nutrition Action Groups, Nutrition Coordination Committees (three at the district and sub-county level and 23 at the school hub level) on their roles in promoting nutrition sensitive agriculture; and water, sanitation and hygiene practices within their communities.
- As a result, 85% of participating households (10,463 people) have adopted good agricultural practices in their home gardens.

Project Focus
Our emphasis in the next two years will be on how to sustain, scale and replicate the SN4A approach by promoting its adoption through social behaviour approaches. Emphasis in implementation will also be placed on integrating gender and WASH issues in nutrition.

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