

Agriculture-nutrition interface: A multi-sectoral and inter-disciplinary policy framework for improved rural household nutrition in Uganda

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The Uganda Food and Nutrition Policy 2003 has an overall objective of promoting nutritional status through multi-sectoral coordinated interventions involving four key sectors: health; agriculture; education; and gender, labour, and social development; led by Ministries of Health (MOH) and Agriculture, Animal Industries and Fisheries (MAAIF). The mandate of the MOH is to improve the quality of health services with nutrition as one of the priority components while that of MAAIF is to support food production. Besides the public sector, private stakeholders are also involved. In order to co-ordinate the various stakeholders, Government adopted the following strategies:

- ✓ A multi-sectoral national Nutrition Action Plan (UNAP) specifying interventions, lead agencies, and other actors developed
- ✓ High level coordination at national level through a cabinet subcommittee, Parliamentary Sub-Committee on Nutrition which meet bi-annually to review progress on key nutrition indicators in the country and to provide policy direction.
- ✓ A legally established institutional structure for national-level co-ordination the Food and Nutrition Council in the Office of the Prime Minister.
- ✓ Sectoral and inter-sectoral coordination committees set up
- ✓ Nutrition focal persons in each sector to co-ordinate nutrition activities
- ✓ The Uganda Nutrition Co-ordination Forum which meets bi-annually comprising of all key national and local nutrition stakeholders in the private and public sector involved in implementing programmes under the UNAP.

WHAT worked?

- ✓ Placing the national inter-sectoral coordination secretariat in an office that already has mandate and authority to coordinate ministries (the office of the Prime Minister).
- ✓ Structures anchored in a legal framework
- ✓ Policy accompanied with an inter-sectoral national action plan and implementation framework specifying roles, lead agency and other actors.

What did not work well:

- ✓ Misunderstanding of institutional roles and rivalry between health and agriculture disciplines leading to conflicts over mandates
- ✓ Failure to operationalise some coordination structures due to limited funding
- ✓ Public sector funding lags behind that of private sector—donor dependency

SO WHAT? Recommendations to improve partnerships in RAS:

- ✓ Advocate for: (i) National RAS policies to make provisions for coordination structures backed by a legal framework and appropriate funding, and implementation framework. (ii) Institutionalization of incentives for coordination and collaboration e.g governments and donors to make it a pre-condition for funding (iii) Accountability systems: Make it a requirement in performance assessment systems.

3. NOW WHAT? If you were ten times bolder, what first step would you recommend:

Government to establish and operationalise policy and structural frameworks for collaboration and coordination of RAS; ensuring they are adequately staffed and funded.