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Mali: Nutrition Profile

Malnutrition in childhood and pregnancy has many adverse consequences for child survival and long-term well-being. It also has far-reaching consequences for human capital, economic productivity, and national development overall. The consequences of malnutrition should be a significant concern for policymakers in Mali, where 27 percent of children under five years of age are stunted (have low height-for-age), and 9 percent are acutely malnourished or wasted (have low weight-for-height) (INSTAT et al. 2019).

Background

Mali is a vast, mostly desert, country with a population of over 19 million (UNICEF 2019) and a highly undiversified economy that makes it vulnerable to commodity price fluctuations and the consequences of climate change. Although sparsely populated, with only 10 percent of its people living in the north, high population growth rates and drought have fueled food insecurity, poverty, and instability (World Bank 2020). In early 2012, there was a military coup and an occupation of the northern regions by armed groups, followed by the deployment of French-led military forces in 2013, which handed over peacekeeping operations to the United Nations Multidimensional Integrated Stabilization Mission in Mali (MINUSMA) later that same year. Peace negotiations between the government and two rebel coalitions, known as the “Platform” and “Coordination” groups, concluded with the signing of agreements in 2015. While the agreements do not give autonomous status for Mali’s northern regions, they give stronger impetus for decentralization (*Programme de développement accéléré du Nord*). Security, critical to economic recovery and poverty reduction, is fragile, with attacks by armed groups on the United Nations (UN) force and the Malian army continuing, mostly in the north and central regions (World Bank 2020). Disruption to the movement of people and goods (livestock, equipment) is contributing to a deterioration in household livelihoods in these areas. Looting and theft of goods, the cessation of economic activities, and unusual displacements are increasing food insecurity for poor households in these areas (FEWS NET 2020).

Despite volatile security conditions, economic performance in Mali is strong. High performance in agriculture (one of Mali’s primary sectors, in addition to gold) and the services sector led to a growth rate of about 6 percent in 2016. However, Mali is plagued by recurring crises, such as drought, floods, and high prices in conflict areas. While Mali experienced an overall drop in national poverty from 56 percent in 2001 to 44 percent in 2010, the poverty rate rose to 47 percent between 2011 and 2015, but fell slightly to 42 percent in 2019. Ninety percent of all poor live in rural areas, concentrated in the south, where population density is highest (World Bank 2020).

Currently, Mali ranks 152nd out of 162 countries in progress toward meeting the Sustainable Development Goals (SDGs) (Sachs et al. 2019). Mali also has one of the highest population growth rates in the world (with a total fertility rate of 6.3 children per woman), further fueling its high rates of poverty and food insecurity (INSTAT et al. 2019).

Nutrition and Food Security Situation

Food insecurity and hunger plague Mali. It is estimated that 3.5 million Malians are food insecure and 757,000 face severe food insecurity (OCHA 2020). Following the 2012 political crisis and the poor agricultural and pastoral season in 2013–2014, low crop production and high food prices led to a critical food security situation. Inadequate child feeding practices exacerbate undernutrition: two-thirds of children under six months of age are not exclusively breastfed, and only 9 percent of children 6–23 months receive a minimum acceptable diet (INSTAT et al. 2019). Poor child feeding practices, along with inconsistent iron-folic acid supplementation for pregnant women, the country’s high malaria burden, and high prevalence of diarrheal disease and parasitic infections, are also responsible for high anemia prevalence (INSTAT et al. 2019). Regional variations in undernutrition persist, with the highest stunting prevalence reported in Gao (33 percent), Sikasso (32 percent), then Mopti and Tombouctou (both at 30 percent), and the lowest in Bamako (15 percent) (INSTAT et al. 2019).

Childbearing begins early in Mali. By age 19, 61 percent of adolescent girls have begun childbearing (INSTAT et al. 2019). This has serious consequences because, compared to older mothers, adolescent girls are more likely to be malnourished and have a low birth weight baby who is more likely to become malnourished and be at increased risk of illness and death, than those born to older mothers (CPS/SSDSPF et al. 2014). There is significant disparity in stunting based on maternal education and wealth levels—only 13 percent of children whose mothers have secondary education are stunted, while the rate rises to 30 percent of children whose mothers had no formal education. Similarly, 13 percent of children in the highest wealth quintile are stunted, while 33 percent of children in the lowest wealth quintile are stunted. Stunting peaks among children 24–35 months (INSTAT et al. 2019).

Mali Nutrition Data (DHS 2013 and 2018)		
Population 2018 (UNICEF 2019)	19 million	
Population under 5 years (0–59 months) 2018 (UNICEF 2019)	3.46 million	
	DHS 2013	DHS 2018
Prevalence of stunting among children under 5 years (0–59 months)	38%	27%
Prevalence of underweight among children under 5 years (0–59 months)	26%	19%
Prevalence of wasting among children under 5 years (0–59 months)	13%	9%
Prevalence of low birth weight (less than 2.5 kg) (of children whose birth weights are known)	16%	15%
Prevalence of anemia among children 6–59 months	82%	82%*
Prevalence of anemia among women of reproductive age (15–49 years)	51%	63%*
Prevalence of thinness among women of reproductive age (15–49 years) (BMI less than 18.5 kg/m ²)	12%	10%
Prevalence of thinness among adolescent girls (15–19 years)	19%	18%
Prevalence of exclusively breastfed children 0–5 months	33%	40%
Prevalence of exclusively breastfed children 4–5 months	22%	24%
Prevalence of early initiation of breastfeeding (i.e., put to the breast within 1 hour of birth)	58%	64%
Prevalence of children who receive a pre-lacteal feed**	21%	24%
Prevalence of breastfed children 6–23 months receiving minimum acceptable diet	8%	9%

Prevalence of overweight/obesity among children under 5 years (0–59 months)	1%	2%
Prevalence of overweight/obesity among women of reproductive age (15–49 years) (>25 BMI)	18%	28%
Coverage of iron for pregnant women (for at least 90 days)	51%	28%
Coverage of vitamin A supplements for children (6–59 months, in the last 6 months)	61%	68%
Percentage of children 6–59 months living in households with iodized salt	95%	89%

NA: Not Available

* The 2018 EDSM-VI tested children and women for anemia in half of the surveyed households.

**Among last-born children born in the five years preceding the 2006 survey and among last-born children born in the two years preceding the 2013 survey.

Global and Regional Commitment to Nutrition and Agriculture

Mali has made the following global and regional commitments to nutrition and agriculture:

Year of Commitment	Name	Description
2012	Ending Preventable Child and Maternal Deaths: A Promise Renewed	Mali pledged to reduce under-5 mortality to 20 or fewer deaths per 1,000 live births by 2035 by reducing the leading preventable causes of child mortality, including undernutrition (UNICEF 2017).
2011	Scaling Up Nutrition (SUN) Movement	SUN is a global movement that unites national leaders, civil society, bilateral and multilateral organizations, donors, businesses, and researchers in a collective effort to improve nutrition. The Canadian International Development Agency (CIDA) is the donor convener of SUN in Mali. SUN's Multi-Partner Trust Fund (MPTF) recently funded the Civil Society Alliance for Scaling Up Nutrition in Mali, which aims to improve the structural environment for nutrition advocacy; build the capacity of Malian civil society to influence and advance the nutrition policy agenda; and establish national and community-level nutrition policy campaigns to include nutrition in national policies and programs, such as the 2012–2017 Strategic Framework for Growth and Poverty Reduction Program (SUN 2017).
2009	Comprehensive Africa Agriculture Development Program (CAADP) Compact	CAADP is an Africa-led program bringing together governments and diverse stakeholders to reduce hunger and poverty and promote economic growth in African countries through agricultural development. Two national strategies are aligned with CAADP: the National Program for Investments in the Agriculture Sector (PNISA) and the National Priority Investment Plan for Mali's Agricultural Sector (PNIP-SA).

National Nutrition Policies/Legislation, Strategies, and Initiatives

Mali's commitment to improving nutrition is outlined in the following documents:

- Multisectoral Nutrition Action Plan (2021–2025)
- National Nutrition Policy (2013)
- National Strategy for Water, Hygiene, Sanitation (WASH) in Nutrition 2019
- National Social Protection Policy 2015
- National Food Security and Nutrition Policy 2019–2024
- National School Feeding Policy 2009
- Law establishing the school feeding regime 2019.
- Strategy for the Sustainability of School Feeding in Mali 2013
- National Gender Policy
- Strategic Framework for Economic Recovery and Sustainable Development of Mali (CREDD) (2019–2023)
- Strategic Framework for Growth and Poverty Reduction Program (CSCR) (2012–2017)
- Health and Social Development Program (PRODESS IV) 2020–2023
- Reproductive, Maternal, Newborn, Adolescent and Nutrition Health (SRMNEA + N) Investment Document (DI) 2020–2023
- Health sector and Social Development Plan 2014–2023
- Global Alliance for Resilience in the Sahel and West Africa (AGIR), Mali Country Resilience Priorities, Strategic Plan 2018–2035
- National Priority Investment Plan for Mali's Agricultural Sector (PNIP-SA) 2011–2015
- National Program for Investments in the Agriculture Sector (PNISA) 2014
- National Agriculture Investment Plan (NAIP) 2015–2025

The Ministry of Health and Public Hygiene is in charge of several programs that have a specific bearing on improved nutrition, including the Management of Acute Malnutrition Program, the People Living with HIV/AIDS Nutrition Management Program, the Infant and Young Child Feeding Program, and the Essential Nutrition Actions Program. In early 2013, Mali adopted a national nutrition policy under its Strategic Framework for Growth and Poverty Reduction Program (CSCR) 2012–2017. Governed by the Ministry of Health's 10-year health strategy (Health and Social Development Plan) and 5-year implementation plan (Health Sector Development Program), the policy outlined a coordination process for nutrition implementation and monitoring, and established the National Nutrition Council and the Inter-sectoral Technical Committee for Nutrition. In June 2019, The Government of Mali adopted their second Strategic Framework for Economic Recovery and Sustainable Development of Mali (CREDD) 2019–2023 with better consideration of nutrition and food security, particularly in its *Strategic Axis 3: Growth inclusive and structural transformation of the economy* and more specifically in *Objective 3.2. Promote a sustainable, modern, and competitive agricultural sector*. The overall objective of the CREDD is to promote inclusive and sustainable development in favor of reducing poverty and inequality in a united and peaceful Mali to achieve the SDGs by 2030.

Mali also developed their second costed Multisectoral Nutrition Action Plan (2021–2025) to ensure effective implementation of the newly adopted national nutrition policy and their first National Food Security and Nutrition Policy 2019–2024 adopted in July 2019.

In support of the new multisectoral plan, three transversal axes relating to communication, Gender, and Agroecology are being developed. In addition, to maximize the impact of projects to fight against malnutrition through WASH sector interventions, the National Strategy for Water, Hygiene, Sanitation (WASH) in Nutrition was developed in March 2019.

One major achievement in 2016 was the establishment of the Nutrition Coordination Unit as a formal coordinating structure. At the national level, the multisectoral platform meets twice a year through the Technical Inter-Sectoral Nutrition Committee and once a year through the National Nutrition Council, bringing together ministers from different sectors. These decentralized coordination bodies are established and clearly defined in the National Nutrition Policy, but are not yet operational. The frameworks established in the policy are the regional, local, and commune-level steering, coordination, and monitoring committees for development actions (SUN 2017).

USAID Programs: Accelerating Progress in Nutrition

The following USAID programs with a focus on nutrition are active (ongoing) in Mali. The U.S. Government selected Mali as one of 12 Feed the Future target countries for focused investment under the U.S. Government Global Food Security Strategy. Due to the country’s security situation, Mali’s Feed the Future Initiative focuses on 113 communes in Sikasso, Mopti, and Tombouctou, and two communes in Segou. To help reduce poverty and stunting in children under five, the strategy includes strategic investments in strengthening targeted value chains; addressing high levels of malnutrition and low dietary diversity; improving the enabling environment for agricultural trade and investment; and working on behavior and practices related to nutrition feeding and building capacity among farmers, the private sector, civil society, and public institutions.

Selected Projects and Programs Incorporating Nutrition in Mali		
Name	Dates	Description
Feed the Future Agriculture Production Activities	2021–2026	Feed the Future agriculture programming in Mali focuses on activities that help farmers and other market actors develop natural synergies between cropping and livestock systems to further increase their incomes, while improving nutrition, natural resources management, and resilience to economic and climate shocks. The Agriculture Production Activities will focus on the regions of Bougouni, Koutiala, Mopti, Sikasso, and Tombouctou.
Feed the Future Market System Activities	2021–2026	Feed the Future market-system activities in Mali will empower private and public market actors across the market system with a strategic focus on gender- and nutrition-sensitive value chains to affect sustainable, systemic change. The goal of these activities is to strengthen market systems to sustainably improve household incomes and nutritional status. They will build local capacity to prevent malnutrition by promoting resilience at the household level. The Market System Activities will focus on the regions of Bougouni, Koutiala, Mopti, Sikasso, and Tombouctou.
Health Systems Strengthening Activity: Keneya Sinsi Wale	2020–2025	Keneya Sinsi Wale focuses on improving access to care and increasing the demand for and use of health services by strengthening the Malian health system and increasing citizen’s participation in the management, performance, and accountability of health systems.
Household and Community Health Activity: Keneya Nieta	2020–2025	Keneya Nieta focuses on increasing the demand for and use of health services, improving the adoption of healthy behaviors in the household, improving financial planning and saving for health, and improving community oversight of and engagement with local health services. It includes behavior change activities, essential nutrition actions, and evidence-based interventions in maternal, newborn, and child health; malaria; family planning; WASH; and linkages to nutrition-sensitive agriculture interventions to improve the health and nutritional status of pregnant and lactating women, children under the age of five, and adolescent girls. Keneya Nieta will focus on the regions of Mopti, Segou, and Sikasso.

MOMENTUM Integrated Health Resilience (MIHR): Improved Health Services and Systems in the North of Mali	2021–2025	MIHR will increase household, community, and health system resilience in the northern regions of Gao and Tombouctou. The expected results include improved, equitable access to and use of maternal, newborn, and child health; family planning/reproductive health; malaria; nutrition and WASH services; increased accountability of district and other local governance structures to absorb, adapt to, and recover from health system shocks and stresses; and increased cross-sectoral collaboration to improve or prevent backsliding of health outcomes.
MOMENTUM Private Healthcare Delivery (MPHD)	2021–2025	MPHD will focus in key urban/peri-urban areas in Bamako, Sikasso, Segou, Koulikoro, Mopti, and Kayes. The activity focuses on awareness of, access to, and use of private sector health information, services, and products for family planning and reproductive health, maternal and child health, and nutrition and WASH in urban and peri/urban areas, with special emphasis on reaching adolescents and young adults, while simultaneously strengthening the quality and efficiency of the private sector.
New Partnerships Initiative (NPI) Expand/Child Survival	2021–2024	NPI Expand/Child Survival will contribute to improved survival and well-being of children by improving community systems of participation in health seeking and health governance and strengthening the clinical skills of health care providers and health facility management by working with local organizations in the Koulikoro and Kayes regions.
Resilience and Food Security Activity: Albarka	2020–2025	Albarka, a Resilience and Food Security Activity implemented through the Bureau for Humanitarian Assistance, will contribute to improved food security and resilience of communities in conflict-affected areas—in the regions of Mopti, Timbuktu, and Gao—through strengthening local systems and community participation. Its three objectives are (1) stabilize vulnerable households by reducing the impact of shocks and connecting them to basic services, (2) empower youth as key drivers of the economic and social development of their communities, and (3) support community-driven approaches to manage natural resources and community assets sustainably and productively.

Other USAID Nutrition-Related Humanitarian/Development Assistance

Nutrition is a key part of the five-year USAID/Mali Health Strategy (2018–2023), which seeks to achieve sustained improvements in health and facilitate Mali’s journey toward self-reliance. The strategy includes improved consumption of diverse and quality foods (linked to Feed the Future agriculture and market interventions); improved nutrition-related behaviors through comprehensive social and behavior change strategies; and improved use of maternal and child nutrition services, including Essential Nutrition Actions, micronutrient supplementation, and community-based management of acute malnutrition.

In Mali, USAID’s Bureau for Humanitarian Assistance (BHA) works with the United Nations World Food Programme (WFP) to respond to urgent emergency food needs through general food distributions, blanket and targeted supplementary feeding programs, and food-for-assets activities. BHA also facilitates WFP’s local and regional purchase of food and delivery of food vouchers to stimulate local production and markets. Through the United Nations Children’s Fund (UNICEF), BHA provides ready-to-use therapeutic food to treat severely malnourished children throughout the country.

References

- Cellule de Planification et de Statistique (CPS/SSDSPF), Institut National de la Statistique (INSTAT/MEFB), INFO-STAT, and ICF International. 2014. *Enquête Démographique et de Santé au Mali 2012-2013 : Rapport de synthèse*. Rockville, MD: CPS, INSTAT, INFO-STAT, and ICF International.
- Famine Early Warning Systems Network (FEWS NET). 2020. "Mali Food Security Outlook Update." Washington, DC: FEWS NET. Available at: https://fews.net/sites/default/files/documents/reports/MALI%20Food%20Security%20Outlook%20Update%20April%202020_EN.pdf
- INFO-STAT, CPS, INSTAT, and ICF International. 2007. *Enquête Démographique et de Santé du Mali (EDSM-IV) 2006 Rapport Préliminaire*. Bamako, Mali and Calverton, MD: INFO-STAT, CPS, INSTAT, and ICF International.
- Institut National de la Statistique (INSTAT), Cellule de Planification et de Statistique Secteur Santé-Développement Social et Promotion de la Famille (CPS/SS-DS-PF) et ICF. 2019. *Enquête Démographique et de Santé au Mali 2018*. Bamako, Mali et Rockville, MD: INSTAT, CPS/SS-DS-PF et ICF.
- Sachs, J., G. Schmidt-Traub, C. Kroll, G. Lafortune, and G. Fuller. 2019. *Sustainable Development Report 2019*. New York: Bertelsmann Stiftung and Sustainable Development Solutions Network (SDSN).
- Scaling Up Nutrition (SUN). 2017. "Mali." Washington, DC: SUN. Available at: <http://scalingupnutrition.org/suncountries/mali/>
- United Nations Children's Fund (UNICEF). *Committing to Child Survival: A Promise Renewed*. 2017. "Mali." New York: UNICEF. Available at: <http://www.apromiserenewed.org/countries/mali/>
- United Nations Children's Fund (UNICEF). 2019. *The State of the World's Children 2019*. New York: UNICEF. Available at: <https://www.unicef.org/sowc/>
- United Nations Office for the Coordination of Humanitarian Affairs (OCHA). 2020. *Mali: Humanitarian Response Plan*. New York: OCHA. Available at: <http://www.unocha.org/mali>
- U.S. Agency for International Development (USAID). 2020. "Country Profile: Mali." Washington, DC: USAID. Available at: <http://www.feedthefuture.gov/country/mali>
- World Bank. 2020. "Mali Country Profile." Washington, DC: World Bank. Available at: <http://www.worldbank.org/en/country/mali/overview>