Highlight 1: Childcare Centers as Platforms for Agriculture and Nutrition

Malawi’s national early child development (ECD) program, led by the Ministry of Gender, Children, and Social Welfare, provides support to preschools, known as community-based childcare centers (CBCCs), and parenting groups. CBCCs are community-led centers that promote child development by providing safe and stimulating environments, access to health and nutrition services, and training for parents and caregivers. CBCCs serve children from three to six years of age, and are open from 8 a.m. to 11 a.m., five days a week. One benefit provided by the program is a meal; when possible, porridge is provided mid-morning with food contributions from the community. However, an irregular supply of food has been reported as one of the main causes of child absenteeism and CBCC closure.

A study conducted by A4NH researchers at the International Food Policy Research Institute (IFPRI) used a cluster-randomized trial to assess the impact of a one-year agriculture and nutrition intervention delivered through CBCCs on household production diversity, maternal knowledge on child nutrition and feeding practices, and children’s diets and anthropometric measures. A total of 60 CBCCs, covering 1,248 preschool children aged 36–72 months and 304 younger siblings aged 6–24 months, were randomly assigned to either receive the agriculture and nutrition intervention or the usual ECD program provided by Save the Children.

Compared with the control group, preschool children in the intervention group had greater increases in nutrient intakes and dietary diversity over the study period, though no impacts on anthropometric measures were seen. Younger siblings in the intervention group, however, had greater increases in height-for-age than children in the control group and greater reductions in the prevalence of stunting. The plausibility of the impact on growth in younger siblings was supported by effects along program impact pathways, including increased household production and consumption of nutritious foods and improved caregiver knowledge.

From these results, researchers found the integrated agriculture and nutrition intervention implemented through an ECD platform in Malawi benefited participating households in several ways: the intervention achieved its main goal of improving children’s diets and nutrient intakes and had the additional benefit of reducing stunting among younger siblings. Impact pathway analysis suggests these impacts were achieved through increases in household production and consumption of nutritious foods and improved caregiver knowledge regarding nutritious foods and optimal infant and young child feeding practices.

Not only did the study show that community-owned ECDs have the potential to achieve these nutrition and health improvements, but also revealed potential for sustainable scaling up. Relying on community contributions, the program could be brought to other communities with a clear path for moving it forward over a longer period of time, and without requiring significant and repeated external investments. In fact, the World Bank is now supporting the Government of Malawi’s effort to scale up the intervention in 14 districts across the country, with this research cited in the program document as part of the evidence to justify the investment.

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