ASSP Nutrition

A collection of success stories from ASSP’s Nutrition Team.
From One Maman to Another

Weaning foods made of locally found ingredients nourish a child back to health.

When community relays in Ndesha, Kasai Central found Mado Betu she was severely malnourished. She was a young child of two years and four months but was frail and unable to walk. Her family had fallen on hard times and her 24 year old mother, also named Mado, was left to raise her and her four siblings alone.

Her mother, like many Kasaian Congolese, was unemployed and found it difficult to provide all of her children with the nutrition that they needed. Mado Betu began to suffer when she became pregnant with her new baby. At first, she thought it was a minor sickness that would soon pass. To her dismay, Mado Betu’s health only continued to deteriorate. Since Maman Mado was unemployed she had no money to take her daughter to the local health center. She believed that her daughter would soon die, her only option to watch her daughter’s slow decline.

Then one day a neighboring boy who worked at the health center came to see Mado. When he saw how severely malnourished she was he went straight to the health center to give a report on her condition. Soon after, ASSP trained community relays came to see Mado and confirmed that her condition was critical. They spoke to her mother about infant and young child feeding (IYCF) and home gardening. But Mado needed an immediate intervention before her condition became irreperable. The community relays taught her
mother a weaning food recipe made of locally available ingredients: amaranth, fish flour, soy and corn flours, peanut meal, oil, salt, and sugar.

She began feeding Mado Betu the porridge every day and immediately saw the results she was hoping for. Community relays were happy to see the health of the child bounce back on their regular visits.

Within six months of the first intervention, Mado had made a full recovery, she looked like a completely different child. She walked in circles around the visitors and the smile of a happy, health child.

Soon after Mado’s recovery another woman came to Maman Mado to ask for her advice on how to nourish her child back to health also. She showed her how to prepare the porridge for her child. She saw them again later and the child was healthy.

This is how change happens, from one Maman to another. Thanks to ASSP’s trainings, community relays across Congo are teaching maman’s how to nourish their children back to health and how to notice the signs of malnutrition in other children.

**Approximately 9000 community relays and 42 IMA Community Animators have been trained in IYCF, home gardening, and how to do follow-up of families with malnourished children through the ASSP project.**
Maman Tshimbila’s Gardens

Harnessing the existing capacity to elevate nutrition.

This is Maman Anastasie Tshimbila, a professor at the Bible Institute in Kalonda West in Kasai. When ASSP’s garden program first came to Kalonda at the start of the project, they noticed something different about the place. All of the homes were surrounded by lush gardens filled with a variety of healthy greens and tubers. When asked where they learned their gardening skills, all fingers pointed at Maman Tshimbila.

She began gardening when she first moved to Kalonda in 1991 and soon after began sharing not only her knowledge with the community, but also cuttings and seeds from her garden. She taught her neighbors how to grow amaranth, sweet potato greens, spinach, rubber, taro, mujibu (squash greens), and bananas.

ASSP immediately recognized the potential in Maman Tshimbila and invited her to join the gardening team they were forming in Kalonda. They taught her about the health benefits of moringa and okra and showed her how to grow it. She also participated in an IYCF training.

After the training, Maman Tshimbila set out to teach her community about what she learned. She encouraged the community to start reinforcing their home gardens by growing the vegetables that one needed to make the porridge that nourished both mother and child. Months later the hard work of Maman Tshimbila was evident everywhere. Moringa trees were flourishing and Maman
Tshimbila discussed the many ways that she had begun using it in her teachings and daily meal preparations. Maman Tshimbila said, “This Moringa is full of vitamins and minerals. At my house, sometimes I put the leaves in *pondu*. I make powder and put it in porridge and *fufu* and I give it to the children. Even myself, I eat it. And the okra that ASSP gave us, you see that it is producing and we have sowed this with the technic that ASSP has taught us.”

Maman Mbuyi Ngombe (pictured above) was lucky enough to meet Maman Tshimbila just after her son’s birth and benefited from her trainings. Maman Tshimbila said, “After the training in IYCF, when she gave birth, I gave her advice to not give water, only breast milk until the child is six months old. I am very content because she can testify, the child is in good health. She has followed my advice very well.”

Harnessing the potential that already exist in communities has been a cornerstone of the ASSP program. Thanks to leaders like Maman Tshimbila, communities all over the DRC are experiencing improved health because of better nutrition.
Eight Tablespoons of Seed

*Sowing the seeds of self-reliance... and amaranth.*

At the beginning of the ASSP approach, which introduced home gardening to families with malnourished children along with IYCF, the idea of harvesting and saving seed was particularly not well accepted by the community relays and families. Most of the beneficiaries thought that every time a garden was started, IMA and the ASSP project would supply vegetable seeds. So, more than 89 percent of plants from the gardens that were established from the first distribution of seeds were harvested before flowering. The beneficiaries, including the community relays, were habituated to donations and thought more seed would follow after the initial distribution.

To find a solution to this challenge, the IMA Community Animator, Cesarine, had eight tablespoons of amaranth seeds that she could have given to the community relays and nurses, but instead she worked with the community relays to establish a 96 square meter demonstration garden at the Brazza health center. The garden was just for the production of seeds. Recently they harvested 2 kg of amaranth seed from the garden and the harvest is still continuing. The community relays, the nurses, and families with malnourished children have all received seeds and a portion is also being reserved for more families in the future and to reseed the health center garden. The problem of not having enough amaranth seeds is no longer an issue with the community around the Brazza health center. They are not waiting for IMA to show up with more seed.
This story shows how a Community Animator can be a catalyst and help a community work together to address a need and experience success at meeting that need. The seeds that Cesarine and the community animators produced will help many families grow several hundred kilograms of fresh green, leafy vegetables and feed many people in the months to come. In addition to multiplying seeds, Cesarine planted the “mindset” of cooperation and self-sufficiency that will help this community provide for themselves long after the ASSP project has finished.
Two & a half year old Gulain was brought to the Brazza reference health center in Kindu because he was severely anemic. During his stay at the reference health center, a community relay named Mama Jeanne, trained in Infant Young Child Feeding (or ANJE in French), visited him and found that Gulain, in addition to his anemia was also malnourished. He had a mid-upper arm circumference of 10 cm. (Any reading of 10.5 cm or less is in the “red zone” and signals severe acute malnutrition.)

After the head nurse confirmed that Gulain was malnourished, Mama Jeanne, counseled the family to give Gulain a “4 star” porridge with moringa powder added to it. (A 4 star porridge is a porridge that includes foods from 4 different food groups, and provides a rich, balanced meal.) Gulain was treated for anemia, but after two weeks without any improvement, he was transferred to the Kindu General Reference Hospital to receive better intensive therapeutic treatment. The ANJE relay went to the hospital and persuaded the family when they returned home to continue with best infant young child feeding practices and the enriched porridge, and to continue adding moringa powder to his food.

Mama Jeanne visited Gulain and his parents at their home 5 times over a 3 month period. After 5 visits, Gulain’s arm circumference increase from 10 cm to 15.6 cm. Gulain regained his healthy weight with the enriched porridge, moringa powder, and chaya greens.
that the family had decided to start incorporating into their diet. Chaya is a dark green leafy vegetable high in iron. Sometimes, the IMA community animator, named Cesarine, accompanied Mama Jeanne on her home visits to Gulain. IMA community animators, like Cesarine, train community relays in infant young child feeding practices, home gardening and how to work with families of malnourished children to adopt better feeding practices. They accompany and encourage the relays in their community work.

At the 5th home visit to Gulain’s home, Cesarine was given the name « Shangazi » by Gulain’s family. Shangazi is the name used to refer to a child’s paternal aunt who has the responsibility to look out for the well-being of her brother’s children. Gulain’s biological mother and grandmother gave Cesarine a gift of some green leafy vegetables from the garden in recognition of the assistance that Cesarine and Mama Jeanne had given the family, for being Gulain’s “Shangazi”.

This story shows how the health center staff and community relays, trained in infant young child feeding, work in synergy to help a malnourished child recover. It is important for a malnourished child to get medical treatment, but it is also important to ensure that the family knows how to best feed the child when the child returns home. Cesarine, the IMA community animator, gave the training and encouragement that the ANJE relay, Mama Jeanne, needed to counsel and help this family raise a healthy child. She introduced the ANJE relays to chaya and moringa, two dark green, leafy, perennial plants that grow easily and can be incorporated into the diet to increase the nutritional value of a meal. Mama Jeanne, the ANJE relay, shared the information and plants with a family in need.
Moise’s Story

It takes a village to raise a child.

Formerly an urban phenomenon, today in some rural areas, some heads of households are abandoning their children because they have no means of providing for them. This was the real case that the village of Nkenye experienced in the Pangi region of Maniema Province. A woman passing through the village of Nkenye on her way to Kalima, where there are several mining sites, decided to spend the night in Nkenye village. She had her 29 month old son with her who was malnourished. They still had 27 kilometers to walk to get to their destination.

Around 5:00 in the morning, in her desperate state, she decided to abandon the child in the room and fled. To this day no one knows where she is. When the child began to cry incessantly, the proprietor of the house entered the room and found the child alone and abandoned. He picked up the child and took him to the village chief of Nkenye. Seeing the state of the child, the chief decided to first take the child to the Nkenye health center. After a medical examination confirmed that the child was malnourished, immediately the team of IYCF community relays were asked to come give nutritional counseling and intervene. IYCF relays are trained in infant young child feeding, home gardening and how to follow-up on families with malnourished children. They began with an enriched porridge to which they added moringa powder.

Three months later, the child was referred back to the
Nkenye health center. The nurse confirmed that the child had recovered with an arm circumference reading of 13.8 cm. The parents had still not yet been located, so the village chief and his wife made the decision to adopt the child until the parents returned. No one knew the child’s name and the child could barely talk. They named him Moise (Moses in English). From that day on, the wife of the village chief decided to become an IYCF relay and joined the team of IYCF community relays at Nkenye. Later she became the President of an IYCF support group for young mothers in the village.

This story shows compassion and how a village really can raise a child in need. Through the training provided by the ASSP project, women in the community were equipped to help Moise. This successful experience inspired the wife of the village chief to help more young mothers in the village adopt best infant young child feeding practices.