



Accès aux Soins de Santé Primaires | ASSP

Nutrition Program

Helping women and children contribute fully to society.

Our Approach

Malnutrition continues to be a critical health problem in the DRC. According to the Multiple Indicator Cluster Survey 2017-2018, or MICS, seven percent of children less than five years suffer from acute malnutrition. Chronic malnutrition rests at 42 percent. The Ministry of Health estimates that 51 percent of the child mortality in Congo is caused directly or indirectly by malnutrition. IMA collaborates with PRONANUT, the National Nutrition Program, to strengthen routine nutrition interventions at health facilities and to increase the capacity of communities to address malnutrition through multidisciplinary interventions. These interventions are integrated into the community extension programs of the health zones. IMA also supports the integration of nutrition data (both clinical and community) into the District Health Information System. Health zone managers, nutritionists and community mobilizers are trained to monitor and analyze the data to track the nutritional status of children in their communities and improve outreach activities performed by the community health workers.

890
Health Centers
Equipped

These health centers have been equipped with anthropometric materials such as Salter scales, infant scales, measuring boards, mid-upper arm circumference strips, or MUAC, reporting forms, nutrition education materials and road to health forms. The project also provides ongoing formative supervision at these health centers to improve preschool and prenatal consultations, and nutrition education.

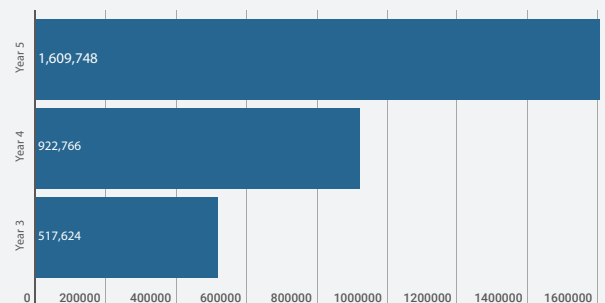
1,724
Nurses Trained

Through the ASSP project, 1,724 nurses have been trained in how to identify malnutrition and in best feeding practices for infant and young child feeding.

1,433,891
pregnant women and children under five received direct and intensive nutrition interventions

8,900 Relays Trained

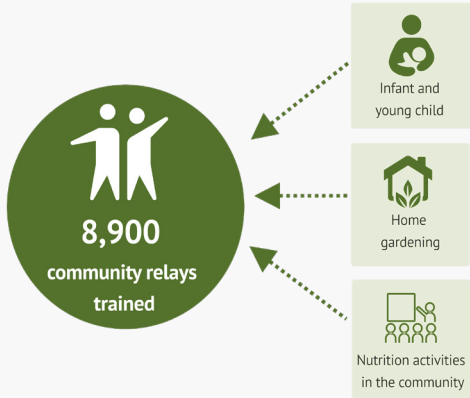
4,783,498 Total Children Screened by Relays



Between Year 3 and Year 5, the number of children screened per year by community relays has almost tripled. In Year 5, the relays screened 1,609,748 children for malnutrition, comprising 91 percent of the estimated 1,766,508 children under five years old in the 52 health zones. Throughout the entire project, 4,783,498 children were screened.

NUTRITION INTERVENTIONS IN THE COMMUNITY

The strength of the ASSP nutrition approach rests on increasing the capacity of communities to address malnutrition through multidisciplinary interventions which are integrated into the community extension programs of the health zones, which are sustainable, and bring about a long-term change in behavior. To do this, ASSP trained more than 8,900 community relays, at least ten per health center, in infant and young child feeding, home gardening, and in carrying out nutrition related activities in the community.



Screen children in the community for malnutrition using mid upper arm circumference: This is important because the number of women who bring their children in for routine preschool consultations drops significantly after the child has received all their vaccinations around their first birthday.

Start support groups for young mothers: These support groups promote exclusive breastfeeding for the first 6 months and other infant and young child feeding best practices.

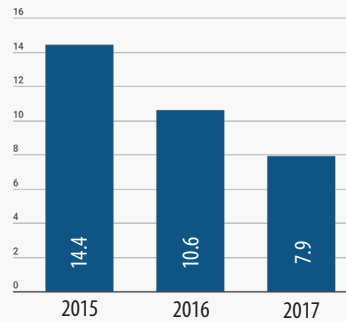


Carry out home visits to families with malnourished children: This encourages families to adopt improved nutrition and sanitation practices and to plant home gardens to increase the availability of nutritious food and monitor the child's growth.



Prevalence Rate Down & Recovery Rate Up

Proxy Prevalence Rate



78% Recovery rate for malnourished children where the program was fully implemented.

Prevalence Rate

Over the last three years the number of children screened who are referred to a health center for malnutrition has decreased almost by half, going from 14.4 percent down to 7.9 percent

Recovery Rate

In 2018, of the 1,609,748 children screened for malnutrition, 123,584 children were referred to health centers with a MUAC reading of less than 125mm. Of those children referred, 95,929 received five home visits from a trained community relay and 78 percent recovered.

Cost per child recovered: \$12



Mado, Before and After

"Mado began to suffer when I became pregnant with my new baby. I thought it was a transient sickness like all the others but her health kept deteriorating. One day a neighbor boy who worked at the health center came to see Mado. Then he submitted a report to the center. Shortly thereafter, an ASSP community relay came to see the condition of the child. She was not good. They taught me a recipe to make her in order to get her health back as quickly as possible. It was this porridge that I gave her, made of soy flour, corn flour and peanut meal all mixed up and that's how she recovered her health."

Maman Mado, Beneficiary of ASSP's nutrition program, Kasai



1,078,419

Maternal Nutrition

The project ensures availability and routine administration of three doses of iron and folic acid for pregnant women at the health centers. Over the last five years, the number of pregnant women who have received five doses of iron and folic acid: 1,078,419.



355,472

Child Malnutrition

355,472 malnourished children have received five home visits (85 percent of those referred) and, among them, the overall recovery rate has risen steadily from a low of 44.5 percent in four years to the current recovery rate of 78 percent.

Received direct intervention

1,433,891 pregnant women and children under five received direct and intensive nutrition intervention in the project areas, likely reducing high risks of anemia during pregnancy and malnutrition-related sickness in early childhood.