



IMA WORLD HEALTH

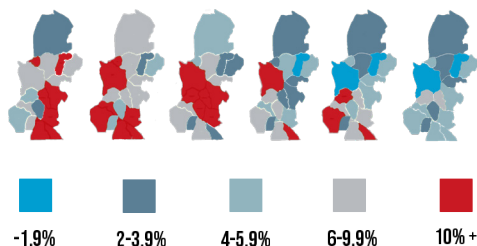


NUTRITION

in the Democratic Republic of Congo
ASSP and ASSR | 2013 to 2022

65% Decrease in Malnutrition

from April 2020 to September 2021, the prevalence rate of children 6 – 59 months, with a mid upper arm circumference of 12.5 cm or less, has decreased by 65%, falling from 11.4% to 4%.



Kasai Province: Percent of screenings producing a MUAC score of less than 12.5 cm each quarter from April 2020 on left to September 2021 on right.

From 2014 to 2022, IMA carried out nutrition interventions through the existing health structure in Nord Ubangi, Kasai, and Kasai Central provinces as part of its health systems strengthening project, ASSP and the follow on, ASSR. The interventions focused on preventing malnutrition by strengthening the capacity of community health workers, nurses, and health zone management teams that included a health zone nutritionist, head doctor, and data manager.

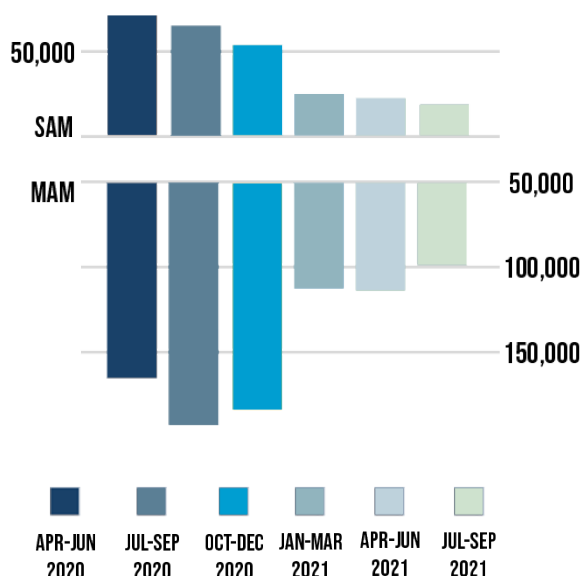
During ASSP, 10 community health workers, known locally as Recos, were trained per health area, including one Coach Reco. Recos were charged with screening every child in their community for malnutrition. At each screening, an age-appropriate nutrition message was given to the child caretaker and they were taught how to make an enriched porridge with ingredients found in local markets.

In October of 2020, ASSR scaled up nutrition screening activities developed during ASSP to all 40 project health zones. The proportion of children screened went from 21 percent in Oct 2019 to 92 percent in Jul 2021 and remained at this number until the end of the project. This means that over 60 million children are now being screened for malnutrition each year.

During ASSR, the number of Recos was expanded to an average 15 Recos per health area and more focus was put on increasing the capacity of the health zone nutritionist and health zone management team. There was also a focus on increasing the capacity of health zone nutritionists in the analysis of the screening data, to use it to identify the seven health areas with the highest rates of malnutrition each quarter, and to develop action plans to address malnutrition in those health areas.

IMPACT Recovery Rate

The majority of malnourished children detected during screening are followed up with five home visits by the Recos. Every quarter an average of 59,000 of these children recover from malnutrition by the fifth visit. These results have been achieved at a cost of 7¢ per child screened and \$1.73 per child recovered.



Recovery Rate: Number of children with severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) per quarter.

6,000,000 children are now being screened for malnutrition each year.

IMPACT Mado's Road to Recovery

In February of 2016, Mado was discovered by an ASSP trained Reco and diagnosed severely malnourished. The Reco returned for the first home visit and taught her mother how to make an enriched porridge made of ingredients found in local markets. Pictured above, her mother feeds her the porridge for the first time. The road to recovery was swift for Mado. The Recos continued to visit her home once every two weeks for three months. When IMA staff returned six months after the first home visit, Mado was a different child, walking and laughing with her mother. Now, at the end of the project, IMA staff returned one last time to see how she was doing. Her mother explained to them that she wasn't home, she was in school. Now Mado, pictured right, can write her name. She is one of 733,427 children who have recovered from malnutrition since the start of ASSP.

Targeted Interventions

Training Recos

- Infant young child feeding, or IYCF messaging, targeted to the age of the children in a household
- Demonstrating preparation of enriched porridge, using locally available ingredients
- Carrying out home visits to families with malnourished children (5 visits over 3 months)
- Setting up ANJE support groups (minimum of 1 per Reco)
- Intensive systematic screening of children between 6-59 months every quarter
- Planting and maintaining home gardens
- Promoting and demonstrating the use of Chaya and moringa
- Certification of Recos in IYCF, home gardening, home visits, and intensive systematic screening by Coach Recos to ensure competence and continued learning

Training Health Zone Staff

- Reporting on activities and data analysis for prioritizing supervision & decision making (Recos, Coach Recos, Nutritionists)
- Identification of health areas with high prevalence rates and development of action plans (Nutritionists & Coach Recos)



Mado, pictured above in 2016 and again here in March of 2022, is one of the many children who are now leading a full and healthy life thanks to IMA's nutrition program.

