

# Senegal: A successful community-based strategy to improve child malnutrition

Amadou Gaye<sup>1</sup> and Moussa Sarr, Plan International, Senegal

<sup>1</sup>Contact: Amadou.Gaye@plan-international.org

## **BACKGROUND**

- In the rural district of Tivaouane (Dept of Thies. Senegal), 24% of under-five children were underweight (2003). The national average was
- Major causes of underweight include:
  - Women's lack of knowledge of healthy nutrition practices, e.g.:
    - · Poor hygiene and basic cleansing
    - · Late breast-feeding
    - Socio-cultural beliefs (food taboos, especially for young children and pregnant women)
  - Infection with malaria and intestinal parasites
  - Micronutrient deficiencies

# **OBJECTIVES**

- To provide Vitamin A supplementation to at least 85% of children 12-59 months every 6 months
- To de-worm at least 85% of children aged 12-59 months every 6 months
- To increase to 85% the proportion of under-five children sleeping under insecticide-treated nets
- To reduce by 25% the prevalence of underweight among under-five children by December 2011

# PROJECT INFORMATION

- Plan began implementing a World Bankfunded community-based child nutrition project in 2005.
- The project covers 29,665 children (98% of the target population) in Tivaouane and 12 other districts in Senegal.



## **METHODS**

## STRENGTHEN INVOLVEMENT OF COMMUNITY LEADERS AND **ORGANIZATIONS IN HEALTH COMMITTEES & ACTIVITIES**

- 13 community-based organizations carried out field activities.
- These 13 sites are used to coordinate the planning and delivery of the project's information and services among existing neighborhood delegates, Mothers' Committees, and community leaders.
- A Communal Coordination Committee was formed in each site.

# STRENGTHEN SKILLS AND PERFORMANCE OF COMMUNITY **HEALTH TEAM**

- Community health volunteers were trained in essential nutritional tasks:
  - 1. Taking a census of the target population
  - 2. Monthly weighing of children to detect inadequate growth
  - 3. Cooking demonstrations and nutrition education highlighting the nutritive value of local recipes and foods
  - 4. Distributing of vitamin A supplements
  - 5. De-worming
  - 6. Promoting the use of insecticide-treated bed nets
  - 7. Promoting of iodized salt consumption
  - 8. Encouraging pregnant women to use health facilities for prenatal consultation and iron supplementation

#### IMPROVE MOTHERS' KNOWLEDGE ABOUT CHILD NUTRITION

Communication for behavioral change by Community Health Teams to promote key behaviors related to nutrition, child weaning and child disease prevention:

- Community education sessions
- Individual counseling
- Radio programming
- Social mobilization
- Educating local leaders to gain their support

## ENHANCE NUTRITIONAL SERVICES AVAILABILITY AT COMMUNITY LEVEL

- The project provided equipment and supplies (weighing scales, vitamin A, BCC materials, etc.) to Community Health Teams
- Project and MOH staff verified the quality of nutritional services offered by community health teams
- WFP-provided flour distributed to undernourished children
- During home visits, community volunteers followed up the actions of the mother and provided context-specific counseling.
- Ill children were referred to the MOH facility for appropriate treatment









## **RESULTS**

- In Tivaouane district (as of June 2008):
- Vitamin A supplementation coverage for children rose from 30% to 91%
- De-worming coverage for children rose from 23% to 100%
- Household ITN use rose from 55% to 87%
- Household consumption of iodized salt rose from 59% to 78%
- The prevalence of underweight among children under 5 decreased from 24% to 5%
- Similar results are being achieved in the other 12 districts covered by the project.
- Community leaders and mothers' committees supported volunteers in social mobilization, culinary demonstrations, distribution of products and weighing of children.
- "Any person... will tell you that we have recorded less death of children during the last 2 years, even during the rainy season, which used to be the period of the highest death rate"
  - Mbaye Ndiaye, community health educator, Ndiayene Sirakh community

## CONCLUSIONS

- In spite of poverty, it is possible to improve children's nutritional status by involving and training community health workers and other actors (community organizations, mothers).
- Harmful cultural practices affecting child nutrition can be changed through strong and regular communication with the community.
- Distribution of essential child products by community health workers improves community participation, accessibility, and coverage.

## **NEXT STEPS**

- Maintain activities in the current 90 sites
- Extend the project by adding 37 new sites and doubling its target population, adding an additional 30,845 children

