

Nutrition and Health



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World Vision Canada is a leader within the World Vision Partnership in the area of nutrition. Our team of nutrition professionals and specialists in public health and food security provides technical expertise, training and management support to projects around the world. World Vision Canada also hosts the Nutrition Centre of Expertise (NCOE), which brings together specialist staff to provide partnership-wide service and support. World Vision Canada recognizes that in order to have a real impact on the well being of children, nutrition must be a key part of our strategy. Adequate and appropriate nutrition is essential for survival, health and development of individual children, as well as the alleviation of poverty in communities and nations. Yet the prevalence of

malnutrition remains critically high in many areas where World Vision is working.

Malnutrition is the main underlying cause of one third of all deaths among children under five. This is because malnutrition weakens a child's immune system, making it harder for them to fight off infections such as diarrhea, pneumonia and malaria. With over 26,000 children under the age of five dying daily, reducing malnutrition has the potential to save many lives. Even when children do survive, malnutrition is the most significant risk factor for disease and disability throughout their life.

The key to reducing global malnutrition is prevention. Solving the root causes of malnutrition such as poverty and lack of access to health care can take several generations. The good news is that there are proven nutrition and health interventions, which can successfully reduce malnutrition rates now, while we continue to work on

the longer-term underlying issues. World Vision Canada is working with communities around the world to improve the health and nutrition of children, specifically those under the age of five.

Proper nutrition needs to start with mothers, before and during pregnancy. The first two years of life are critical, as this is the period of most rapid brain growth and the time when most malnutrition begins. It is also the period of development with the highest risk of child mortality. This is why World Vision focuses its nutrition programming on children under five and their mothers.

The following describes a number of our current, ongoing nutrition programs:

Positive Deviance (PD) Hearth

Surprisingly, not all children in our targeted communities are malnourished. Despite poverty and food scarcity, some parents find ways to raise well-nourished children. What are these “positive deviance families” doing differently than the parents of malnourished children in the same community? Identifying the strategies of these positive deviant families is key to a successful Positive Deviance Hearth program.

Learning what the positive deviance families are doing allows community members to know that local solutions do exist (certain foods, methods of feeding, health practices, care practices) and inspires them to search for these solutions in their own communities.

The program’s three-dimensional approach

- Rehabilitates malnourished children,
- Teaches families how to sustain their children’s enhanced nutritional status through new cooking, feeding, hygiene, and caring behaviours,
- Reduces malnutrition among children born in the community in the future.

In doing this, Hearth raises community awareness of malnutrition, empowers the community to seek existing local solutions and teaches families healthy behaviors.

The PD Hearth program gives an opportunity for children and families to reach their full potential. A new mom in one of our programs in Bolivia attended the Hearth sessions with her one-year-old daughter, who

was already showing signs of malnutrition. Eight months later this inspiring 19-year-old woman stood up in front of the entire community to show the map she and the other women had made to identify the malnourished children they wanted to invite to the hearth sessions. At this new health promoter and Hearth graduate’s side was a healthy well-nourished 20-month-old little girl.

Coverage and Impact

- We currently have Hearth projects in:
 - Bolivia, Ecuador, and Peru
 - Bangladesh, Cambodia, Philippines, Mongolia, and India
 - Chad, DRC, Ghana, Kenya, Mali, Mauritania, and Niger
- Some of the successes include an increase in the number of children with a normal weight for their age.
- The percentage of normal weight children in a Bolivian program rose from 0 to 61 per cent.
- In one program in Mongolia, the percentage of normal weight children increased to 90 per cent from 48 per cent.
- In a program in Mali, the percentage of normal weight children increased to 84 per cent from 59 per cent.

Essential Nutrient Package (ENP)

ENP is a package of interventions aimed at integrating nutrition and health into other existing community development activities. These activities are specifically designed to improve malnutrition in children under five by selecting activities that are proven to improve child survival and are appropriate and feasible within the local context.

Outcomes:

- Improved quality of diet for children under five and their families
- Improved access to essential health services and a healthy environment
- Improved household food and nutrition security
- Strengthened capacity of World Vision, communities and institutions to implement programs to address malnutrition

Where is ENP?

Kenya, Ethiopia, Tanzania, Malawi, Rwanda, Zimbabwe, Mali, Uganda, Ghana, and Zambia.



The program’s specific activities depend on the context of the country, but include common elements such as: promotion and support of exclusive breastfeeding for six months, appropriate infant and young child feeding practices, under five growth monitoring, and micronutrients. Integration of nutrition interventions is encouraged with household food security activities and basic health interventions, as possible within the country priorities.

Expanding Nutrition and Health Achievements through Necessary Commodities and Education (ENHANCE)

Strong, healthy communities raise healthy children. The ENHANCE Program aims at helping communities do just that, with a special focus on young children during their most vulnerable years. ENHANCE helps families, community health volunteers and government health staff work together to improve access to essential health services, the quality of diet and household food and nutrition security.

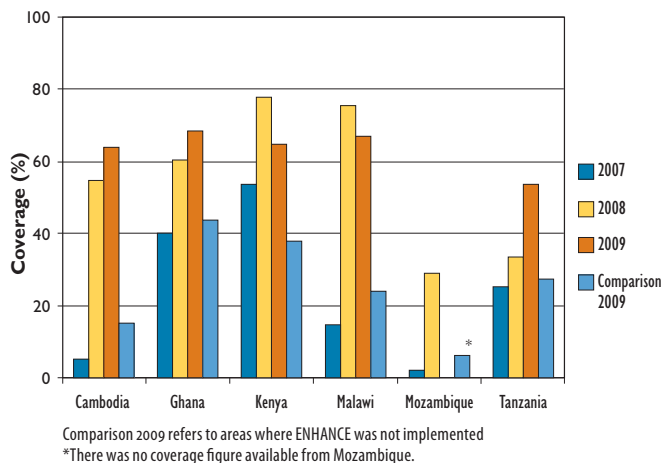
ENHANCE is currently being implemented in Cambodia, Ghana, Tanzania, Malawi, Mozambique, and Kenya, where common childhood illnesses—especially diarrhea, malaria, pneumonia and measles—remain the leading causes of child death. For the 325,000 young children in the program areas, ENHANCE has been tackling these diseases since 2007 through:

- Full and timely immunization
- Insecticide-treated bednets to prevent malaria
- Vitamin A supplements to support children’s immune function
- Promotion of sound hygiene practices to prevent diarrhea

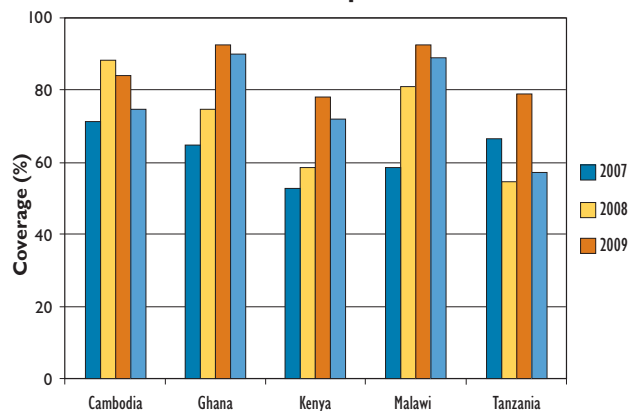
- Oral rehydration salts to treat diarrhea and antibiotics to treat pneumonia
- Training for health workers and volunteers to improve referral and disease treatment
- Health education for caregivers to improve care practices at home

Following are some of the results of the ENHANCE program:

Use of Long Lasting Treated Mosquito Nets among Children Under Five Years of Age



Vitamin A Supplementation among Children Under Five in the past 6 months



ENHANCE also addresses malnutrition through promotion and support of exclusive breastfeeding for the first six months of life, and quality complementary feeding starting at six months of age. Children’s growth is monitored on a regular basis. Families are taught how to grow, prepare and eat nutritious foods rich in micronutrients. An evaluation planned for 2010 will examine program achievements and guide the planning of future development work.

Community Management of Acute Malnutrition (CMAM)

CMAM has been identified as a proven, successful and effective model in the treatment of acute malnutrition in children under five years of age. It is a progressive approach that is complementary to the traditional programs that World Vision has implemented in the past. CMAM seeks to provide fast and effective assistance in a manner that empowers the affected communities and creates a platform for longer-term solutions to the problems of food security and public health.

CMAM was first developed as part of the emergency context; however, it is increasingly implemented in the context of long-term development programming. Several Ministries of Health worldwide have incorporated components of CMAM into their routine services, ensuring that effective treatment of acute malnutrition is available within the community.

CMAM has four essential components that allow it to effectively and quickly rehabilitate children with moderate to severe malnutrition:

- **Community Mobilization** refers to a range of activities that build a relationship with community members and fosters their participation in the program.
- **Supplementary Feeding** provides dry take-home rations and routine basic treatment for children with moderate, acute malnutrition without medical complications.
- **Outpatient Therapeutic Care** provides Ready-To-Use-Therapeutic Food (RUTF) and routine treatment using simple medical protocols for children with severe acute malnutrition without medical complications.
- **Stabilization Centres** provide inpatient care for acutely malnourished children with medical complications.

Micronutrient and Health (MICAH) Program for Africa

Funded by CIDA in collaboration with World Vision Canada

The goal of the MICAH project was to improve the nutrition and health status of women and children in five



countries: Ethiopia, Malawi, Tanzania, Senegal and Ghana. The project benefited 7.4 million people from 1996 until 2005.

Although the MICAH project finished in 2005, its success has served as a model for subsequent health and nutrition projects. World Vision Canada's current and future programming will apply the lessons learned through this project as we continue to work for the improved health of women and children in developing communities.

MICAH strategies included:

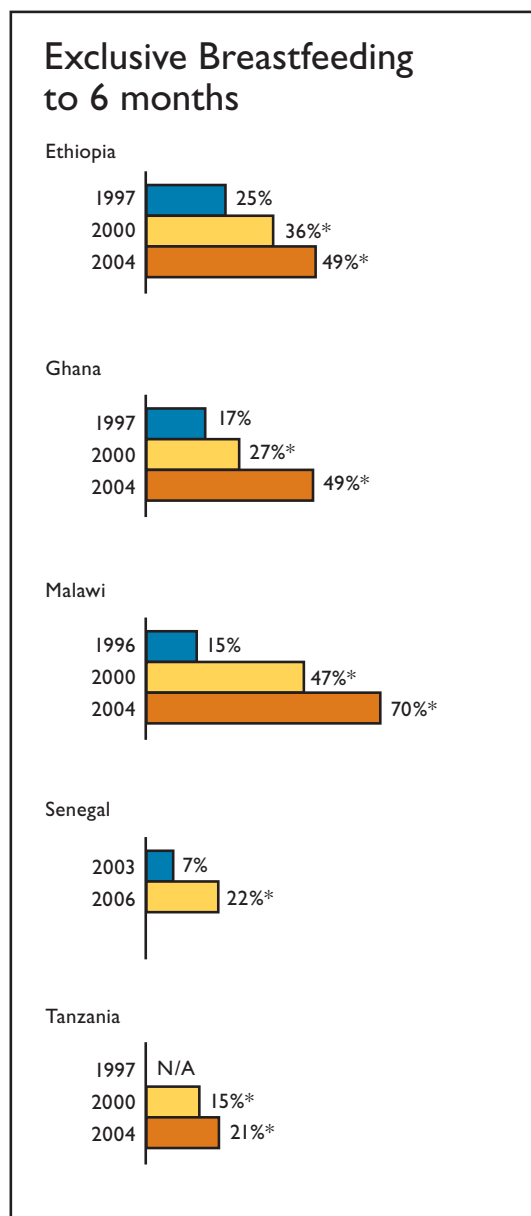
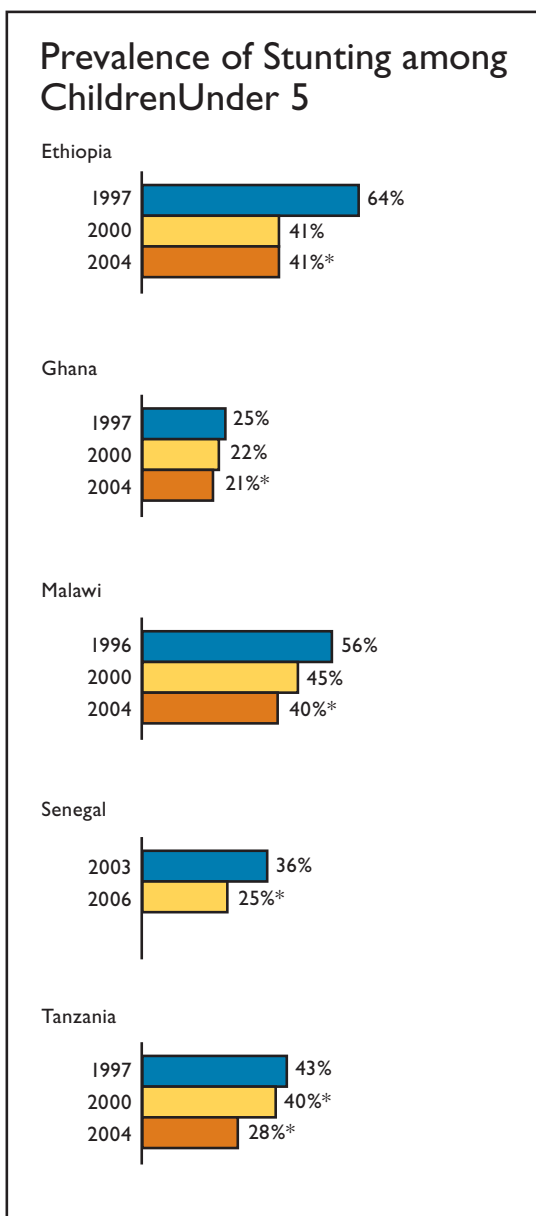
- Increasing the intake of micronutrients (iron, iodine and vitamin A) through supplementation, fortification, encouraging exclusive breastfeeding and appropriate infant feeding practices as well as dietary diversification and modification (raising small animals, vegetable gardens, fruit trees). Providing

the community with information, education, and communication (IEC) was also an integral part of this step.

- Reducing the prevalence of diseases that affect micronutrient status (diarrhea, parasitic and vaccine preventable diseases) through improving water and sanitation, immunization campaigns, malaria control and treatment of worms and parasites.
- Building local capacity for delivery systems to improve micronutrient status by equipping labs, training staff, developing toolkits and influencing national policy and/or local compliance to policy.

Results:

- *Significant reduction in stunting and underweight among children (Stunting decreased from 43 per cent to 28 per cent among Tanzanian children)*
- *Exclusive breastfeeding of infants for six months gained widespread acceptance*
- *Significant reduction in anemia among children, women of reproductive age and pregnant women (Anemia decreased by more than half (43 per cent to 18 per cent) in Ghanaian women)*
- **Parasite load among children reduced (Parasitic infections decreased from 50 per cent to 36 per cent in Senegalese children; Malaria in Malawian children was reduced by 60 per cent)**
- *Immunization coverage greatly improved*
- *Virtual elimination of vitamin A deficiency disease in Ethiopian preschool children*



Mongolia Nutrition Project

Another highly successful project is World Vision Canada's Mongolia Nutrition Project. To address high levels of micronutrient malnutrition, in particular **iron** and **vitamin D** deficiency, World Vision initiated a comprehensive nutrition program in Mongolia in 2000. In the first three years of implementation, approximately 15,000 children under the age of five and 6,000 pregnant and lactating women directly benefited from this program.

Program Strategy

To address vitamin D deficiency and anemia among children and pregnant/lactating women, the following strategies were used:

- All children six to 35 months were given preventative doses of micronutrients known as “Sprinkles”.
- Rickets and anemia were treated by providing iron syrup and vitamin D capsules to children suffering from these conditions. Iron/folate tablets were provided to pregnant women.
- **Social marketing** using multimedia campaigns raised awareness.
- **Capacity building** through training helped to ensure the program was sustainable.

- **Partnership** with national government institutions, academia and World Vision, resulting in improved program quality.

Results:

- High acceptance of program interventions among families due to noticeable improvements in children's health.
- Prevalence of anemia in children six to 35 months decreased from 46 per cent to 25 per cent
- Prevalence of rickets in children six to 35 months decreased from 31 per cent to 29 per cent.



How can you help?

Sponsor a child

<https://children.worldvision.ca/sponsorship/Forms/Child.aspx?service=page/Child&lang=en&mc=3335312>

Gift catalogue—Emergency nutrition package

<https://catalogue.worldvision.ca/Gifts/Forms/Gift.aspx?giftId=2261>

Nutrition for a child for 2 months

<https://catalogue.worldvision.ca/Gifts/Forms/Gift.aspx?giftId=2253>

Vitamin A

<https://catalogue.worldvision.ca/Gifts/Forms/Gift.aspx?giftId=1925>

Mosquito nets

<https://catalogue.worldvision.ca/Gifts/Forms/Gift.aspx?giftId=1958>

Small animals

<https://catalogue.worldvision.ca/Gifts/Forms/Gift.aspx?giftId=2063>

<https://catalogue.worldvision.ca/Gifts/Forms/Gift.aspx?giftId=1438>

<https://catalogue.worldvision.ca/Gifts/Forms/Gift.aspx?giftId=1552>

Fruit trees

<https://catalogue.worldvision.ca/Gifts/Forms/Gift.aspx?giftId=1537>

Sprinkles

<https://catalogue.worldvision.ca/Gifts/Forms/Gift.aspx?giftId=1883>