



Source: Kaduha DH's Baho neza campaign, April 2019

breastfeeding and gender equity in communities, as well as cooking demonstrations. During this campaign which covered every cell in the district, community health workers trained parents on how to prepare a decent meal for the children as well as how to maintain proper hygiene for food consumption. World Breastfeeding Week held in August 2019 was specially supported by HINGAWEZE and CARITAS GIMBUKA, and was an opportunity to encourage breastfeeding with its good effects on children's nutrition.

3.2. Provision of fortified flour, milk and other nutrient supplement

More than 337 pregnant and lactating women and an average of 4450 malnourished U-5 children are monthly benefiting of fortified blended flour (FBF) and milk during 2019 (Source: Nyamagabe District, FBF and Milk distribution reports).

3.3. Agriculture and livestock

Nyamagabe district in collaboration with its partners (HINGAWEZE ACTIVITY USAID, CARITAS / USAID Gimbuka, UNICOOPAGI, etc.), contribute to behavior change by raising awareness of best agricultural practices, best post-harvest handling practices, the best feeding practices. They also encourage farmers to adopt improved seed varieties of beans and sweet potatoes. More than 4,260 have replaced native varieties of beans with iron-rich biofortified beans and 2,710 have sweet potatoes with orange flesh to prevent anemia and vitamin A deficiency. The vegetable garden is becoming a habit for local families.

The One Cow per Poor Family / program is being strengthened. In November 2019, 1059 cows (out of 1222 planned) had already been distributed to poor families in the Nyamagabe district to obtain milk for their children.

3.4. Implementing Water, Sanitation and Hygiene (WASH) programs

According to WHO, research shows that "chronic exposure of children in the environment to fecal germs can be a major cause of stunting". Unsafe water, inadequate sanitation and poor hygiene lead to repeated cases of diarrhea, which can quickly expel nutrients from the body when the intestine is overwhelmed. Intestinal worms can also cause nutrient diversion. Both types of infection can also trigger an immune response that can consume energy and nutrients. Poor sanitation can also lead to environmental enteric dysfunction, a chronic bowel disorder. This leads to a decrease in the absorption of nutrients. (Source: https://www.who.int/gho/mdg/environmental_sustainability/sanitation).

Since 2018, the Nyamagabe district, in collaboration with its partners, has been implementing a water, sanitation and hygiene survey intervention targeting entire communities. In September 2019, this enabled access to drinking water for 294,119 (80%) for a total population of 368,106, the construction of latrines for more than 20,000 households which increased to 65,928 (74, 75%) improved latrines. This fruitful partnership between the Nyamagabe district with non-governmental institutions, notably UNICEF & SFH, WATER AID RWANDA, MOUCECORE, etc...(Source: Nyamagabe district, DHU / WASH report) contributes to fight against malnutrition.

IV. BEST PRACTICE: VISIT OF FORTIFIED FOOD PROCESSING COMPANY BY NYAMAGABE DPEM TEAM

The awareness on fortified food consumption is among the strategies implemented by Nyamagabe District in tackling malnutrition. It is in this regard that on December 12, 2019 the District and DUHAMIC- ADRI organized a one-day visit to SOSOMA industries Ltd by nutrition decision makers at the district level and other stakeholders.

The visit enabled the Team to discover and understand the flour production and fortification process. The team was informed and delighted by at least eight varieties of flour produced by SOSOMA Industries, including two enriched (SOSOMA 2 enriched in vitamins and mineral salts and enriched CSB). After discussions, some recommendations from

the visit were as follows:

- i. SOSOMA Industries to forge links with farmers and wheat and corn cooperatives;
- ii. SOSOMA industries should improve the availability of its products in Nyamagabe district by opening "distributor stores" in the main shopping centers;
- iii. The food processing companies involved in food fortification should actively participate in the Open Days regularly organized by the Nyamagabe District.



GET INFORMED ABOUT NYAMAGABE NUTRITION

NYAMAGABE DISTRICT

DECEMBER 2019

Bulletin N°:4

Nyamagabe District aims to be the district free of all forms of Malnutrition.



Mr. Uwamahoro Bonaventure, Mayor of Nyamagabe District

Welcome Note

"Dear residents, partners and friends of Nyamagabe District, fighting all forms of malnutrition remains our priority. Many thanks for your contribution to eliminate stunting in our District."

The Content of the Bulletin N° 4:

- Reminder of the importance of Growth monitoring
- The performance achieved by health centers in Growth monitoring
- Summary of the main interventions for the fight against malnutrition at district level during the year 2019
- Best practice: Visit of a local Fortified food processing Company by Nyamagabe DPEM Team



Nyamagabe District, Southern Province

Introduction

Sustainable Development Goal 2 aims to end hunger, achieve food security and improved nutrition, and promote sustainable agriculture. Finding solutions to this immense challenge requires the engagement of every organization with a potentially positive role to play — and that includes the private sector. Businesses can get involved in multiple ways. Many companies are at the forefront of nutrition innovation and can contribute to sustainable food systems such as the development of affordable, proven, and cost-effective nutrition solutions that will impact SDG2. (Source: <http://t.devex.com/foo4SbJov2ooXBzKoLcMo1>: Role of the private sector in the fight against malnutrition). In the line with the 2nd UN's Sustainable Development Goals defined in 2015, they committed to achieve "no hunger by 2030". Since March 2019, DUHAMIC-ADRI under the financial support of SNV/Voice for Change (V4CP) closely worked with Nyamagabe District to promote the advocacy in the promotion of the fortified food as one of the strategy to tackle malnutrition. This nutritional bulletin is quarterly produced by DUHAMIC-ADRI under the financial support of SNV/V4CP and published on Nyamagabe website. Others stakeholders are welcome to financially support this important communication tool in Nutrition area.

OUR PARTNERS:



I. REMINDER OF THE IMPORTANCE OF GROWTH MONITORING

1.1. Definition of growth monitoring

Growth monitoring and promotion for children under five years old (U-5) is the regular measurement of a child's size in order to document growth (and discussing growth patterns with parents, involve parents in solutions related to growth concerns, counseling on infant and young child feeding, identifying and following-up on children with growth faltering). *Source: gateway.euro.who.int-monitoring-and-promotion-for-children-under-5*

1.2. Justification of growth monitoring

The growth monitoring is conducted because:

- Growth is the most sensitive indicator of health: normal growth only occurs if a child is healthy
- Growth assessment is an essential part of the examination or investigation of any child
- Allows objective detection of growth disorders at population level at earliest opportunity
- Early identification and treatment improves outcomes
- Identify under or over nutrition

Source: (https://slideplayer.com/slide/6092785)

II. THE PERFORMANCE ACHIEVED BY HEALTH CENTERS IN GROWTH MONITORING

2.1. The monthly growth monitoring of the children in Nyamagabe HCs during the period of October-November 2019

In Rwanda, monthly monitoring of the growth of U-5 is carried out at community level by CHWs, supervised by health care providers from health centers (HC). People among those screened who show signs of malnutrition receive nutritional support and are ultimately transferred to the nearest HC and those with severe acute malnutrition with complications are transferred to the district hospital for hospitalization, in accordance with national policy nutrition. Between October and November 2019, an average of 38,082 (71.2%) children out of 53,462 in the Nyamagabe district was followed. This, compared to 72.8% of the children followed during the period from October to November 2019, shows a slight decrease in performance. In general, progress has been made over the past 5 months (July -November 2019) since, at the end of June, a total of 36,150 (67.4%) have participated in the program out of the 53,640 expected. This means a gradual increase of 3.8%.

Table 1: Growth monitoring of children U-5, October-November 2019

Total number of children under 5 expected	Months	Children U-5 Years screened	Percentage
53,462	October	38 270	71,6
	November	37 894	70,9
	Average	38 082	71,2

Source: Data from Nyamagabe HCs, December 2019

2.2. The performance of health centers in monitoring the growth of children U-5 years old.

In September 2019, at the quarterly meeting, the Nyamagabe District Plan to Eliminate Malnutrition (DPEM) team suggested closely monitoring the performance of growth monitoring and malnutrition screening by health services. The results of Table 2 on the analysis of growth monitoring reports provided by health centers in Nyamagabe district, showing their performance in growth monitoring:



Table 2: Monitoring of growth performance in the Kaduha DH area, October-November 2019

Name of HCs	Children u-5 expected	Children u-5 years who screened	% of children u-5 screened	Good nutrition status	%	Number of children wasted	%
BURUHUKORO	3,934	2,828	71.9	2,801	99.1	27	0.94
KIBUMBWE	2,101	1,954	93	1,948	99.7	6	0.31
KADUHA	3,453	2,835	82.1	2,802	98.8	33	1.16
MUGANO	3,035	1,445	47.6	1,431	99	14	0.97
JENDA	3,129	1,950	62.3	1,936	99.3	14	0.72
MUSHUBI	2,148	2,247	104.6	2,225	99	22	0.96
MUSEBEYA	3,141	1,568	49.9	1,561	99.6	7	0.45
NYARWUNGO	2,759	1,939	70.3	1,926	99.4	13	0.64
RUGEGE	2,587	2,202	85.1	2,164	98.3	39	1.75
TOTAL	26,287	18,749	72.1	18,794	99.1	173	0.91

Source: HMIS, Nyamagabe District Data from HCs, December 2019

In Kaduha DH's area, an average of 72.1% of targeted U-5s was reached. Mushubi HC reached with more than 100% of the expected U-5s detected, a surplus of children coming from Musebeya Sector. This partly explains why Musebeya HC, which covered only 49.9% of the expected target, was enregistered and Mugano HC monitored 47.6% of the total number of children targeted. The causes of this poor performance are not yet clear and require further investigation. As shown in Table 3 below, during the October-November period, Kigeme DH zone monitored growth at 78.9% of the expected objective. Compared to the last quarter, this represents an increase of 6.1%.

Table 3: Growth monitoring performance of Kigeme DH's area, October-November 2019

Name of HC	Children U-5 expected	Children U-5 Years who screened	% of Children U-5 screened	Good nutrition status	%	Number of children wasted	%
CYANIKA	3,680	2,492	67.7	2,471	99.2	21	0.84
KIBIRIZI	3,220	2,395	74.4	2,383	99.5	12	0.50
KIGEME	2,963	2,967	100.1	2,967	100	0	0.00
KITABI	2,321	1,915	82.5	1,882	98.3	33	1.72
MBUGA	3,413	2,856	83.7	2,835	99.3	21	0.74
NGARA	1,780	1,167	65.6	1,157	99.1	11	0.90
NYAMAGABE	2,693	2,082	77.3	2,068	99.3	14	0.67
NYARUSIZA	2,036	1,503	73.8	1,481	98.5	22	1.46
SHABA	1,496	1,186	79.3	1,174	98.9	13	1.05
UWINKINGI	3,583	2,893	80.7	2,878	99.5	15	0.52
TOTAL	27,184	21,454	78.9	21,293	99.2	161	0.80

Source: Nyamagabe District HCs, HMIS, U-5 children monthly growth monitoring, December, 2019

III. SUMMARY OF THE MAIN INTERVENTIONS FOR THE FIGHT AGAINST MALNUTRITION AT DISTRICT LEVEL DURING THE YEAR 2019

In Rwanda, stunting due to malnutrition is 38% in children under the age of five. Prime Minister Dr Ngirente Edouard said that there was hope that this number would be considerably reduced in the future given the different programs in place to combat malnutrition. Programs include distributing fortified flour to vulnerable parents with children under the age of five, working with community health workers to dialogue with parents of malnourished children so that they can be taken to health centers for treatment, as well as the organization of various campaigns that encourage mothers to breastfeed their infants (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4232245>).

3.1. Promoting behavior changes for good Nutrition

In Nyamagabe District, two campaigns were conducted:

- “BAHO NEZA INTEGRATED CAMPAIGN” with interventions focusing the family planning, deworming, Vitamin A supplementation, screening of malnutrition, provision of micronutrient power/ONGERA conducted in April 2019.
- “SUPPORTING BREASTFEEDING TOGETHER” / World Breastfeeding Week implemented in August with a focus on