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In collaboration with





USAID
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Maternal and Child
Survival Program



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Day 3: Data collection and use approaches – community level: Nutrition data at the community level Mozambique

Luisa Maringue, Nutrition Technician
MoH / Mozambique

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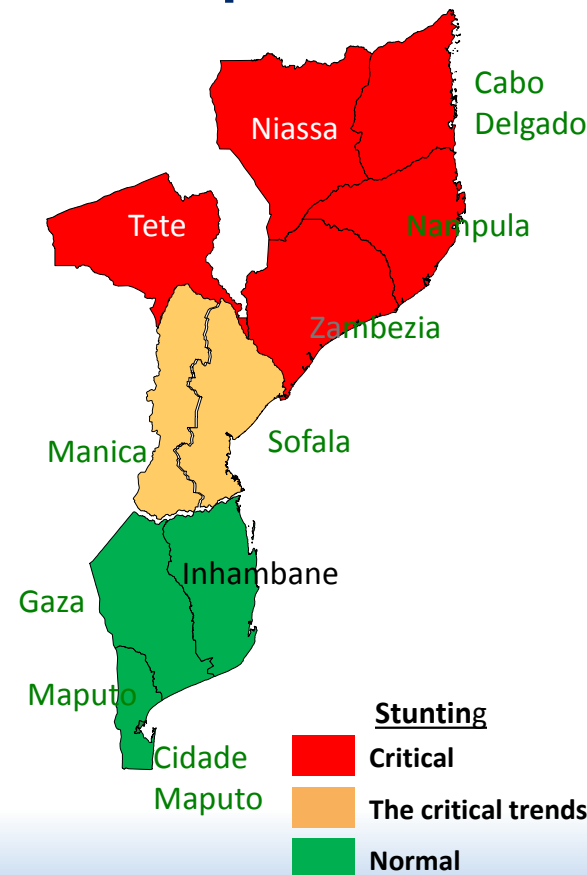


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- Nutritional situation in Mozambique
- Community Outreach – nutrition
- Nutrition data at the community level
- Constraints
- Challenges

Nutritional Situation in Mozambique

Indicator	National Data	Source
Wasting prevalence children <5 y	6%	DHS 2011
Stunting prevalence children <5 y	43%	DHS 2011
Underweight prevalence children <5 y	15%	DHS 2011
Anemia prevalence children 6-59 months	64%	IMASIDA 2015
Anemia prevalence women 15-49 y	54%	DHS 2011
Vitamin A deficiency prevalence children 6-59 meses	69%	MISAU 2006



Community Outreach



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- The strategy that MISAU blocked was to fortify the community involvement for promotion, prevention and referral of cases for treatment in the Health Unit.

Key nutrition interventions offered through community outreach



Vit.A supplementation
including Deworming



Anthropometric measurement



Nutrition education sessions & Culinary demonstrations

Key actors involved in Nutrition at Community (I)



Polyvalent Elementary Agent (APE)

- A member of the community selected by other community members and trained by the national health system (NHS), to provide preventive, curative and promotional services in that community.
- They receive a standardized monthly subsidy and report data to the NHS.
- Currently Mozambique has 3,576 APEs.



Key actors involved in Nutrition at community (2)



❑ Community health activists (CHAs) – volunteers elected by the community based on their experience and availability to volunteer, many times supported by specific projects/NGOs

- Receive non-monetary incentives (e.g., t-shirts, caps, bicycles, others)
- May receive a non-standardized monetary incentive-



Key actors involved in Nutrition at community (3)

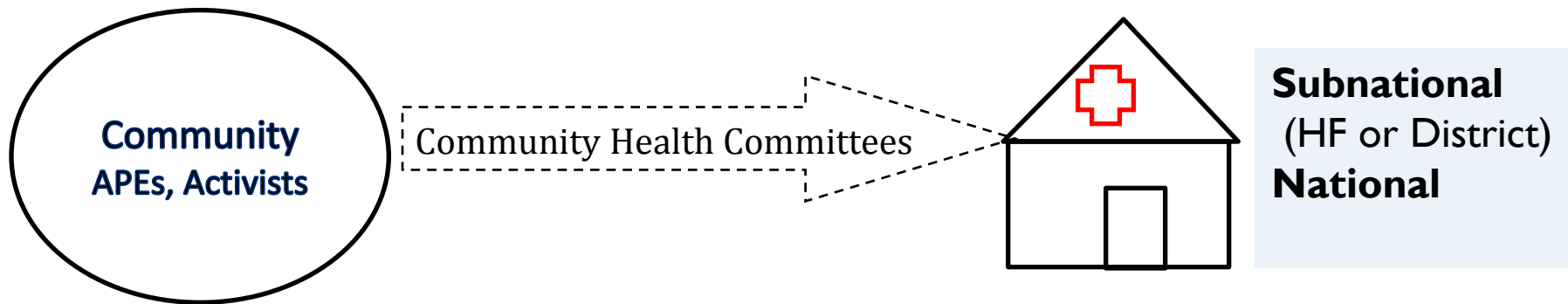
- Traditional practitioners
 - Traditional birth attendants (TBAs)
 - Traditional healers

Trained to identify signs of malnutrition and support care seeking practices
- All these actors are coordinated by a community health committee



Ideal flow of community nutrition data

- Community nutrition data should flow as follows:



Sample of Registration Tools Used by APEs

APE Registration Book

Parte 1 - Livro de Registo de Actividades de Promoção de Saúde, Prevenção de Doenças e de Adesão ao Tratamento do Agente Polivalente Elemental

Nome do APE : _____ Ano: _____

Nº. de doentes de TB falhosos/abandonos fornecido pela US para a busca activa durante o mês _____

Nº. de doentes em TARV/PTV falhosos/abandonos fornecido pela US para a busca activa durante o mês _____

Nº. total da população na área de saúde do APE (Só em Janeiro) _____

Nº. total de famílias na área de saúde do APE (Só em Janeiro) _____

"VISITAS DOMICILIÁRIAS"				OUTRAS ACTIVIDADES PREVENTIVAS (marque X na coluna correspondente a actividade realizada e escreva o nome na coluna "outra actividade")				TRANSFERÊNCIAS (marque X na coluna correspondente ao motivo da transferência)				"PALESTRAS"		MORTES NA COMUNIDADE (marque X na coluna correspondente ao grupo alvo da pessoa que morreu na comunidade)																	
Registo do domicílio	Nº. de pessoas contactadas no domicílio para Promoção/Prevenção	Nº. de pessoas contactadas para adesão ao Tratamento de TB ou TARV		Data				Data																							
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Família/Casa visitada	Recém-nascidos (0-28 dias)	Crianças 1 mês - 5 anos	Mulheres grávidas e pós-parto (até 42 dias do parto)	Outros	Doente com tuberculose	Pessoa em TARV ou PTV (mulher grávida, Lactante, e outros grupos alvo)																									

Outras actividades preventivas		Transferências para US		Participante de Palestras		Palestras realizadas	
	Cloroxidina nos recém-nascidos (0-28 dias)		Recém-nascidos (0-28 dias)		Total de Participantes nas palestras		Malária
	Vitamina A (2ª dose do ano)		Vacinação incompleta				Diarreia e Saneamento do Meio
	Novas latrinas construídas		Consulta pré-natal/mulheres grávidas				IRAs
	Outra actividade		Consulta pós-parto				Saúde Materna Infantil
			Planeamento Familiar				Nutrição
			Desnutrição aguda grave ou moderada				Planeamento Familiar
			TB abandono identificado e encaminhado				Outros temas
			Pessoa em TARV/PTV abandono identificado e encaminhado				TOTAL DE PALESTRAS
			Sinal geral de perigo				
			Outras causas				
			TOTAL DE TRANSFERÊNCIAS				

Monthly summary

Nutrition Data 2016

Interventions	Health Facilities	APEs	Activists	% community-level contribution
Vitamin A Supplementation	2536889	89899	124367	5%
Deworming (Mebendazole)	3370944	116323	126475	3%
Nutrition Screening	169156	7723	21392	11%
Nutrition education sessions	177944	7113	104411	36%

Constraints

- APE data reported through a parallel database (i.e., not aggregated with health facility data)
- Community health activists supported by NGOs use parallel reporting tools and data does not flow through the health facility
- Irregular supervision of Community Health Workers/Volunteers from Health Facility Workers
- Lack of coordination and standardization between partners supporting communities

Way Forward

- Improve the coordination among community partners
- Standardize the data collection tools
- Ensure regular and timely reporting of data to all community stakeholders at the nearest health facility



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THANK YOU
KHANIMAMBO

