

Management of Acute Malnutrition: Integration, PHC and Future Direction

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Acknowledgments

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Integration of SAM and MAM Programming

- High coverage of SAM treatment (>90%), has the potential to be the most impactful and cost-effective nutrition intervention (Bhutta et al., 2013), though rarely is this level of coverage reached.
- Community Health Workers (CHWs) treating SAM in community has been proposed as an approach to increase coverage.

Integration cont.

Studies have shown that CHWs can identify and treat uncomplicated cases of SAM, achieving cure rates above the minimum standards and reducing default to less than 8%.



Findings to date suggest that early detection and treatment in the community can increase coverage of SAM in a cost-effective manner. (López-Ejeda, et al. 2018)

Involving government leadership is key!

Truly partner with MOH





Integrate into government structures

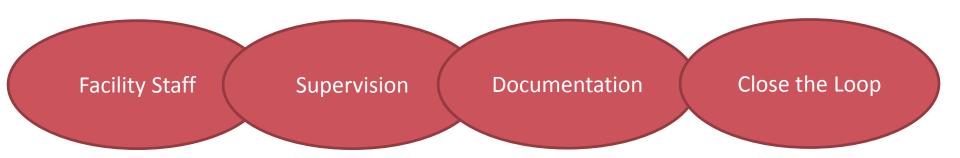
One supply chain system!



Building Capacity of Community Health Volunteers

- Tailored Trainings for CHVs (and simplified tools!)
- Supervision
- Supporting CHVs through incentives/recognition (and be ready to scale up)
- Clear plan for handling commodities at community

Building Referral Mechanisms



Identification beyond CMAM programming (I)



IYCF Groups

Photo: Grace Funnell, Action Against Hunger USA

Identification beyond CMAM programming (II)



Family (Mother) MUAC

Photo: Lys Arango for Action Against Hunger, Kenya

Future Direction

	Opportunities	Outcomes
Global Level	UN Joint Statement	 Normative Guidance Global EML
National Level	Test and Adapt	 National EML National Policies & Guidance

...getting from Policy to ACTION!



For more information, please visit www.mcsprogram.org

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