

UNICEF HUMANITARIAN ACTION REPORT 2009

NIGER

PREVENTING MALNUTRITION: HEALTHY ADVICE FROM A FRIENDLY NEIGHBOUR

Community health worker Gomma Saïdou, 50, is a welcome guest in the homes of her neighbours. Smiles brighten the faces of women and children as this genial grandmother gently guides families towards better childcare practices in Safo Nassaraoua, in south-central Niger's Maradi region.

"Four years ago," says Gomma, "the village selected ten of us women to be trained as community health workers. I was already a traditional birth attendant, so that's why they chose me."

To extend health coverage to underserved villages, UNICEF and its partners equip village volunteers to teach families home-based health-care practices for their children. Training includes subjects such as disease prevention through good hygiene and improved nutrition, recognizing signs of malnutrition and illness, and knowing how and when to access health care.

These lessons are especially pertinent as Niger combats an ongoing nutrition emergency. A July 2008 survey revealed that 10.7 per cent of children under age five are acutely malnourished nationwide and that close to 40 per cent are stunted.

Gomma sees evidence of the nutrition emergency in her village. As a member of the community-based growth promotion team, she helps monitor the growth of children under age three by weighing them monthly.

"While mothers wait to have their babies weighed," Gomma says, "we give them practical tips on exclusive breastfeeding, age-appropriate feeding practices and household hygiene." Mothers of underweight children receive individual counselling on how to create balanced meals. Children identified as malnourished are referred for treatment at one of the over 800 UNICEF-supported feeding centres.

"A week after we weigh the children," says Gomma, "I visit the homes of women with underweight children to see if they have been able to follow our advice." Children with low or borderline weights are at risk of malnutrition. Today she stops by the home of Amina Mamane, 43, and her 11-month-old daughter Sharifa. A week ago, the baby's weight was barely within the normal range for her age.

Times are hard for Amina. Both she and her husband work in the fields to grow enough food for their family of six. Amina's husband also hires out as a labourer in other fields to earn money for food because the family's granary is empty and harvest is two months away. "We've had two bad years in a row," explains Amina, "but the crops look better this year."

Gomma understands what Amina is experiencing because she raised her family in similar circumstances. When she asks about the baby's health, Amina says, "I stayed home from the field today because Sharifa is sick. I also need to pound millet for the children." Amina will make a beverage of millet and water for the family to drink till they can afford to buy the ingredients for their next meal.

As Gomma engages in small talk, she adds a little humour to lighten Amina's spirits. Then she reminds Amina of steps to fight malnutrition and improve her baby's health.

Insufficient food intake is but one cause of malnutrition. Factors such as the availability of health care, access to lifesaving information, and clean water and hygiene also play a role. Gomma includes these elements in her advice to Amina, "Remember to use clean water for the millet drink. If Sharifa's symptoms worsen, take her to the health centre right away for free treatment. Don't forget to bathe the children and keep the yard swept."

Amina nods as she listens attentively. She thanks Gomma for her concern about the baby's health. When Gomma takes her leave, Amina accompanies her to the gate. Then Gomma walks down the street to the next home to share vital malnutrition prevention information in the form of a friendly visit from a caring neighbour.