Update on Global Efforts to Scale-up Management of Acute Malnutrition

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Consultation with RUTF Suppliers
Copenhagen, 18th October, 2010
• Acute undernutrition
  – low weight for height
  – Severe wasting = severe acute malnutrition (SAM)
  – Moderate wasting = moderate acute malnutrition (MAM)
• Chronic undernutrition
  – Stunting = low height for age
• Underweight
  – low weight for age – not specific for distinguishing acute and chronic undernutrition
• Micronutrient deficiencies
  – cross cutting
Burden undernutrition (children < 5 years) concentrated in 24 most affected countries

- 17 Million - severely wasted [range 1-7%]
- 32 Million - moderately wasted [range 4-15%]
- 156 million stunted [range 15-60%]

Source: UNICEF State of the World Children 2010
Wasting prevalence is at emergency levels in many African and Asian countries

Percentage of children under 5 years old who are moderately or severely wasted

A Two-Step Process for Scaling Up Direct Nutrition Interventions

**Step 1: Investment of US$5.5 billion**
- US$2.9 billion
  - behavior change programs
- US$1.5 billion*
  - micronutrients
  - deworming
- US$1.0 billion
  - capacity development for program delivery
- US$0.1 billion
  - monitoring and evaluation
  - operations research and technical support for program delivery

**Step 2: Investment of an additional US$6.3 billion**
- US$3.6 billion*
  - complementary feeding to prevent and treat moderate malnutrition
- US$2.6 billion
  - treatment of severe acute malnutrition
- US$0.1 billion
  - monitoring and evaluation
  - operations research and technical support for program delivery

Evolution of SAM Management

1970: Household - Cow Milk + Sugar + Oil
1980: Hospital - Cow Milk + Sugar + Oil + Vitamin and Mineral Premix
1990: Feeding center - Therapeutic Milk (F-75 and F-100)
2000: Outpatient Health Facility - MUAC, ATB, Vaccines, Antimalarials, Micronutrients

Feeding center - Therapeutic Milk (F-75 and F-100)
Community - Ready to Use Therapeutic Food
Integrated prevention and management framework
Community based management of acute malnutrition

COMMUNITY MOBILISATION

- Preventative interventions:
  - Infant & young child feeding,
  - Micronutrients disease prevention and treatment,
  - Hygiene & sanitation

Supplementary Feeding of Children with MAM

Outpatient Management of Children with SAM

Hospital Management of Children with SAM
Community-based management of Severe Acute Malnutrition (SAM)

- Most children with **SAM without medical complications** can be treated as outpatients at accessible, decentralised sites using RUTF following simple protocol.
- Children with **SAM and medical complications** are treated as inpatients with F-75 and medical care.
- Community level identification essential for early detection.
- Using MUAC – facilitates work of community-based case finders.
## Progress

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*Community of Independent States*
Challenges

• SAM not always recognised as problem
• Uncertainty on the global burden of SAM (calculation of incidence)
• Gap in cost effectiveness data for advocacy
• Ensuring funding
• Reluctance on use of imported foods
• Capacity of health care systems to take on treatment of SAM in terms of staffing, logistics, monitoring and supervision
Making nutrition programmes work

• Analyze and address bottlenecks
  – Programme acceptance, political will, community ownership, access, sustainability, behavior change, resources (human, financial)
• Innovative approaches
  – Programme delivery – community management SAM/MAM, child health days, complementary feeding package
  – Proven products (RUTF, supplementary food, micronutrient powders)
  – Market based - private sector role,
  – R&D: MAM, newly wed package, nutrition investment models
• Linkages e.g. teenage pregnancies, education, WASH, social protection, cash transfers
• Improve evidence base – prove it works
Way forward to address SAM...

• Integrated approach of interventions embedded at community level
  – Get concept (community management of SAM) adopted, accepted, implemented
  – Capacity development
  – Behavior change
  – Supply chain management
  – Technical support
  – Monitoring and evaluation

• Increase access to RUTF (demand and supply)
Thank you!