



# USAID/Food By Prescription

July-Sep., 2013



**Update**

## USAID/FBP Launches Phased Transition of Facilities to Government

USAID/FBP designed a strategy of phased transition of health facilities to ensure Nutritional Assessment, Counseling and Support (NACS) is sustainable and well integrated into government's health system. The program that has been launched in 2009 is now progressing to its closing period. Consequently, 141 facilities from all the six regions were assessed during the last quarter with 16 major indicators believed to determine their readiness for handover.

Region	No of Green Facilities	No of Yellow Facilities	No of Red Facilities	Total Facilities Evaluated
Addis Ababa	9	11	7	27
Amhara	12	5	8	25
E Oromia	14	13	3	30
SNNPR	10	16	2	28
Tigray	17	1	3	21
W Oromia	6	4	0	10
<b>Total</b>	<b>68</b>	<b>50</b>	<b>23</b>	<b>141</b>
<b>Percent</b>	<b>48%</b>	<b>35%</b>	<b>16%</b>	<b>100%</b>

According to the assessment result, the number of facilities qualified for transition stood at 68 from the total number which is closer to half. Reports will be shared on strengths and gaps to fortify their strengths and improve on weakness. Gaps identified will be filled while handing over the facilities as well as progress assessment will be carried out following handover.

All the 68 facilities ready for handover (in green category) have already handed over to the government. Activities are also ongoing to hand over remaining assessed facilities after filling gaps.

According to the strategy, gap filling activities will be carried out for the facilities that fall under yellow category (ready with minor correction) within a month period and then they will be ready for transition within two months. The same process will be followed for facilities under the category of red to make possible correction for handover after reassessment.

## Fulfilling Staff Development Plan with Trainings

The capacity building team of USAID/FBP has identified staff development needs relevant to performance of the program. Accordingly, five trainings were organized including project management, leadership, grant management, finance for non finance managers and communication skills.

Most staff have participated in two or more of these trainings which have important input for individual professional development plan as well as help enhance program delivery.



Participants of second round Project Management training

### Annual Review Meetings Underlines Reinvigorated

#### Move to Integrate NACS

USAID/FBP program performance review meetings are held annually at regional levels with the involvement of government - representatives of health bureaus, health facilities and HIV/AIDS Prevention and Control Offices (HAPCO).



*Part of Addis Ababa Region's annual review meeting in Bushoftu*

The review meetings held in USAID/FBP operational regions made a thorough deliberation on issues of data quality, capacity building, assessment and counseling service, quality improvement and status of initiative to address commodity misuse as well as phased transitions of health facilities.

The meetings emphasized the reinvigorated move to integrate NACS in the health facilities, woreda health offices and health bureaus for the sustainability of the program.

### Media Intervention to Promote Proper use of RUTF/RUSF

Various media messages were produced and implemented so as to curb the growing trend of RUTF/RUSF misuse. The misuse of the products are reflected in selling to third parties, sharing within the family and neighbors and stealing as well as distributing in black market for use by people who are not affected by or are not malnourished.



*One of the field pretesting of media messages*

It has been found to be imperative to develop media awareness raising strategy to help address the widespread use of plumpy' nut without the proper prescription by qualified health professionals.

The media messages were designed as per communication strategy crafted with involvement of relevant stakeholders mainly Food, Medicine and Health Administration and Control Agency (FMHACA) and professionals in the field of media. The messages developed are television and radio spots, posters as well as brochure and waiting room video.

All the messages have passed through field pretest. The television and radio spots have been already aired where as the publications (posters and brochure) and waiting room video are being distributed to health facilities.

### **NACS Beneficiaries Getting Back-to-Work**

Food processing and supply cooperative has created employment for its thirteen members who were beneficiaries of Nutritional Assessment, Counseling and Support (NACS) with the opportunity given by Saba Limestone, a private manufacturing company.

After regaining their health with therapeutic foods in various health facilities of Tigray regions, the beneficiaries were given training on how to manage small business as well as on work ethics and life skill to enable them get back to work. They

formed a cooperative among others to achieve economy of size and getting access to market and obtaining service easily. As part of discharging its social responsibilities, Saba Limestone on its part has given opportunity to the cooperative to process and supply food and spices for its canteen that serves more than 700 staff.



*Some of the members of the cooperative*

Even if it is only eight months since the cooperative started processing and supplying food and spices, it is able to accrue over 30,000 birr capital. The back-to-work initiative has been introduced by USAID/FBP aimed at linking PLHIV who are NACS graduates to employing companies so that they would not relapse back to malnutrition after they recover from their previous situation. The program has supported more than 300 PLHIV to be linked to various private companies since 2012. Currently close to 1,000 beneficiaries took skill trainings to be linked to similar companies.

### **National Assessment on RUTF/ RUTF Misuse**

USAID/FBP has been conducting assessment to measure the prevalence of Ready to Use Therapeutic Food (RUTF) and (Ready to Use Supplementary Food (RUSF) misuse in its operational regions.



*One of the interview sessions to collect data in East Oromia*

Data was collected from 280 beneficiaries with interview and the result of the study to be released soon. The assessment is helpful in identifying the contributing factor for the misuse of the products besides determining its prevalence. The result of the assessment will be shared in the next edition of *Update* as well as to relevant stakeholders.

In an effort to contain misuse of these products, coordination meetings were conducted in various towns of USAID /FBP's operational areas during the ended budget year so as to raise awareness of relevant stakeholders about the purpose of RUTF/RUSF and to highlight how far the misuse is depriving people suffering from malnutrition. Media messages which came as recommendation of the meetings

has been also effected to help contain the problem.

### Few Questions to Samson Tekeste

USAID/FBP has been supporting NACS program in 15 hospitals and 40 health centers in Addis Ababa region. Samson Tekeste, Family Health Case Team Head with the region's Health Bureau answers few questions.

**How do you see phased transition of USAID/FBP program?**

It is good that the transition will be made in phases. This means we have chance to learn from experiences and correct weakness.

**What is your experience regarding length of phase out?**

USAID/FPB has informed us on the phase out before a year. The maximum time we know so far is three months.

**How far NACS is fairing in Addis Ababa Region?**

To me, Addis Ababa has been neglected for long concerning nutrition with misconception that it is a big city. There has not been any humanitarian organization in the region working in nutrition area. USAID/FPB program contributed a lot to move

forward in integrating NACS to the system and reach needy people specifically people living with HIV.

**What makes certain that the program is sustainable?**

We have assigned NACS focal persons from health facility to sub city levels so that to ensure accountability. We will also implement on site capacity building strategy to fill gaps in providing the services without interruption. The distribution of therapeutic and supplementary foods through PFSA will be also sustainable as far as we adhere to periodical reporting and follow up. The integration of plan and performance reporting from regional level to lowest health system will also plays vital role for sustainability of the program.



#### Nutrition and Communicable Diseases

When a person is infected with a communicable disease, the activation and maintenance of immune responses requires increased energy consumption. Malnutrition is a critical yet underestimated factor in susceptibility to infection, including susceptibility to the "big three" infectious diseases: HIV/AIDS, tuberculosis and malaria. Infection causes energy loss on the part of the individual, which reduces productivity on the community level and perpetuates an alarming spiral of malnutrition, infection, disease and poverty. Hence, it is essential to address the nutritional requirements of individuals who have infections in general and infections such as HIV, tuberculosis and malaria in particular.

#### Government of the Federal Democratic Republic of Ethiopia National Nutrition Programme; 2008-2015; National Nutrition Programme Implementing Sectors Declaration

We, as a government, found the high malnutrition rates reported in EDHS and various surveys over the years completely unacceptable. We shall work through enhanced strategic partnerships to prioritize the elimination of malnutrition from Ethiopia as one of the most viable strategies for achieving the Growth and Transformation Plan and the Millennium Development Goals. Attainment of positive nutrition outcomes will be achieved through evidence based programming and responsiveness and the promotion of accountability towards these results by each Ministry.

*(Minister of Health, Minister of Education, Minister of Industry, Minister of Water and Energy, Minister of Trade, Minister of Agriculture, Minister of Labor and Social Affairs, Minister of Finance and Economic Development, Minister of Women, Children and Youth Affairs)*

The contents of this "Update" is the responsibility of FBP and do not necessarily reflect the views of USAID or the United States Government.