



REFRESHER TRAINING OF HEALTH STAFF ON COMMUNITY MANAGEMENT OF ACUTE MALNUTRITION (CMAM) AND INFANT AND YOUNG CHILD FEEDING PRACTICE (IYCF)

Introduction

Since June 2016, International Medical Corps has been supporting the implementation of a Community Management of Acute Malnutrition (CMAM) in 4 selected OTP outreach sites in MMC and Jere LGAs of Borno State, Nigeria

International Medical Corps' integrated approach is intended to address immediate health and malnutrition concerns, as well as malnutrition's underlying causes. The integration of health and nutrition services within the 4 OTP sites will enable the achievement of maximum impact of these intersecting activities. The programme focuses on capacity building of primary health care staff to provide sustainable community management of acute malnutrition services, and on institutionalizing the CMAM program on Integrated Management of Childhood Illness (IMCI). The program is also more focused on the behaviour change communication activities related to Infant Young Child Feeding (IYCF) through Care Group mothers approach on the prevention aspects.

The training of twenty five (25) Health staff, and 14 NGO staff (IMC, NRC, & Mercy Corp) was conducted for six days at Barwee hotel for Dikwa and Nganzai LGA on August 22nd – 27th August, 2016. The training was facilitated by the Simon Karanja and Ann Marie both from Technical Rapid Response Team, Mrs Ladi Ezike and Mrs Rose Samson as nutrition consultants.

Day One

The Training was conducted in Barwee hotel Maiduguri, Borno state, the training started at about 9:00am with registration of the participant, followed by opening speech by the director primary health care development agency Maiduguri represented by state nutrition officer Mrs Ladi Ezike in her speech she called on the participant to pay attention during the training period and make use of what they learn during the training into practice at their clinics and LGAs, she said Borno state has been faced the challenges of insecurity that has led to loss of lives and property leaving most of the population displaced within Maiduguri and its environs, she further said International Medical Corps' integrated approach is intended to address immediate health and malnutrition concerns, as well as malnutrition's underlying causes, The program will also focus on the behaviour change communication activities related to Infant Young Child Feeding (IYCF), she called on participant to educate community members on how to prepare balance diet to their children to reduce the risk of malnutrition, lastly she thanked IMC for supporting the State.

This was followed by introduction of training objective, CMAM objectives and Overview of CMAM, causes and consequences of Malnutrition, CMAM component, measuring MUAC, weight for height, reading a weight for height table, and classification of acute malnutrition by Simon Karanja. Practice session was conducted by Mrs Ladi, Lunch and prayer break was observed at 1:30- 2:30pm. At about 2:30-3:30pm Mrs Ladi presented admission, referral, and discharge criteria, medical check up both initial and follow up, systemic medical treatment protocol in the management of SAM. Mrs Rose took the last session on systemic nutritional treatment, key messages for OTP/RUTF, inpatient care for SAM/MAM, practical session, then lastly the days review and closing prayer.

Cross-section of pictures during the training



Day Two

Day two of the training started with opening prayer by one of the participant at about 9.00am, Followed by recap of day one activities moderated by one of the facilitator Mrs Rose, who then continued with presentation on beneficiary registration, recording into OTP card, and monthly tally sheet in monitoring and reporting of SAM cases. Mr Karanja continued with performance indicator, then 20 minutes was given for tea break, he then continued after the break with management of MAM in which admission, referral, discharge criteria, targeted supplementary feeding program, blanket supplementary feeding program, B/SFP reporting, monitoring and evaluation was discussed. Lunch/prayer break was given to all participants by 2.00 pm. Mr Karanja

continues after lunch with case load estimation for SAM, MAM, and estimating supplies. Mrs Rose led the group work and 2nd day review. Day two came to an end with closing prayer at about 4.45pm.



Day Three

The third day of the training started at 9.00am with recap of day two activities followed by presentation on micronutrient intervention, and deficiencies by Mrs Ladi, then 15 minutes break, after the break mr Karanja presented on mobilization strategies, active case findings, mass MUAC screening, and mothers understand and can do it. Lunch and prayer time about 2/00pm, after lunch there was group work case study led by mrs Rose, followed by post test sharing of result and discussion for CMAM.

Cross section of pictures during the training



Day four

Day four of the training started with recap of day three activities then followed by ground rules, objective, expectation and pre test by Annemarie, she then continued with IYCF refresher (importance of IYCF and recommended practices), myths and misconceptions, there was 15 minutes break, Annemarie continue after the break with link between IYCF and IYCF-E, assessment of a mothers baby pair, lunch and prayer time at about 1.45pm, mrs Rose presented on breastfeeding first aid and counselling technique, followed by code of marketing breast milk substitutes, 15 minutes break was given for prayers at about 3.30, after prayers there was overview of policy and guidelines Nigeria and the recap of day 4. Day 4 came to a close at about 4.50pm.

Cross section of pictures during the training



Day Five

Day five of the training started with Annemarie continued with non breastfed infants, needs assessment, there was 15 minutes break, she continued with monitoring and reporting, and integration of IYCF-E in CMAM, lunch and prayer at about 2.00pm, Mrs Rose presented on IYCF-E intervention, Mrs Ladi presented on IYCF-E in Borno, recap of day five and post-test by Annemarie.

Cross section of pictures during the training



Day six of the training started at about 9.00am, Mr Karanja introduced the care group, mapping and identification, Mrs Rose presented on conducting community assembly, Mr Karanja continued with organizing volunteers,

assessment of IYCF practices in the community, orientation of peer counsellors, Mrs Rose led the session on action planning, and implementation, Mrs Ladi concluded with monitoring, evaluation and documentation, review, discussion, and wrap up, followed by vote of thanks by the state nutrition officer

The following point was agreed at the end of the training

1. Management of malnourished children will be according to national guideline.
2. They will Strengthen mobilization for good CMAM coverage,
3. They will strengthen IYCF practice in their catchment areas.

CHALLENGES:

- Low technical capacity and poor English skills of some of participants led to minimal active participation among them in the training. This also required frequent information reinforcement in local language that disrupted the schedule timings.
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RECOMMENDATIONS

- There should be refresher training at least after six months.
- Staff trained to immediately initiate OTP/IYCF activities with the resources they currently have.

CONCLUSION

- The training successfully came to conclusion at about 3.00pm on Saturday 27th August 2016.