



EFFECTIVENESS OF THE NUTRITION IMPROVEMENT PROGRAM ON INFANT AND YOUNG CHILD FEEDING AND NUTRITIONAL STATUS

Cameroon Baptist Convention Health Services, Cameroon

The Challenge

Despite renewed international focus on nutrition, there is limited emphasis on nutrition capacity building. In countries like Cameroon, where stunting is 33%, the prevalence of child malnutrition remains high.¹ Infant feeding counselling by health professionals can increase caregivers' knowledge and improve breastfeeding, complementary feeding and overall child nutrition.² Feeding counselling is primarily conducted by mid-level nurses or community volunteers. However, there is currently limited research to demonstrate how nutrition capacity development is incorporated at the professional, organisational or systematic levels.



PATH/Evelyn Hockstein

The Intervention

Cameroon Baptist Convention Health Services' (CBCHS) Nutrition Improvement Program (NIP) aims to improve the nutritional status of mothers and infants, especially those who are HIV-positive or HIV-exposed. It provided training in infant and young child feeding (IYCF) practices to health providers and incorporated IYCF counselling into its health services, such as its prevention of mother-to-child transmission of HIV programme. Nutrition counsellors participated in a three-month course on maternal nutrition, exclusive breastfeeding and complementary feeding. After training and a six-month hospital internship, counsellors are posted at a CBCHS facility and provide nutrition counselling at maternal and child health and outpatient clinics.

The Evaluation

This study was conducted in the Northwest and Southwest regions of Cameroon over one year. Its purpose was to evaluate the existing NIP approach and its impact on infant nutrition. The target population was

infants up to eight months and their caregivers. The secondary population was the nutrition counsellors. Four NIP sites were selected as treatment sites, and four non-NIP sites were selected as comparison sites. The research team collected health data at all sites, conducted IYCF questionnaires with caregivers and held caregiver focus group discussions. Additionally, nutrition counsellors also participated in focus group discussions. The outcomes of interest were infant nutritional status, IYCF acceptability and infant feeding practices.

The Results

Overall, the evaluation demonstrated a positive impact of NIP on caregivers who received nutrition counselling at a CBCHS facility. Infants between 0 and 5 months at CBCHS facilities were almost 7 times more likely to be exclusively breastfed compared to the comparison sites. There was a small difference in complementary feeding practices, but it was not significant. NIP infants also had lower rates of stunting (21.3% for 0–5 months; 12.6% for 6–8

months) compared to the non-NIP sites (34.7% and 48.2%). However, infants 0 to 5 months were significantly more likely to be wasted (8.2% vs. 0%). Overall, caregivers had respect for the nutrition counsellors and trusted their advice on infant feeding. Nutrition counsellors felt that they needed additional refresher trainings on nutrition and other health issues.

The Lessons Learnt

During data collection, some collectors did not use the correct form according to age or did not fill out the form correctly. For example, the age of infants was not given in a consistent format (months and weeks). To remedy this, the research team provided additional training for the collectors and changed the questionnaire form to collect the birth date instead of age. Prior to data analysis, the research team realised that the infants' genders were not collected in the IYCF questionnaire. To ensure the results could be representative, data collectors reached out to caregivers again over telephone to gather the missing information.

Looking Ahead

This evaluation contributes to existing evidence that IYCF counselling with well-trained counsellors can increase the rate of exclusive breastfeeding and reduce the rate of stunting among infants. It especially demonstrates the importance of integrating IYCF counselling at various entry points: antenatal, maternity and outpatient clinics. Future studies should look at combined nutrition counselling in the clinical setting with trained community nutrition counsellors, as research has shown that the highest increase in exclusive breastfeeding occurs when interventions occur concurrently in the community and through the health system.

References

¹ Institut National de la Statistique (INS) et ICF. *Enquête Démographique et de Santé et à Indicateurs Multiples du Cameroun 2011*. Calverton, MD: ICF ;2012. p. 423. Available at <https://dhsprogram.com/pubs/pdf/FR260/FR260.pdf>.

² Sunguya, B., et al., Effectiveness of nutrition training of health workers toward improving caregivers' feeding practices for children aged six months to two years: a systematic review. *Nutrition Journal*. 2013;12(1): p. 66.

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