

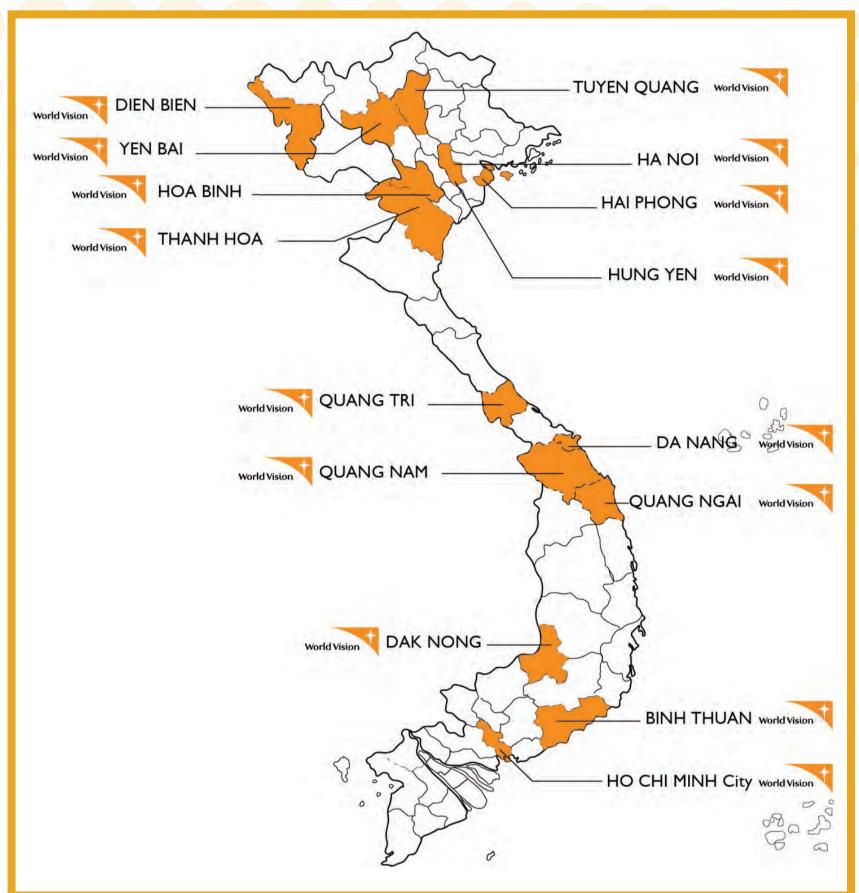


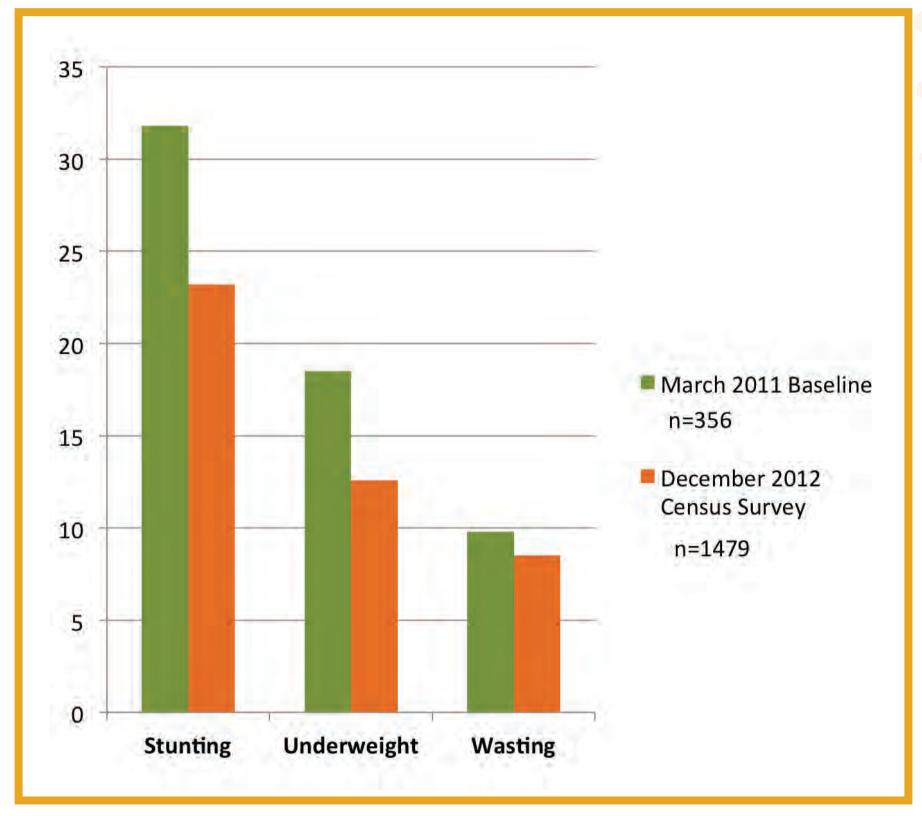
The Nutrition Club approach: Community mobilisation to prevent child malnutrition

Authors: Dr. Nguyen Anh Vu¹ and Mary Dunbar²

ntroduction

Vietnam has made commendable progress in reducing child malnutrition, reducing the rate of children with chronic malnutrition (stunting) from 43% in 2000 to 23% in 2011 (Vietnam Multi Cluster Indicator Survey 2011). Despite this decrease, the rate of chronic malnutrition in ethnic groups in remote mountainous provinces is twice as high as the national average. To address the challenge of reducing malnutrition in remote areas, World Vision Vietnam, in collaboration with government agencies, has achieved the rapid scale up of 'nutrition clubs'.





Nutrition Club model contributed to reduced malnutrition rate among children U5 in Tien Lu Area Development Programme

A nutrition club is an integrated, community-based and community-led behaviour change initiative that involves monthly meetings of caregivers of children under five years old (U5). The meetings are facilitated by community members and involve group discussions and interactive games about child care, nutrition, infant and young child feeding practices, and hygiene. Regular child growth monitoring is conducted, along with visits to households with malnourished children. Nutrition club members also access community interest groups, such as saving groups and livelihoods.

Community ownership and sustainability of the approach is promoted by mobilising and utilising existing resources, such as close involvement of community leaders and community health workers, and a small participant membership fee (to cover the cost of refreshments and communication materials and the use of the community meeting hall and utilities). The community development board and World Vision have an agreement that support for operating costs will gradually be reduced and discontinued after four years. The alignment of the Nutrition Club approach with government policy and priorities also helps to ensure sustainability. Monitoring and supportive supervision is conducted by a team of government district and health centre staff.

Discussions

Remote rural communities have demonstrated that they can sustain the Nutrition Club approach with minimal external resources. The strength of this approach is the cross-sector partnership, utilisation of existing community structures and resources, and community ownership. The next step is to strengthen the quality of the monitoring and supervision component and identify ways to ensure that ongoing refresher trainings are conducted for village development boards and nutrition club facilitators.

Conclusions •

Nutrition Clubs are a sustainable and effective approach to improve child nutrition in Vietnam.

¹National Health Coordinator, WV Vietnam ²Nutrition and Health Specialist, WV International

Results

From 2007 to 2013, the Nutrition Club approach was scaled up to cover 29 of the most remote and vulnerable districts in Vietnam. A total of 521 nutrition clubs cover 41% of the WV Vietnam target coverage area villages, reaching approximately 17,029 children per month.

Caregivers report:

- improved complementary feeding practices
- increased access to home gardens, chicken raising, livelihoods and micro-credit interest groups.
- increased support for infant and young child feeding from household members
- regular growth monitoring is valued
- increased uptake of maternal and child health services

In addition

- 1,000 nutrition club facilitators trained
- 521 village development boards have increased capacity for child nutrition
- Local health staff have increased capacity in facilitation skills and in monitoring nutrition interventions
- Older nutrition clubs have demonstrated sustainability without external support
- The Government of Vietnam is committed to scale up nutrition clubs beyond the World Vision areas

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