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DELEGATED COOPERATION ON NUTRITION (DCAR)

JANUARY 2015 – JUNE 2017

\$5 MILLION

OVERVIEW

Afghanistan has some of the highest levels of malnutrition among children and women in the world. More than 40 percent of Afghan children less than five years old have stunted growth -- a symptom of chronic malnutrition. Stunting has life-long repercussions. The WHO estimates that adults who were stunted as children earn 20 percent less than non-stunted individuals. This impacts both the nation's productivity and long term development. In Afghanistan, malnutrition is linked to a two percent decrease in gross domestic product.

In 2015, the U.S. Agency for International Development (USAID) contributed \$5 million through a Delegated Cooperation to Global Affairs Canada (GAC), which leads Canada's international development and humanitarian assistance, to support an ongoing nutrition program in Afghanistan for one year. GAC was funding two projects aimed at improving the skills of service providers and

households to prevent and treat malnutrition in 12 Afghan provinces. The NGOs World Vision implemented the project in Ghor, Herat, and Badghis; while Save the Children targeted Bamyan, Daykundi, Kandahar, Jawzjan, Faryab, Kunduz, Takhar, Nangarhar, and Sari Pul.

DCAR supported the two ongoing GAC projects. The Maternal, Under-5 Nutrition and Child Health (MUNCH) project, implemented by World Vision, aimed to strengthen existing Afghan health systems to deliver quality nutrition services and products through the Basic Package of Health Services (BPHS). The activity also helped strengthen targeted communities to respond to the nutritional needs and priorities of women and children. The Improving Nutrition for Mothers, Newborns and Children in Afghanistan (INMNC) project, implemented by Save the Children Canada, aimed to improve the nutrition status of newborns, children under five, and women of reproductive age.

ACTIVITIES

- Trained doctors, midwives, nurses, and community health workers on preventive and therapeutic nutrition services.
- Improved access to water, sanitation and hygiene (WASH) interventions.
- Developed dietary diversification with animal and plant food options, as well as techniques for food preservation and preparation.
- Improved capacity of the government to plan, implement and evaluate nutrition-related activities.

ACCOMPLISHMENTS

- More than 8,300 trained on nutrition.
- Expanded treatment for moderately malnourished children using a community based approach in 490 villages. This intervention was a combination of stunted and healthy families. Replicated care and feeding practices of mothers with properly nourished children to mothers with malnourished children in the same community
- Nearly 158,400 children with acute malnutrition treated through health facilities supported by the activity and over 7,630 pregnant women registered, visited, and received Time Targeted Counseling
- Trained staff from about 160 health facilities in the targeted provinces on how to manage acute malnutrition among children
- At least 36 Family Health Action Groups (FHAG) established, with about 1,370 members trained on Infant and Young Child Feeding.
- Nearly 43,700 households with newborns visited and received Post Natal Care and newborn nutrition messages.
- About 340 new health posts started implementing Community Birth Registers; nearly 670 health posts now provide monthly updated Community Birth Registers.
- USAID jointly worked on the concept note and disseminated the final Results and Lesson Learned from the MUNCH and INMNC in March 2017.

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