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**WFP Nutrition and HIV programming in Cabo Delgado**

**Activity:** National Programme for Nutrition Rehabilitation (PRN)
Moderate Acute Malnutrition (MAM) treatment programme and community-based demand generation for services

**Donor:** Department for International Development (DFID) [UK]

**MAM TREATMENT PROGRAMME - PRN**

- **PRIMARY BENEFICIARIES**
  - 1,430 CU5 / MONTH
  - 575 PLW / MONTH

WFP supports the Ministry of Health to treat acute malnutrition in pregnant and lactating women (PLW) and moderate acute malnutrition (MAM) in children under five years of age (CU5) within the PRN in 38 districts across six provinces, among them Cabo Delgado. A total of **64 health facilities in 11 districts of Cabo Delgado are covered by WFP:** Balam, Ibo, Macomia, Mecúfi, Meluco, Metuge, Muidumbe, Namuno, Nangade, Pemba city and Quissanga.

The main activities implemented by WFP are:

- procurement and delivery of specialized nutritious foods;
- capacity strengthening of government health staff at provincial and district levels;
- monitoring and evaluation; and
- demand generation

**DEMAND GENERATION FOR MAM TREATMENT PROGRAMME - PRN**

- **1,700 CU5 SCREENED / MONTH**
- **770 PLW SCREENED / MONTH**

Together with the local government in Cabo Delgado, WFP conducts a community-based activity that involves community health workers identifying and referring PLW and CU5, including those with HIV, for treatment of acute malnutrition. It also includes community debates on topics related to malnutrition treatment services and HIV/TB treatment.

Additionally, the project will start working with a community radio in the next month, where messages related to these topics and live interviews with community members are discussed and success stories disseminated.

An interactive Tableau dashboard for this projects’ M&E can be found [here](#).

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Tropical Cyclone Kenneth made landfall in Cabo Delgado in April 2019. In emergencies, unsafe living conditions, a heightened risk of sexual violence and negative coping strategies (such as commercial sex and sex for food) contribute to an increased rate of HIV transmissions. In addition, services break down and access to HIV treatment is often interrupted. For PLW, this exposes their unborn child to a greater risk of mother-to-child transmission.

As part of emergency relief efforts in Cabo Delgado, WFP partnered with the International Organization for Migration (IOM) to provide services for PLHIV/TB and HIV-vulnerable populations—particularly PLW, their husbands and their children. With support from One UN, WFP partnered with Pathfinder International to implement this project in five districts: Ibo, Macomia, Meluco, Metuge and Quissanga. The main objective was to increase the access to HIV/TB services at community level, through counselling and testing, and referral of positive cases of HIV and TB to health facilities.

The mortality rate for PLHIV/TB, who begin treatment while malnourished, is 3-5 times higher than for those who are well-nourished. Therefore, WFP expanded target groups for PRN services for PLHIV/TB in this project, providing Specialized Nutritious Foods for MAM treatment, and trained community health workers on MAM screening and treatment.

Counselling services were provided, both within communities and at health centres, to support treatment adherence and retention in the programme.

As a part of the same project, WFP also partnered with the Mozambican Institute for Social Communication (ICS) to carry out demand creation through an education/entertainment campaign in the same districts. ICS conducted activities such as spot broadcasting and video projections followed by community debates on topics of HIV, TB and nutrition.

Videos and loudspeaker messaging were used to disseminate information for people living with HIV/TB (PLHIV/TB) about nutrition, the importance of testing, and health seeking behaviour. Community debates were also held to discuss these topics.

These activities aimed at raising awareness of the programme, reducing stigma surrounding HIV, and emphasized the importance of testing and treatment for HIV and TB. Topics included HIV/TB prevention and treatment; undernutrition related to HIV in PLW; HIV infant and young child feeding; and available services for HIV and TB at health centres.

The project has currently stopped, but the need remains great due to the deterioration of the security situation in the province—causing internal displacement and limiting their access to healthcare services. The COVID-19 emergency is also playing a role in exacerbating disruptions to the provision of HIV/TB services, making PLHIV in this province even more vulnerable.